



Chatham Nursery School

First Aid Policy and Procedures

— CHATHAM —
NURSERY SCHOOL

to teaching every child to be a happy, confident and
inclusive and enriching environment where each child feels safe,
supported and valued.

Introduction

We believe that first aid is an important skill whereby performing simple procedures and following certain guidelines when required, it may be possible to save lives. By acting in a timely and competent manner, giving basic treatment we are acting responsibly until professional medical help has arrived and is available. We ensure that our premises, policies and procedures minimise risk to children and adults, however accidents and incidents do occur for which we need to be prepared.

We ensure that all those who work with children take a recognised paediatric First Aid Course which is updated every 3 years.

Responsibility

The Head of School has responsibility in the Nursery School. The Executive Headteacher has overall responsibility for the First Aid Policy. The Head of School is responsible for ensuring that a qualified First Aider is:

- On the premises at all times when children are present
- Accompanies all off-site visits involving children

Records of training are kept within the main and individual staff training records and personnel files.

Training

Most team members, including all those who work directly with children, hold a paediatric First Aid certificate. Some team members hold training in First Aid at Work. Team members are also trained to meet the specific needs of children in their care when required.

Reporting and Recording Accidents

We record all accidents that require treatment, however minor, and inform parents/carers on the same day as detailed in this policy.

Any serious incident or accident which results in additional medical involvement is recorded and reported to relevant authorities or RIDDOR where necessary. OFSTED are also informed of any serious injury, accident, illness or death that occurs at a nursery setting, as well as any case of food poisoning affecting two or more children, in line with their reporting procedures.

First Aid Procedures

We provide relevant First Aid at the point of need and refer children and adults for further medical assistance if required.

If first aid is needed the following procedures will apply:

- 1) Contact First Aider / Appointed Person.
- 2) Calm and re-assure the child while waiting.
- 3) Support first aider by explaining the circumstances and situation and providing details e.g. of allergies, medication, condition etc of the child as soon as they arrive.
- 4) The first aider will:
 - assess the situation
 - administer first aid in line with current training and / or call for assistance or the emergency services.
 - Complete an accident report and bump to the head letter if necessary.
 - Inform the child's parent/carer, either at the end of the day for minor accidents, or immediately if additional medical assistance is required
 - Inform a member of SLT for serious accidents

Staff medication is kept outside of the classroom with the exception of inhalers and other emergency medication which may be kept in classrooms, inaccessible to children. First Aid provision is available at playtimes, Forest sessions and on all off-site visits.

Emergency procedure

An ambulance should always be called if a person has any of these symptoms, applicable to both children and adults on the premises:

- Turning blue
- Appears not to be breathing or is struggling to breathe or is having chest pain.
- Severe bleeding that cannot be stopped
- Falling unconscious
- Fitting for the first time or fitting for longer than usual if known to suffer from seizures
- Severe allergic (anaphylactic) reactions
- Severe burns
- Possibility of spinal injury

In addition to this, specific guidance for ringing an ambulance for babies and younger children includes:

- High, pitched, weak or continuous cry
- Any bulging
- High temperature with very cold feet and hands\
- Spotty, purple-red rash anywhere on the body
- Green coloured vomiting
- Unusually drowsy or hard to wake up

Ambulances may need to be called for other reasons not listed, particularly in the case of people with specific medical needs.

First aiders and appointed person should:

- Assess the situation and stay calm.
- Minimise any danger to themselves and others, ensuring other children are taken away from the scene.
- Send for help immediately and provide suitable treatment where possible.
- Contact the child's parents/carers or emergency contact in case of an emergency for a team member.

When contacting the emergency services, the appointed person should:

- Give their name and the telephone number calling from.
- Tell the contact the location of the accident and the age of child/adult involved and any other relevant information about the person.
- Explain what has happened as this helps the paramedics to act swiftly when they arrive.
- Explain what you have done so far to treat the casualty and any additional needs or requirements of the person requiring emergency assistance.

When emergency services arrive or take a person to hospital the first aider should:

- Ensure relevant records are available (medical and parent/emergency contact) along with any associated medication.
- Assign a member of staff to accompany a child to the hospital if parents have not yet arrived
- Complete the usual accident reports as well as in incident report. Report RIDDOR when if required.

Bodily fluids

In the event of blood or other bodily fluids being present first aiders must wear gloves and aprons provided. Any spillages of bodily fluids should be wiped up with disposable towels and flushed down the toilet or put in a sealed bag and disposed of immediately in bins in adult only areas. Floors and other affected surfaces should be disinfected with relevant cleaning materials as detailed in the COSHH guidance, including using the correct coloured cloths. Any clothes belonging to the child should be rinsed in hot water and placed in a disposable bag to take home or washed Any material used e.g. bandages or gauze etc should be disposed of in a sealed bag and put in a bin. Cuts or abrasions should be covered by a plaster or bandage as appropriate and anyone who has come into contact with the bodily fluids must wash their hands thoroughly afterwards.

Asthma – Teachers and other members of the team are aware of the children in their care that have asthma and if/when they need their inhaler. Team members who have asthma inform their line manager upon starting work with the company and are responsible for ensuring their line manager knows of changes to their condition. Inhalers are kept in classrooms in a secure place if necessary and are taken on all outings both on and off site. In the event of someone having an asthma attack, a member of the team must stay with the person at all times including when taking an inhaler. An ambulance must be called if the person: turns blue, collapses, is going blue or has a blue/white tinge around the lips, or if the member of the team caring for them is concerned at all.

Epilepsy – Teachers, practitioners and other members of the team are aware of any children in their care that suffer with epilepsy and follow usual first aid procedures. Team members who have a form of epilepsy inform their line manager upon starting work with the school and are responsible for ensuring their line manager knows of changes to their condition. An ambulance must be called if someone fits for longer than is usual for them.

Diabetes – Teachers, practitioners and other members of the team are aware of any children in their care with diabetes and are made aware of the required medication. Team members who have diabetes inform their line manager upon starting work with the school and are responsible for ensuring their line manager knows of changes to their condition. Children who are old enough can self-administer insulin and medication can be kept in classrooms in a designated secure place if necessary. Blood sugar levels are checked in secure areas outside of classrooms unless in an emergency. In the event of a person suffering from hypoglycaemia or hyperglycaemia a member of the team should stay with them at all times, administer medicine as required and remain with the child until their blood sugars have returned to normal levels in line with their Individual Health Care Plan (IHCP). An ambulance must be called if at any point a person becomes unconscious.

Anaphylaxis – Teachers, practitioners and other members of the team are aware of any children in their care that have a severe allergy and monitor them to ensure they do not come into contact with the allergen. Team members who have a severe allergy inform their line manager upon starting work with the company and are responsible for avoiding the allergen and ensuring their line manager knows of changes to their condition. If someone requires an EpiPen it can be kept in their classroom in a designated secure place. In the case of a severe reaction resulting in anaphylactic shock, the EpiPen should be administered by a trained member of the team wherever possible and an ambulance must be called. Adults may administer their own EpiPens if they are able. A member of the team should stay with the person at all times until an ambulance arrives.

Policy Review

This policy was ratified on 26th November 2025 and will be reviewed every two years as a minimum. The next review date is October 2027.

In between updates, the policy will be updated when necessary to reflect local and national changes