



First Aid and Medical Policy

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Introduction

The aim of first aid is: -

- to preserve life,
- prevent condition worsening,
- promote recovery/seek expert assistance.

At Nursery, the main duties of a first aider are to give immediate help to casualties: -

- those with common injuries
- those arising from specific hazards

There are also first aiders at work and Paediatric first aiders.

Basic Paediatric First Aiders in Nursery

All staff have received basic paediatric first aid.

First aid should be given by a trained first aider or designated persons where possible. All children at Lavender Farm Nursery will be given first aid treatment if and when necessary, unless otherwise notified by parents/guardians. First aiders should stay with the casualty until he/she is handed over to professional medical persons e.g. Paramedics, Doctor, Nurse.

Where reasonably practicable the first aider giving treatment will contact parents. Where this is not possible the office staff will contact parents but must be given all the information available.

Where reasonably practicable, a trained first aider should accompany every off-site activity/trip. Where this is not possible the Risk Assessment for the trip should reflect this.

First Aid Stations

Within the Nursery all rooms have first aid kits. For forest school a suitable first aid kit is available. All first aid stations will be marked with a green cross on a white background.

Accident Books

Every classroom will have an Accident book. The person offering treatment will be responsible for completing the Accident Book. The keeping of the Accident Book is a statutory requirement and it must be completed as fully as possible.

A member of staff will share the completed record with parents when the child is collected from nursery. Parents will be expected to countersign the accident book, and a photocopy will be given to parents.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

Some incidents are reportable under the above regulations. Please refer to the Business Manager for guidance.

First Aid Kits - Contents (sufficient time will be given to the designated person in order to replenish First Aid Kits)

First aid boxes and travelling first aid kits should contain a sufficient quantity of suitable first aid materials and nothing else. Contents of the boxes and the kits should be replenished as soon as possible after use to ensure that there is always an adequate supply of materials. Items should not be used after the expiry date shown on the packets. It is therefore, essential that first aid equipment be checked frequently, to make sure there are sufficient quantities and all items are usable.

There is no standard list of items to be put in a first aid box, however the Health and Safety Executive recommend that when there is no special risk identified, a minimum provision of first aid items would be:-

- a leaflet giving general advice on first aid;
- twenty individual wrapped sterile adhesive dressings (assorted sizes);
- two sterile eye pads;
- four individually wrapped triangular bandages (preferably sterile);
- six safety pins;
- six medium sized (approximately 12cm x 12cm) individually wrapped un-medicated wound dressings;
- two large (approximately 18cm x 18cm) sterile individually wrapped un-medicated wound dressings;
- one pair of disposable gloves.

Equivalent or additional items are acceptable; you should not keep tablets and medicines in the first aid box. First aid provision should contain only those items, which a first aider has been trained to use.

Travelling First Aid Kits

Before undertaking any off-site activity, the management should assess what level of first aid provision is needed. The Health and Safety Executive recommend that where there is no risk identified, a minimum stock of first aid items for travelling first aid containers is: -

- a leaflet giving general advice on first aid;
- six individually wrapped sterile adhesive dressings;
- one large sterile un-medicated wound dressing (approximately 18cm x 18cm);
- two triangular bandages;

- two safety pins;
- individually wrapped moist cleansing wipes;
- one pair of disposable gloves.

Equivalent or additional items or additional items are acceptable. Additional items may be necessary for specialised activities.

Supplementary Equipment

The following items should be provided near the first aid materials:

- disposable aprons and/or suitable protective equipment;
- blunt ended scissors (minimum length 12.70 cm);
- adhesive tape;
- individually wrapped moist cleansing wipes.

First Aiders have a responsibility to report shortages to the designated person as and when they come across them.

Treatment Procedures

- All first aiders are to carry out treatment in accordance with their relevant training.
- All first aiders must take precautions to avoid infection and must follow basic hygiene procedures.
- Parents of any child who has sustained any injury must be given sight of the Accident Book and a copy of the accident form.
- Where possible the first aider giving treatment will contact parents. Where this is not possible the office staff will contact parents but must be given all the information available.

Serious Incident

- In serious cases or significant incidents, the child's parent/guardian will be telephoned, please inform either the manager or Deputy manager or if a parent has been contacted.
- Either the manager, first aider or a member of staff known by the child will accompany them to hospital and wait with them if their parent has not arrived in Nursery or cannot be contacted before the child is taken to hospital. At all times parents will be kept informed of any accident, treatment on site or where a child has been taken for treatment.
- As soon as possible, an accident form, should be obtained from the nursery room and completed. The procedure for notifying the Local Authority should be followed.
- Staff at nursery will also be treated by First Aid at Work on site, in the first instance, and be recorded by completing an accident form located in the Nursery office. This should be kept on file for a minimum of three years. If staff have medical conditions,

(including allergies) or require specific medication, please ensure first aiders are informed. All information will be treated as confidential and would only be used in an emergency situation. Emergency contact information for staff can be located in the Nursery office.

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- The First Aider at Work will also treat any parent or visitor on the Nursery site - these will also be recorded on the HSE Accident Form located in the Nursery office.

Additional Information

- **Child Medical Information/Medical File -**
Information/Care Plans about individual children will also be kept within the nursery rooms. Details will also be kept on the Nursery system. Please inform all relevant staff of updated information and annotate care plans, etc as appropriate.
Medical Referrals - Any member of staff who is concerned about a pupil's health or welfare please report immediately to the management team.

Further Information

Further information is available in the H.S.E. Document, **First Aid at Work - Your Questions Answered**

IMPLEMENTATION PROCEDURES FOR THE SAFE HANDLING, TREATMENT AND DISPOSAL OF BODILY FLUIDS

Introduction

Where employees are required to come into contact with bodily fluids, the following minimum precautions are to be adopted, regardless of whether a risk of infection has been identified. The recommended method of dealing with any spillage is the use of special sanitising granules, particularly in the larger establishments such as Nursery's where body spillages occur on a daily basis. There are some establishments who choose not to deal with body spillages as they happen and will often leave the spillage for a long period of time until the caretaker is back on duty, this is an unsatisfactory arrangement. By using the granules this will reduce any risk of infection and also deodorise any unpleasant smells.

The Risk of Infection

Where there is a risk of infection for any employee coming into contact with the body fluids of another person (body fluids includes blood, urine, faeces and vomit). The normal routes of entry of infection into the body are through the skin or through the linings of the nose, mouth and eyes. The hands are usually the means by which body fluids are transferred to these entry routes.

Risk Assessment

A risk assessment should be carried out to protect the persons whose job it is to deal with the body spillage. It should take into account the frequency, type, how it should be disposed of whether it be clinical waste or sharps. The risk assessment should detail suitable and sufficient measures to control the risk, including the wearing of suitable personal protective equipment.

Spillage of blood or body fluids

1. Clean up spillages of blood or body fluids however small **immediately**.
2. Open wounds must be covered with a waterproof dressing.
3. **It is essential to wear disposable non-seamed latex or vinyl gloves and an apron.**
4. If there is broken glass - never pick it up with your fingers, even if wearing gloves. Use a paper/plastic scoop or litter picker and dispose of the glass in a safe manner. Needles will to be disposed in a special sharp's box.
5. Apply cleansing products i.e. sanitizing granules/body spills kit according to manufacturer's instructions.
6. Rinse area with hot water and detergent.
7. Dispose of gloves and apron as clinical waste.
8. Wash hands thoroughly with soap and hot water.

9. Splashes of blood or body fluid on the skin should be washed off immediately with soap and hot water.
10. If clothing becomes contaminated with blood or other body fluids, it should be rinsed with cold water, and then laundered separately in a hot wash.

Cuts and abrasions

All staff should ensure that wounds or damaged skin are covered with a water proof dressing (without visible air holes) disposable non-seamed latex or vinyl gloves **must be worn at all times, without exception.**

First Aid

Employees carrying out first aid who are likely to come into contact with bodily fluids should adopt the same precautions as above.

Procedures for Avoiding Needle Stick Injuries

Staff dealing with rubbish as part of their duties should be issued with gloves, a litter picker (if applicable) and a sharps container (specifically for needles).

Staff must not get into any rubbish containers to tread rubbish down as this could lead to a needle stick injury of the feet, legs or lower body.

Bags of rubbish but must be lifted by the loose top, whether tied up or not. Make every effort to avoid contact between bags and the legs in such circumstances.

First Aid Precautions

If skin is punctured immediately squeeze the injured site. Keep squeezing and wash the injured site under running water for 5 minutes and seek medical attention.

If a member of staff has received a puncture wound from a contaminated sharp, it should be carefully, picked up by a non-touch method and retained in a rigid container and should be taken with the member of staff to the Accident & Emergency/GP.

Disposing of Sharps

If there are several needles, inform the police and contact Sandwell Environmental Services on 0121 368 1177 for removal and clean up operation (a cost may be incurred).