

Injury and Sickness Policy and Procedure

Accidents

If any child has an accident in the Nursery, however minor, it should be recorded on their individual accident record sheets. A qualified first aider must treat the child straight away. The information should be accurately recorded by the member of staff who dealt with the accident, it should be countersigned by a witness and approved by a Senior member of staff. Depending on the nature of the injury the child's parents/carers will be informed when collecting their child, however, if the injury is deemed serious the parents must be contacted straight away and informed of the situation. The accident report will include the following:

- Date and time of accident
- What happened and where
- The nature of injury and the treatment given
- Follow up time, observations and further action
- Name and signature of the person who dealt with the incident and name of a witness
- Name and signature of the Senior member of staff approving the information recorded
- The parent/carers name and signature to confirm that they have been informed

If a child sustains a head injury the same procedure as above will be followed and in addition to the accident report being completed the staff dealing with the injury must also complete an accident summary form (this contains advice for the parents in dealing with head injuries). The child will also be monitored for signs of concussion, if this appears then they are taken to the hospital to be fully checked. The child's parents/carers are contacted immediately. Two members of staff must take the child to hospital (one of these must be the Manager or Deputy) or a single member of staff if an ambulance is called. A printed copy of the accident report and the child's application form must be taken to be passed onto the medical staff. The parents/carers will also need to sign the accident report.

Serious injuries and illnesses may be reported to RIDDOR, Ofsted, the Local Authority, Child Protection agencies and Public Health England (as per sections 3.45, 3.50 and 3.52 of the Statutory Framework for the Early Years Foundation Stage (DfE 2021)).

Should a child require further medical treatment for an injury (i.e. at a hospital) this must be reported to Ofsted, within 14 days, and also to RIDDOR.

Medication

Any child that is on medication can still attend Nursery, but the parents must sign the child's individual medicine consent form to give their permission for the staff to administer the medicine. The form has to be completed each

day that the medicine is to be given. The medication must be kept out of reach of children and in the fridge. The medicine consent form will contain the following:

- The correct times and dosage must be accurately recorded.
- The name of the medication.
- Two members of staff must be present when administering the medication.
- The parents/carer must sign the correct form before leaving the Nursery and on collecting the child.

MEDICATION WILL BE ONLY BE ADMINISTERED IF IT IS IN THE ORIGINAL PACKAGING WITH THE CHILD'S NAME, DOB, DATE PRESCRIBED AND DOSAGE INSTRUCTIONS LABEL PRESENT*.

***THE ONLY EXCEPTION IS FOR MEDICATION PRESCRIBED BY A HOSPITAL, WHERE THE LABELLING CAN OFTEN VARY AND BE HANDWRITTEN.**

Non-Prescribed medication should never be given to a child unless in an emergency situation where a child has suffered an allergic reaction*, is in severe pain or has a high fever and is awaiting emergency treatment. In this situation the child's parent/carers will be informed of the situation immediately.

**Please see separate Allergies and Allergic Reactions Policy.*

Sickness

If a child has been sick while they are at Nursery, their parents/carers must be contacted straight away so they can arrange for the child to be collected. While the child is waiting to be collected they should be isolated from the other children and made as comfortable as possible. Any toys the child has played with in that time should be sterilised once they have gone home. The child should not return to the Nursery for 48 hours after the last time they were sick.

Temperatures

If any child has a high temperature their parents/carers must be contacted immediately. The Nursery does not use thermometers (as advised by First Aid trainers) and will assess the child's overall well-being prior to contacting parents. If a child's temperature seems higher than normal a child needs to have all heavy clothing removed, but not left to get cold, sponged down with tepid water and offered plenty to drink while they are waiting to be collected.

The Nursery is not permitted to give paracetamol.

The child cannot return to Nursery until their temperature has returned to normal and they seem in good overall health.

Febrile Convulsions

Febrile convulsions are also sometimes called febrile seizures. They are relatively common and, in most cases, aren't serious. They most often occur between the ages of six months and three years and are caused by high temperatures during a fever. If your child experiences a febrile convulsion, they must be kept away from Nursery for 24 hours after the last occurrence.

Diarrhoea

If any child has 2 or more diarrhoea stools their parents/carers must be contacted and the child collected immediately. The child may not return to Nursery until 48 hours after their first normal stool.

Chicken Pox

Chicken Pox are small red spots which turn into blisters and then scab. The child is infectious up to 5 days before the spots appear and they should not return to Nursery until all the spots have scabbed over, usually 5-7 days. Any pregnant parents/carers/staff should be informed of the situation and seek guidance from their G.P.

Hand, Foot and Mouth Disease – Consists of ulcers in and around the mouth as well as yellowy-red sores to the hands and feet and often a sore throat. The child is infectious 3-6 days prior to showing symptoms. In severe cases or large outbreaks children may be asked not to return to Nursery until all the sores have dried, usually 3-5 days.

Measles

Measles can cause a fever, bad cold and cough. 4 or 5 days after this a red rash will appear on the face, which spread downwards. The child is infectious from the start of the cold symptoms until 4 days after the rash appears, so should be excluded for this time.

Conjunctivitis

This is an eye infection, which makes the eye look red with a green/yellowish discharge and it is contagious. Public Health England recommend that children only seek medical advice and medication in severe cases only and that children do not need to be excluded from the Nursery. In most cases using cooled boiled water to bath the eyes, as and when required, and keeping contamination to a minimum through good hygiene practices can treat this effectively.

Headlice

If a child has headlice they need to stay at home, or be collected from Nursery, and return once treated. It is recommended that all the family should be treated also. Headlice spread very quickly, so children cannot return to Nursery until they have been treated.

Threadworm

If a child develops threadworm they need to stay at home, or be collected from Nursery, and return once they and their whole family have been treated. Threadworm can spread quickly, so children cannot return to Nursery until they have been treated.

General anaesthetic

Although the surgery/procedure can be minor, your child must be kept away from the Nursery for at least 24 hours post operation.

This list covers some of the common infections and illnesses and is not restricted to the above. The Wendy House Day Nursery understands that parents have jobs to go to, but as you can understand having infection within the Nursery can spread quickly to other children and staff. We do not like to send children home unnecessarily, but in certain circumstances it is unavoidable.

Serious injuries and illnesses may be reported to RIDDOR, Ofsted, the Local Authority, Child Protection agencies and Public Health England (as per sections 3.45, 3.50 and 3.52 of the Statutory Framework for the Early Years Foundation Stage (DfE 2021))

The Wendy House Day Nurseries reserve the right to refuse admittance should they feel a child is unwell or not fully recovered from illness.