

Horizon Nursery First Aid Policy



*Updated: March 2020
Ratified: April 2020*

To be read in conjunction with:

*The College Health & Safety Policy
The Nursery Health & Safety Policy*



FIRST AID POLICY

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SECTION 1 General Policy Statement

Horizon Community College accept responsibility under the Health and Safety (First Aid) Regulations 1981 and acknowledge the importance of providing first aid for employees, children and visitors within the nursery.

Horizon Community College is committed to the Authority's procedure for reporting accidents and recognise their statutory duty to comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

The provision of first aid in the nursery will be in accordance with the Schools Strategic Assurance Standard for Accidents and Incidents (Adverse Events).

Health and safety legislation places duties on employers for the health and safety of their employees and anyone else on their premises. At Horizon Nursery, this includes responsibility for the Manager and all staff, children and visitors (including contractors).

Horizon Community College recognises the BMBC, Corporate Health, Safety and Emergency Resilience Unit, who will be consulted for advice on recommendations for improvement in accordance with the Service Level Agreement in place.

The Governing Body will agree a policy that ensures that it fulfils its statutory responsibilities in respect of first aid provision for Nursery activities and facilities.

This policy will be reviewed annually and ratified by the Governing Body.

Signed _____
(Executive Principal/Principal / Nursery Representative)

Date: _____

Signed: _____
(Chairperson of the Governing Body)

Date: _____

SECTION 2 Statement of First Aid Organisation

The aim of first aid is to reduce the effects of injury or illness suffered at work. Sufficient first aid personnel and facilities will be available to:

- (i) Give immediate assistance to casualties with both common injuries and illness which are likely to arise from specific hazards at work
- (ii) Call for an ambulance or other professional help

The minimum first aid provision in this nursery will be:

- (i) Suitably stocked first aid container placed in the reception area of the nursery environment
- (ii) An appointed person to take charge of first aid arrangements
- (iii) Information for employees on first aid arrangements
- (iv) A procedure for managing accidents

Additional first aid provision will be determined using the first aid risk assessment attached to this document.

The arrangements at the Nursery for carrying out the policy extends to the Governing Body, the employer and the employees and as detailed below:

The employer (HCAT) is responsible, under the Health and Safety at Work Act 1974 (HSWA), for making sure that Horizon Nursery has a Health and Safety Policy. This includes arrangements for first aid, based on a risk assessment of the nursery and covers the following areas:

- Number of first aiders/appointed persons
- Location of first aid containers
- Arrangements for off-site activities

Section 3 Duties

a) The Governing Body

The Governing Body will:

- (i) Approve a First Aid Policy
- (ii) Review the policy once per year
- (iii) Ensure that the Manager has the resources to implement the policy
- (iv) Monitor the implementation of the policy

Additionally, the Governing Body accept their responsibilities towards visitors to the nursery. To provide first aid for children and visitors, the Governing Body will undertake a risk assessment to determine, in addition to the appointed responsible person, how many persons with a Paediatric First Aid Certificate of competence are required.

b) The Executive Principal/Principal

The Executive Principal/Principal is responsible for ensuring: -

- (i) All accidents are reported, recorded and where appropriate investigated
- (ii) All occasions when first aid is administered to employees, children and visitors are recorded
- (iii) The nursery premises and vehicles are equipped with apparatus and materials to carry out first aid treatment
- (iv) Arrangements are made to provide training to employees and records are maintained of that training and reviewed annually
- (v) A procedure for managing accidents in the nursery which require first aid treatment is established
- (vi) Employees are provided with information regarding the arrangements for first aid
- (vii) A Risk assessment of the first aid requirements of the nursery is undertaken on an annual basis

c) Nursery Manager

The Nursery Manager is responsible for line managing the staff with paediatric first aid qualifications.

In addition, the Nursery Manager will: -

- (i) Ensure that arrangements for first aid are in place covering the nursery day
- (ii) Ensure that the nursery staff are complying with the requirements of the First Aid Policy and carrying out their duties and responsibilities effectively
- (iii) Keep records in relation to training in First Aid, copies of certificates and rearrange training as required

d) Employees

All employees are required to: -

- (i) Comply with their employer's arrangements for first aid
- (ii) Report any adverse events which could give rise to or have resulted in an accident

The nursery staff conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Nursery staff in charge of children are expected to use their best endeavours at all times, particularly in an emergency situation, to secure the welfare of children at Horizon Nursery in the same way that parents/carers might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

Section 4 Arrangements for First Aid

4.1) Materials, equipment and facilities

The nursery will provide materials and facilities as set out below:

a) First Aid Box/Kits

There is currently 1 first aid box placed in the reception area of the nursery and a travelling first aid kit to be used when children are taken off the premises.

First aid containers will be:

- (i) Maintained in a good condition
- (ii) Suitable for the purpose of keeping the items referred to above in good condition
- (iii) Readily available for use; and
- (iv) Prominently marked as a first aid container

The availability and contents of the first aid box/kit and other medical supplies will be checked on a regular basis by the Nursery Manager. They will also be responsible for all record keeping including:

- (i) Keeping first aid signage up to date
- (ii) Maintaining an inventory of the location of first aid box/kit/supplies
- (iii) Recording when first aid box/kit were checked for sufficient and in-date supplies

The Nursery Manager will ensure that first aiders are qualified to carry out their duties and certificates are in-date. Further training will be arranged as and when required.

b) Paediatric First Aid Certificate

This qualification is obtained through a 2-day course and an assessment. The paediatric first aid course is recognised by Ofsted for Early Years (EYFS) and meets Childcare Registration requirements. The main duties of a first aider are to:

- Give immediate help to casualties with common injuries or illness and those arising from specific hazards at the nursery
- Ensure that an ambulance or other professional medical help is called if it is deemed necessary

The role of the qualified First Aider includes the treatment of any person on the nursery site/premises whether or not they are an employee, child, contractor or member of the public

A Paediatric First Aid certificate is valid for three years. If a certificate expires, the individual will have to undertake another full course of training to become a First Aider.

4.2) Information on first Aid arrangements

The Executive Principal/Principal will inform all employees at the nursery of the following:

- The arrangements for recording and reporting accidents
- The arrangements for first aid
- Those employees with qualifications in first aid
- The location of first aid boxes

In addition, the Executive Principal/Principal will ensure that signs are displayed throughout the nursery providing the following information:

- Names of employees with first aid qualifications
- Location of first aid box

4.3) Assessment of First Aid Requirements

The minimum number of nursery employees with a Paediatric First Aid certificate is 50% of the total employees. There is no maximum number.

4.4) Record Keeping

The Nursery Manager will maintain records of staff who are qualified, when certificates expire and when re-training is taking place.

Section 5 Accident Reporting

The Governing Body will monitor the implementation of the Trust Procedures for reporting:

- All accidents to employees
- All incidents of violence and aggression

The college is aware of its statutory duty under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) in respect of reporting the following to the Health and Safety Executive as it applies to employees.

Detailed guidance on the reporting of accidents can be found in the Schools Strategic Assurance Standard for Accidents and Incidents (Adverse Events).

Section 6 Child Accidents Involving Head Trauma

The Nursery recognises that accidents involving a child's head can be problematic because the injury may not be evident (e.g. internal) and the effects only become noticeable over time.

Any minor injuries are reported to parents/carers and an Accident/Incident form (at the end of this document) is completed by staff and signed by the parent/carer. These reports also include any advice given to parents/carers in the management of the injury.

Any head injury is recorded on the Head Injury Notification Form at the end of this document. A copy is given to parents/carers. The Accident/Injury form **must** also be completed. This form also contains a head injury monitoring form within it and **must** be completed for all head injuries.

Section 7 Transport to Hospital or Home

The Executive Principal/Principal or designated person will determine a reasonable and sensible action to take in the circumstances of each case.

- Where the injury is an emergency an ambulance will be called following which the parent/carer will be called.
- Where hospital treatment is required but it is not an emergency, then the Nursery Manager or designated person will contact the parents/carers for them to take over the responsibility of the child.

THE NURSERY IS NOT RESPONSIBLE FOR PROVIDING TRANSPORT TO HOSPITAL OR HOME.

Section 8 Associated Advice

Blood Spillages and bodily fluids (including vomit)

A COSHH assessment should be obtained and displayed with the supplies for dealing with body fluids and clinical waste. The procedure for dealing with bodily fluids is:

- Put on plastic apron and disposable gloves
- Clean up the spillage with hot soapy water and disposable paper towels
- Spray the area with anti-bacterial solution, dry the area and ensure a warning sign is placed
- Place all used towels and used disposable gloves in a nappy bag and seal. Ensure the bag is placed in the clinical waste bin
- Wash hands

Clinical Waste and Contaminated Injuries

Clinical waste is disposed of in yellow bags as this colour identifies the contents as bodily fluids or waste. The nursery's clinical waste and hygiene services provide appropriate bins for nappies and body fluids. All staff follow nappy changing procedures with nursery children.

If it is thought that biological pathogens have entered the body via a contaminated injury, the Corporate Strategic Assurance Standard for Contaminated Injuries should be referred to for further guidance.

Contaminated injuries include:

- Human bites
- Scratches by humans
- Injuries caused by an object contaminated with visible blood

- Needle stick injury/injury with a needle
- Exposure to blood borne viruses (e.g. hepatitis B, hepatitis C, Human Immunodeficiency Virus (HIV))

Nursery Journeys

The provision of adequate first aid cover should form part of the essential risk assessment involved in organising any off-site activity.

Where journeys are close to populated areas, or the likelihood of injury is minimal, then an appointed person or someone with a working knowledge of first aid procedures should accompany the group, and a travelling first aid kit should be provided.

Access for Ambulance

Unobstructed and adequate access should be maintained for ambulances and for ambulance staff and their equipment. Suitable signs should be displayed if deemed appropriate.

Hospital Consent Forms

It is unlikely that the nursery staff accompanying children to hospital after accidents will be asked by the hospital to sign consent forms but if asked, they must decline.

The hospital will have procedures for obtaining consent from other sources if the parents/carers are not available.

Religious Considerations

Due to religious convictions, some families choose to decline certain medical procedures or treatments. If this is made known to the nursery, children's record cards should have an appropriate entry regarding this, and this should be known to the First Aider or teacher who may have the duty of taking the child to hospital in emergency if the parent/carer is not available.

Children with Medical Conditions

If it is deemed necessary, staff will undertake training to meet the individual needs of that child., e.g. intermittent catheterisation, auto-immune injectors or support for children with diabetes.

Contaminated Injuries

Additional, specific advice on dealing with contaminated injuries is available in the [Contaminated Injuries Strategic Assurance Standard](#) available on the BMBC Health and Safety website.

Section 9 Sun Protection

The Nursery will aim to:

- provide access to the outdoor environment, unless to do so would be dangerous.
- provide sunscreen and a sunhat (if parents do not provide them), parents/carers **must** inform nursery staff of any allergy to sunscreen products, including the brand used by nursery, which will be no less than factor 15, hypoallergenic, water resistant and protects against UVA/UVB (4 star). If a child is allergic to the sunscreen provided by nursery, the parent/carer **must** provide suitable sunscreen for the child in a container with the child's name and date clearly labelled.
- limit children's exposure to strong sunlight between 11am and 3pm.
- provide access to drinking water during the day and encourage children and staff to drink water regularly.
- provide opportunities within activities to talk to children about the dangers associated with over exposure to the sun, appropriate to the age of the child.

Section 10 Illness, Medication and Illness Exclusion

ILLNESSES AND MEDICATION

It is the policy of Horizon Nursery to encourage and promote good health and hygiene for all the children in our care. This includes monitoring the children for signs of communicable diseases. If the staff are of the opinion that a child is ill, then the parent/carer will be contacted and requested to collect the child as soon as possible. This is in the interests of the welfare of the sick child and the remaining children of the nursery. Parents/carers are asked to inform the Nursery Manager if their child is absent because he/she has a communicable disease to enable us to raise awareness with other parents.

There is a list on the notice board in the Nursery office, which shows the minimum periods of which children should be excluded from nursery dependent upon the illness/condition. It is also included in this policy.

The staff of the nursery must be convinced that the child has returned to good health before he/she will be re-admitted to the nursery.

In the case of a serious illness, the parent will be contacted immediately, along with a medical professional, and the appropriate action will be taken. In the event of the parent/carer not being available, the senior member of staff will assume charge and, if necessary, take the child to hospital along with all the relevant details.

If a child requires medication during the time he/she is in nursery then the parent/carer must sign the medication book daily, giving details of the medicine, dosage and times to be administered.

A signed record of all medication administered shall be made in the book and must be witnessed by another staff member. All staff will check that the said medication has not gone past its expiry date.

All medication must be in the original container with the pharmacist or doctor's instruction of dosage on the container.

The nursery will administer non-prescribed medication for a period of three days, provided it is in the original container and the medication book has been signed. After this time medical attention should be sought. If medical advice has been sought and the doctor suggested an over the counter medication, then please obtain a letter signed and stamped by the doctor stating this.

Ibuprofen will only be given if prescribed by a doctor for a specific illness or condition.

If the administration of prescription medicines requires technical/medical knowledge, then individual training will be accessed from a qualified health professional. The training will be specific to the individual child concerned.

All medicines will be stored in a cabinet out of reach of children or in the refrigerator in the kitchen.

Reporting of Injuries, Diseases and Dangerous Occurrences

The following will be reported to the Incident Contact Centre and Ofsted / BSCB at the earliest opportunity.

- Deaths
- Major Injuries
- Over 3-day injuries
- Injuries where the victim is taken to hospital
- Work related diseases
- Dangerous occurrences: where something happens that does not result in a reportable injury but could have done
- Sudden serious illness
- Incidences of food poisoning affecting more than one child in the nursery

**MINIMUM EXCLUSION PERIODS FROM NURSERY FOR
ILLNESS/COMMUNICABLE DISEASE**

Disease/Illness	Minimum Exclusion Period
Antibiotics prescribed	First day at home
Temperature	If sent home ill, child must be off for 24 hours.
Vomiting	48 hours from last episode of vomiting
Conjunctivitis	No exclusion, should be treated
Diarrhoea	48 hours from last episode if diarrhoea
Chickenpox	5 days from onset of rash, or longer if spots still weeping
Gastro-enteritis, food poisoning, salmonella or dysentery	Until authorised by District Community Physician
Infective Hepatitis	7 days from onset of jaundice (or seven days after symptom onset if no jaundice)
Measles	4 days from appearance of rash
Meningococcal infection	Until fully recovered from illness
Mumps	Exclude child for five days after onset of swelling
Pertussis (whooping cough)	Five days from commencing antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment
Poliomyelitis	Until declared free from infection by District Community Physician
Scarlet fever and streptococcal infection of the throat	Child can return 24 hours after commencing appropriate antibiotic treatment
Tuberculosis	Always consult local HPU before a child can return to nursery
Typhoid fever	Until declared free from infection by District Community Physician
Impetigo	Until lesions are crusted and healed, or 48 hours after commencing antibiotic treatment
Pediculosis (head lice)	No exclusion, should be treated
Plantar warts	No exclusion. Should be treated and covered
Ringworm of scalp	Until cured
Ringworm of body	Seldom necessary to exclude provided treatment is being given
Scabies	Child can return after first treatment

ACCIDENT / INCIDENT FORM

Name of person completing the form		Did you witness the accident?	Yes / No
Were there any additional witnesses	Name	Signature	
Date of accident		Time of accident	
Child's Name		DOB	

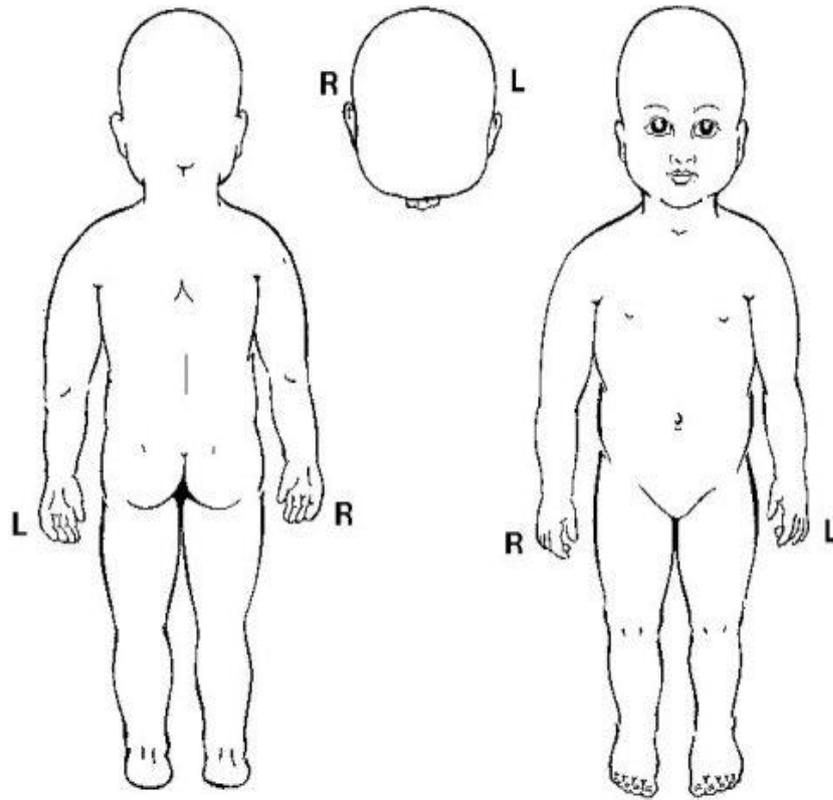
THE ACCIDENT/INCIDENT

Where did the accident/incident occur?
How did the accident/incident occur?
What are the nature of the injuries? <i>(mark on body map if there is a visible mark, if there is no visible mark note in this box and strike through the body map)</i>

TREATMENT/ACTION

What treatment was given and who administered it?	
How was the child monitored/treated?	
Who monitored/treated the child?	
Signature of staff member completing form	

Accident/Incident Unisex Body Map



INFORMING PARENT/CARER

Who was informed about the accident/incident?	
Relationship to child	
Signature of person receiving Injury Notification	
Date and time informed	
How was the parent/carer informed? (<i>ie telephone, collection</i>)	
Name of person informing parent/carer	

Any further comments

If this related to a head injury please attach a copy of the Head Injury Notification Form to this form

Head Injury Monitoring Form

The Duty Manager must be informed immediately of **all head injuries**. If the accident/incident form does not indicate that the child is being removed from nursery (picked up by parents or seeking medical attention), a monitoring form must be completed.

Part 1 – 10-minute checks

All children sustaining **an injury to the base of their neck or above** should be checked (using the guidance on the Head Injury Notification Form) every 10 minutes for the first half an hour following the injury. If the child has signs of trauma as detailed on the head bump notification form at any of the following check times, **go straight to Part 3**.

	Time:	Staff name	Staff signature
10-minute check			
20-minute check			
30-minute check			

Part 2 – Comments and Actions at the time of the 30-minute check

Please write about the child's current health state at half an hour following the injury, referring to the guidance on the Head Injury Notification Form. If the child is not well and is presenting with signs of trauma (as indicated on the Head Injury Notification Form) please detail the action taken following the 30 minute check or earlier as instructed at Part 1 or **tick the box if no further action is necessary and complete the date, time and signature sections**.

Staff member name	If no further action necessary (please tick) <input type="checkbox"/>	
	Action Taken	
Date	Time completing form	Signature

This form must be passed to the duty manager immediately following completion of parts 1, 2 and 3, **unless there is no further action necessary**. In which case it must be passed to management with the accident and head injury notification forms following completion of the parent's signatures.

The Duty Manager (or a person nominated by the duty manager) must see the child and complete part 3 immediately unless the no further action box has been ticked. In which case a member of the management team should sign part 3 when auditing in line with all other forms

Duty Manager / Nominated person Name	Comments	
Date	Time completing form	Signature

EXTERNAL TREATMENT *(if applicable)*

Was medical attention sought? Was an ambulance called? Was the injured party taken to hospital? If so, where were they taken and by whom?

Manager/Assistant Manager to check form to ensure the information is accurate and complete.		
Manager signature		Date
		Time
Assistant Manager signature		Date
		Time

EXISTING INJURY FORM

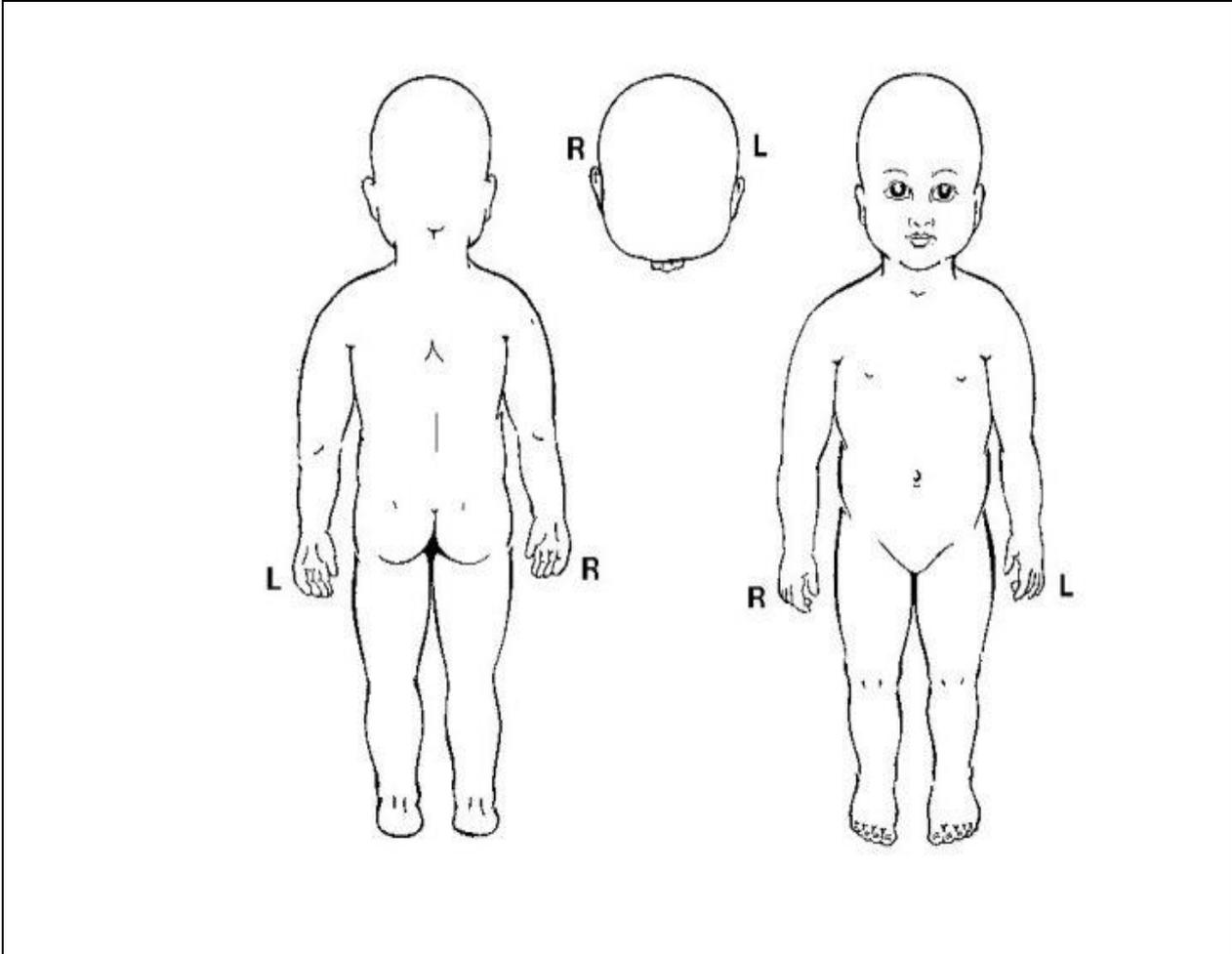
Name of staff completing the form		Signature of staff filling in the form.	
Parent informing of details	Name	Signature	
Date of injury		Time of injury	
Child's Name			DOB

THE ACCIDENT/INCIDENT

<p style="text-align: center;">Where did the accident/incident occur?</p>
<p style="text-align: center;">How did the accident/incident occur?</p>
<p>What are the nature of the injuries? <i>(mark on body map if there is a visible mark, if there is no visible mark note in this box and strike through the body map)</i></p>

EXISTING INJURY CONTINUED

Existing Injury Unisex Body Map



3. Did the child strike their head without a fall?

yes	no	Not witnessed
-----	----	---------------

On what did they strike their head?

<input type="checkbox"/>	Sharp corner	<input type="checkbox"/>	Rounded corner
<input type="checkbox"/>	Flat surface	<input type="checkbox"/>	Do not know

What was the item?

Respond to each question A, B and C by placing a tick in the appropriate boxes

A Following the accident did any member of staff observe the following on the child's head:

B Did the child display any of the following symptoms:

<input type="checkbox"/>	Blood
<input type="checkbox"/>	Graze
<input type="checkbox"/>	Cut
<input type="checkbox"/>	Bump
<input type="checkbox"/>	Bruise
<input type="checkbox"/>	No Visible mark
<input type="checkbox"/>	Raised Temperature

<input type="checkbox"/>	Loss of consciousness for any length of time
<input type="checkbox"/>	Dizziness
<input type="checkbox"/>	Nausea
<input type="checkbox"/>	Vomiting
<input type="checkbox"/>	Temporary loss of memory
<input type="checkbox"/>	Headache

Other.....

Other.....

C Medical details

(i) Does the child have a medical illness?

(If yes please state)

yes	no
yes	no

(ii) Is the child on medication?

D Is there any other information that a paramedic/doctor needs to know?

Staff Signature: Date:

Horizon Nursery

Head Injury Notification Form



HEAD INJURIES
What to look out for

1. *Your child **MUST** attend a hospital Accident and Emergency department if they:
 - a) lose consciousness.
 - b) have a seizure (fit).
 - c) are repeatedly sick.
 - d) are unusually sleepy or you cannot wake them.
 - e) have a headache that is getting worse.
 - f) are unsteady when they walk.
 - g) develop a squint or blurred vision, or they start to see double.

Go to A&E if your baby has a minor head injury and continues to cry for a long time.

2. Children with apparently minor injuries should be watched carefully, especially for the first 48 hours to check for any changes in their condition.
3. Use a paediatric paracetamol to relieve a headache (if required), but if the headache persists for more than 24 to 36 hours medical help should be sought. (always read the manufacturer's instructions and never give aspirin to children under 16 years of age).
4. Make sure that your child avoids rough play for a few days.
5. Make sure that your child has plenty of rest.
6. Avoid getting them too excited.

*** If you need to attend A&E with your child please take this form with you and inform the Centre.**

Name of Child.....

Time of injury Date of Injury

Location of accident

Respond to questions 1, 2 or 3 by placing a tick in the appropriate box

1. Did the child fall or injure their head on the ground? yes no Not witnessed

Was the floor/ground surface:

<input type="checkbox"/> Concrete	<input type="checkbox"/> Tarmac
<input type="checkbox"/> Grass	<input type="checkbox"/> Soft play surface
<input type="checkbox"/> Wood	<input type="checkbox"/> Tile
<input type="checkbox"/> Carpet	

Other

2. Did the child fall and strike their head whilst falling? yes no Not witnessed

On what did they strike their head?

<input type="checkbox"/> Sharp corner	<input type="checkbox"/> Rounded corner
<input type="checkbox"/> Flat surface	<input type="checkbox"/> Do not know