



## Accidents and First Aid

At Brightsparks we aim to protect children at all times. We recognise that accidents or incidents may sometimes occur. We follow this policy and procedure to ensure all parties are supported and cared for when accidents or incidents happen; and that the circumstances of the accident or incident are reviewed with a view to minimising any future risks.

### Accidents

- The person responsible for reporting accidents or incidents is the member of staff who saw the incident or was first to find the child where there are no witnesses. They must record it on an Accident / Incident Form and report it to the nursery manager immediately. Other staff who have witnessed the accident may also countersign the form and, in more serious cases, provide a statement. This should be done as soon as the accident is dealt with, whilst the details are still clearly remembered. Parents must be shown the Accident Form, informed of any first aid treatment and asked to sign it on the same day, or as soon as possible after.
- The nursery manager reviews the accident forms at least every 6 weeks for patterns, e.g. one child having a repeated number of accidents, a particular area in the nursery or a particular time of the day when most accidents happen. Any patterns will be investigated by the nursery manager, and all necessary steps to reduce risks will be put in place.
- The nursery manager will report serious accidents to the registered person for investigation for further action to be taken (i.e. a full risk assessment or report under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR))
- Accident records will be kept for at least 25 years.
- Where medical attention is required, a senior member of staff will notify the parent(s) as soon as possible whilst caring for the child appropriately.
- The manager must inform the proprietor if the accident or incident is serious enough that the parent needs to collect the child early from nursery.
- Where medical treatment is required the registered provider will follow the insurance company procedures, which may involve informing them in writing of the accident
- The nursery manager or registered provider will report any accidents of a serious nature to Ofsted and the local authority children's social care team, where necessary. Where relevant such accidents will also be reported to the local authority environmental health department or the Health and Safety Executive and their advice followed. Notification must be made as soon as is reasonably practical, but in any event within 14 days of the incident occurring.

<u>Organisation</u>	<u>Contact</u>
Ofsted	0300 123 1231
Local authority children's social care team	[insert number]
Local authority environmental health department	020 8726 6200
Health and Safety Executive	0345 300 9923
RIDDOR report form	<a href="http://www.hse.gov.uk/riddor/report.htm">http://www.hse.gov.uk/riddor/report.htm</a>

## **Injuries that occur whilst not at nursery**

If a child has sustained an injury whilst not at nursery, an injury at home form must be completed and signed by the parent/carer when they first arrive at nursery. The child must not be left with a sustained injury from home without a record holding the relevant information. This information must be shared with management and those colleagues working closely with the child as soon as possible.

### **Head injuries**

We will follow advice on the NHS website for head injuries <https://www.nhs.uk/conditions/minor-head-injury/> If a child has a head injury in the nursery, we will calm the child and assess their condition. The manager/deputy will be informed at the time of the incident. If the skin is not broken, we will administer a cold compress for short periods of time. If the skin is broken, then we will follow our first aid training and stem the bleeding.

#### *We will monitor and continue to care for the child at nursery if the child:*

- Cried immediately after the accident, but has returned to their normal self in a short time
- Is alert and interacts with us
- Has not been unconscious / "knocked out"
- Has only minor bruising, swelling or cuts to their head

We would inform the parents of the injury by telephone and email, providing them with a PDF head injury leaflet detailing symptoms to look out for, and when to seek medical advice.

We will monitor the child using our Head Injury Observation Form.

#### *We will call the parents for collection, if the child:*

- Is under one year old and the impact to the head is considered to have been significant
- Has vomited once or twice
- Has a continuous headache
- Has continued to be irritated or is displaying any unusual behaviour

We would keep the child in a calm and quiet area whilst awaiting collection. We would inform the parents of the injury by telephone and email, providing them with a PDF head injury leaflet detailing symptom to look out for, and suggest they seek medical advice.

#### *We will call 999 if the child:*

- Has fallen from a height over 1 metre or been hit by a high-speed object
- Has been unconscious / "knocked out" at any time
- Is sleepy and you cannot wake them
- Has a convulsion or a fit
- Has neck pain
- Has difficulty speaking or understanding what you are saying
- Has weakness in their arms and legs or are losing their balance
- Cannot remember events around or before the accident
- Has had clear or bloody fluid dribbling from their nose, ears or both since the injury

- Has 3 or more separate bouts of vomiting

### **Transporting children to hospital procedure**

The nursery manager/staff member must:

- Call for an ambulance immediately if the injury is severe. DO NOT attempt to transport the sick child in your own vehicle
- Whilst waiting for the ambulance, contact the parent(s) and arrange to meet them at the hospital
- Arrange for the most appropriate senior member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary, to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform the registered provider immediately
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

**First aid** - The appointed person responsible for first aid is the nursery manager.

We are able to take action to apply first aid treatment in the event of an accident involving a child or an infant. At least one adult with a current first aid certificate is on the premises, or on an outing, at any one time. At Brightsparks we aim for all level 3 qualified staff to be fully trained in the paediatric first aid course. In addition, since September 2016, it is a legal requirement that all newly qualified staff (Level 2 and 3) must have a Paediatric First Aid (PFA) certificate in order to be counted into legal ratio.

All staff trained in PFA will have a certificate displayed in their individual base room. The location of the first aid boxes is provided to all our staff and volunteers. These are accessible at all times with appropriate content for use with children. The Nursery Manager or Deputy is responsible for checking and replenishing the first aid box contents every 6 weeks.

First aid boxes should only contain items permitted by the Health and Safety (First Aid) Regulations Act 1981, such as sterile dressings, bandages and eye pads. No other medical items, such as paracetamol should be kept in them.

Each room is equipped with an emergency first aid manual for staff to refer to when dealing with an incident. It is the Room Leader's responsibility to ensure that this manual is stored in a secure place that is easily accessed in an emergency.

### **Defibrillator (AED)**

If someone has a cardiac arrest, their chances of survival are greatly improved if a defibrillator is used. The manager will know where the local defibrillator is located, and a poster notifying of its location will be on display in the lobby.

## **How to treat bites**

*If a bite does not break the skin:*

- Clean with soap and water.
- Apply a cold compress to help with bruising
- No further action is needed.

*If a bite breaks the skin:*

- Clean the wound immediately by running warm tap water and soap over it for a couple of minutes
- Encourage the wound to bleed slightly by gently squeezing it, unless it's already bleeding freely
- If the wound is bleeding heavily, put a clean pad or sterile dressing over it and apply pressure
- Dry the wound and cover it with a clean dressing or plaster
- Advise parents to seek medical advice (on the same day)
- Record incident in accident book.

## **How to treat cuts and grazes**

*If a child has a cut or graze, we will:*

- Stop any bleeding before applying a dressing to the wound.
- We will apply pressure if required to the area using a dry absorbent material – such as a clean flannel for several minutes (Flannel to be disposed in the clinical waste when finished).
- We will clean the wound under drinking-quality running tap water where possible and clean with a sterile saline wipe – avoid using antiseptic as it may damage the skin and slow healing
- We will apply a sterile adhesive dressing, such as a plaster

## **Dealing with Bodily Fluids**

- The nursery provides staff with PPE according to the need of the task or activity. Staff must wear PPE to protect themselves and the children during tasks that involve contact with bodily fluids. All staff follow strict procedures on wearing single use disposable gloves and aprons whilst dealing with any bodily waste (i.e. blood, urine or stools).
- Disposable towels that are used to clean up bodily fluids/spillages are disposed of immediately in the clinical waste bins provided.
- Any bodily spillages on the carpets and fabrics are to be cleaned firstly by mopping up any excess using kitchen roll or paper towels. A product like 'Bioguard Powder' is to then be used to cover the affected area, once the powder has absorbed the said spillage the area is to be thoroughly vacuumed. Antibacterial spray is to then be used to wipe over with a warm damp cloth, (ensuring the carpet is not being drenched with water).
- A senior member of staff is to oversee the procedure. If the nursery owns a carpet cleaning machine this would also be used to clean up the spillage.
- Vinyl flooring is to be cleaned firstly by mopping up any excess using kitchen roll or paper towels and then spraying the area with anti bacterial spray. The area will then be mopped using the green mop bucket in the children's rooms or the red mop bucket if it is in the children's toilets using hot water and disinfectant. This area will then be allowed to dry before children are allowed access

to it. The mop and bucket will swiftly be returned to where it is stored, and fresh hot water with bleach will be added to the bucket for the mop to soak safely away from the children.

### **Needle punctures and sharps injury**

We recognise that injuries from needles, broken glass and so on may result in blood-borne infections and that staff must take great care in the collection and disposal of this type of material. For the safety and well-being of the employees, any staff member dealing with needles, broken glass etc. must treat them as contaminated waste. If a needle is found the local authority must be contacted to deal with its disposal.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
<i>December 18</i>		