



ACCIDENTS AND FIRST AID POLICY

This policy will be reviewed regularly and amended pages will be circulated as required by the Managing Director.

Staff are requested to keep a copy of this policy, and to ensure that they have familiarised themselves with its contents

Signed:

LR Merrison

**Ian Merrison, Manager Director,
January 2024**

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ACCIDENTS AND FIRST AID POLICY

At footprints@childcare setting settings, the safety of all children is paramount and we have measures in place to help to protect children. However, sometimes accidents do unavoidably happen.

We follow this policy 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 or incidents

When an accident or incident occurs, we ensure:

- The child is comforted and reassured first
- The extent of the injury is assessed and if necessary, a call is made for medical support or an ambulance
- First aid procedures are carried out where necessary, by a trained paediatric first aider
- The person responsible for reporting accidents, incidents or near misses is the member of staff who saw the incident or was first to find the child where there are no witnesses
- The accident or incident is recorded on an accident/incident form and it is reported to the setting manager. 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 are shown the accident/incident form and informed of any first aid treatment given. They are asked to sign it the same day, or as soon as reasonably practicable after
- The setting manager/deputy reviews the accident/incident forms termly for patterns e.g. one child having a repeated number of accidents, a particular area in the setting or a particular time of the day when most accidents happen. Any patterns are investigated by the setting manager/deputy and all necessary steps to reduce risks are put in place
- The setting manager/deputy reports any serious accidents or incidents 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))
- The accident forms are kept for at least 21 years and three months
- 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 setting manager or registered provider will report any accidents of a serious nature to Ofsted and the local authority children's social care team (as the local child protection agency), 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

Location of accident files:

Contact Details:

Organisation	Contact
Ofsted	<ul style="list-style-type: none"> • Enquiry line 0300 123 1231 • E-mail – enquiries@ofsted.gov.uk <p>OFSTED, Piccadilly Gate Store Street Manchester M1 2WD</p>
Local authority children's social care team	<ul style="list-style-type: none"> • 0345 140 0845 between 8am – 6pm • 0151 934 3555 out of hours
Local authority environmental health department	<ul style="list-style-type: none"> • 0344 225 0562
RIDDOR report form	http://www.hse.gov.uk/riddor/report.htm

Head injuries

If a child receives a head injury while in the setting then we will follow this procedure:

- Comfort, calm and reassure the child
- Assess the child's condition to ascertain if a hospital or ambulance is required. We will follow our procedures if this is required (see below)

- If the skin is not broken we will administer a cold compress for short periods of time, repeated until the parent arrives to collect their child
- If the skin is broken then we will follow our first aid training and stem the bleeding
- Call the parent and make them aware of the injury and if they need to collect their child
- Complete the accident form
- Keep the child in a calm and quiet area whilst awaiting collection, where applicable
- We will continue to monitor the child and follow the advice on the NHS website as per all head injuries <https://www.nhs.uk/conditions/minor-head-injury/>
- For major head injuries we will follow our paediatric first aid training.

Transporting children to hospital procedure

The setting manager or staff member must:

- Call for an ambulance immediately if the injury is severe. We will not attempt to transport the injured child in our own vehicles
- Whilst waiting for the ambulance, contact the parents and arrange to meet them at the hospital
- Arrange for the most appropriate 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 a member of the management team 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 first aid boxes are located in:

These are accessible at all times with appropriate content for use with children.

The appointed person responsible for first aid checks the contents of the boxes regularly and replaces items that have been used or are out of date.



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.

The appointed person(s) responsible for first aid is:

Most of our staff are trained in paediatric first aid and this training is updated every three years.

We ensure there is at least one person who holds a current full (12 hour) paediatric first aid (PFA) certificate on the premises and available at all times when children are present.

When children are taken on an outing away from our setting, we will always ensure they are accompanied by at least one member of staff who holds a current full (12 hour) PFA certificate. A first aid box is taken on all outings, along with any medication that needs to be administered in an emergency, including inhalers etc.

Food safety and play

Children are supervised during mealtimes and food is adequately cut up to reduce the risk of choking. The use of food as a play material is discouraged. However, as we understand that learning experiences are provided through exploring different malleable materials, this is particularly important for SEN children, the following may be used:

- Playdough
- **Fully prepared** jelly
- Baked beans/spaghetti
- Cornflour
- Dried pasta, rice and pulses
- Cereals

These are risk assessed and presented differently to the way it would be presented for eating e.g. in tuff trays.

Food items may also be incorporated into the role play area to enrich the learning experiences for children e.g. fruits and vegetables. Children will be fully supervised during these activities.

Food that could cause a choking hazard, including **raw** jelly, is not used.

Personal protective equipment (PPE)

The setting 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. PPE is also provided for domestic tasks. Staff are consulted when procuring PPE to ensure all allergies and individual needs are supported and this is evaluated on an ongoing basis.

Dealing with blood

We may not be aware that any child attending the setting has a condition that may be transmitted via blood. Any staff member dealing with blood must:

- Always take precautions when cleaning wounds as some conditions such as hepatitis or the HIV virus can be transmitted via blood
- All spillages of blood, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses and suitable for use on effected surfaces. Never use mops for cleaning blood and bodily fluid spillages, use disposable paper towels or blue roll and discard in a lined waste bin.

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.

Parents of children requiring needles as part of managing a medical condition should supply the setting with an approved sharps box for safe disposal. Full boxes will be returned to the parents.

If a needle is found e.g. in the setting grounds, the local authority must be contacted to deal with its disposal.

We treat our responsibilities and obligations in respect of health and safety as a priority and provide ongoing training to all members of staff which reflects best practice and is in line with current health and safety legislation.