



At Stretton Lodge, 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

Location of accident files: Each room has individual form/accident books for recording.

Completed accident forms are kept in each child's individual file.

- 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 then record it on an Accident Form (and report it to a member of management if the accident is of a serious nature). 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 Report, informed of any first aid treatment given and asked to sign it as soon as they collect their child. Parents will be given this copy and staff will file the yellow copy in the child's individual file.
- Staff must notify parents immediately via a telephone call if the accident or incident is significant and/or affects the head or face. If you are unable to make contact via phone then staff can put a message on tapestry (please no photographs).
- The person completing the Accident Report must then add this to the Accident Monitoring Form.
- The first aid coordinator reviews the accident forms termly 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 first aid coordinator and 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))

- The Accident File will be 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
- Where medical treatment is required the nursery manager will follow any insurance company procedures, which may involve informing them in writing of the accident
- The nursery manager/registered provider will report any accidents of a serious nature to Ofsted (Appendix 1) and Staffordshire First Response (as the local child protection agency (Appendix 2)), 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.

Organisation	Contact
Ofsted	Tel: 0300 123 1231
First Response	Tel: 0800 1313 126
Local authority environmental health dept.	Tel: 01785 619402
Health and Safety Executive	http://www.hse.gov.uk/contact/ All incidents can be reported online but a telephone service remains for reporting fatal and major injuries only - call the Incident Contact Centre on 0345 300 9923 (opening hours Monday to Friday 8.30 am to 5 pm).
RIDDOR report form	http://www.hse.gov.uk/riddor/report.htm



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 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: Main kitchen (staff only), day nursery, nursery, pre-school and hall
- These are accessible at all times with appropriate content for use with children
- The first aid coordinator will check the contents of the boxes termly and replace items that have been used or are out of date however, staff should monitor contents after each use.
- The staff first aid box is kept in the main kitchen. This is kept out of reach of the children. First aid boxes should only contain items permitted by the Health and Safety (FirstAid) Regulations Act 1981, such as sterile dressings, bandages and eye pads. No other medical items, such as paracetamol should be kept in first aid boxes.
- The appointed person(s) responsible for first aid are Clare Wyatt and Gillian Murray
- All of our practitioners are trained in paediatric first aid and this training is updated



every three years.

- When children are taken on an outing away from our nursery, we will always ensure they are accompanied by at least one member of staff who is trained in first aid. A first aid box is taken on all outings.

Personal protective equipment (PPE)

- 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.
- PPE is also provided for domestic tasks.
- Staff are consulted when choosing 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 nursery 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.
- Wear disposable gloves and wipe up any blood spillage with disposable cloths, neat sterilising fluid or freshly diluted bleach (one part diluted with 10 parts water). Such solutions must be carefully disposed of immediately after use.

Needle puncture 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.

Forest School

- The forest school leader has full paediatric first aid training and carries a first aid kit at all times during forest school sessions.
- Accidents will be recorded and monitored in accordance with the procedures set out within this policy.
- Staff and children will be required to wear appropriate PPE for all sessions and during certain activities to ensure safety is maintained and risk/benefit assessments are adhered to.

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

Appendix 1 (Taken from Ofsted Early Years Compliance Handbook)

56. We define serious injuries as:

- broken bones or a fracture
- loss of consciousness
- pain that is not relieved by simple pain killers
- acute confused state
- persistent, severe chest pain or breathing difficulties
- amputation
- dislocation of any major joint including the shoulder, hip, knee, elbow or spine



- loss of sight (temporary or permanent)
- chemical or hot metal burn to the eye or any penetrating injury to the eye
- injury resulting from an electric shock or electrical burn leading to unconsciousness, or requiring resuscitation or admittance to hospital for more than 24 hours
- any other injury leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours
- unconsciousness caused by asphyxia or exposure to harmful substance or biological agent
- medical treatment or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin
- medical treatment where there is reason to believe that this resulted from exposure to a biological agent, or its toxins, or infected material.

Some examples of serious injuries that must be notified to us are set out below.

- A child trips and falls in a nursery and loses consciousness due to a bang on the head.
- A child is accidentally hit hard in the chest by a football during outdoor play at an out of school club, and has persistent, severe breathing difficulties.
- Parents take their child to hospital, several days after the child suffers a blow to the head while at your childcare provision. The child is still suffering from the initial injury.
- A baby breaks a leg during a fall at the nursery.
- A child takes a heavy fall while running around and is taken to hospital; the child is kept in hospital for over 24 hours.

57. Providers are not required to inform us of minor injuries, nor of general appointments to hospital or routine treatment by a doctor, such as the child's general practitioner, that is not linked to, or is a consequence of, a serious accident or injury.

We define minor injuries as:

- sprains, strains and bruising
- cuts and grazes
- wound infections
- minor burns and scalds
- minor head injuries
- insect and animal bites
- minor eye injuries
- minor injuries to the back, shoulder and chest.

58. Some examples of minor injuries that do not need to be notified to us are set out below.

- A child trips over their shoelaces, falls and sprains a wrist in the nursery.



- A baby, attempting to sit up, loses balance and drops face first onto the floor, cutting their lip.
- A bee stings a child while playing in the outdoor space. The child is not allergic to bee stings and does not require hospital treatment.

Appendix 2 (Taken from SSCB - Section-6J-Guidance-on-Recording-Incidents-PV-sector.pdf Sept 2017)

Please Note: If as a result of an accident a child in your care receives a serious injury on your premises then the relevant internal processes should be followed. If you are an early year's provider, this will be in line with statutory guidance, The Early Years Foundation Stage April 2017 – page 28, 3.51. The guidance states that 'Providers must notify local child protection agencies of any serious accident or injury to, or the death of, any child while in their care, and must act on any advice from those agencies. Therefore a call to Staffordshire's First Response (FR) service or Stoke-on-Trent's Safeguarding Referral Team (SRT) is required and advice will be given as to next steps.

For the purpose of this policy and procedure, a serious injury is defined as any injury that results in emergency care being sought.

If the child's injuries happen as a result of poor supervision whilst in the care of the registered provider/ organisation then contact must be made with the LADO. The LADO can be contacted via First Response / Stoke-on-Trent Safeguarding Referral Team