All policies interrelate so please check other policies for pertinent information.

Policies are intended to support our philosophy which is summarised in these qualities; Dynamic, Inquisitive, Responsible, Grit, Playful, Contented



First Aid, Administration of Medicine and Sickness Policy

First Aid

Supplies

The senior teacher with designated responsibility ensures that a first aid kit is kept on site and accessible at all times. Also, that this complies with relevant regulations. Its contents are frequently checked and replenished, as documented on list in First Aid Box.

It is kept in the staff space within easy access for adults and out of the reach of children.

Training

The registered person will ensure that all staff have basic first aid training within a year of the start of contract and that all members of staff regularly renew their first aid certificates. Nature Walks in the local area always include at least one and usually two, trained First Aider and staff always carry a first aid kit and telephone.

Emergency care

It is the decision of staff to determine when emergency medical services should be called. It is then their responsibility to ensure all advice given is followed. Parents will be contacted as fast as possible, usually by another staff member on a separate phone line. Our duty of care is at all times to all the children present and our first objective is to preserve life.

Parental permission

All parents are asked to give permission at the time of registration for their child to receive necessary emergency medical treatment including for professional medical advice to be sought and followed. This is a condition of registration.

Records

We have incident (physical injury by someone else) and accident (physical injury to oneself) records. All accidents will be recorded in the accident section of the child's MMC account or on paper if they have opted out of MMC. These are made parent visible and the parents are expected to check and acknowledge these records. All head bumps will also initiate a call to parents in case a parent wishes to collect their child earlier. All incidents will be reported likewise. Both of these will be used as a behaviour log in order to help recognize patterns of behaviours and its antecedents.

Serious accidents and incidents must be reported to SLT as soon as all necessary first aid has been given and risk assessment of imminent recurrence completed. Where necessary they will also be reported to Ofsted by the Senior Staff.

Follow up risk assessments will be carried out, any changes to practice communicated in staff meetings and if appropriate made available to parents.

Notification

Any serious accident or incident is notified to Ofsted and where appropriate HSE within 14 days. Further information is available at http://www.ofsted.gov.uk/resources/factsheet-childcare-serious-accidents-injuries-and-deaths-registered-providers-must-notify-ofsted-an

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Administration of medicine

Staff are not generally authorised to administer medicines. Parents wishing their child to receive, for example antibiotics, should aim to give these before or after session hours. Where this is not possible administration will only be undertaken by a qualified first aider in accordance with the instructions printed on the medication by the distributing pharmacy, for over the counter medicine written, detailed and signed permission from the parents will be adequate. Any such administrations will be noted in the Medicine Book or the digital system. Recording the following details: name of child, name of staff member, date, time, medicine, dosage, parent signature or written permission.

In the case of, for example, asthma, a child may need to use their inhaler under the supervision of a member of staff. Staff are trained in using administering use of inhalers and in using epi-pens during First Aid training or through the Health Professionals who prescribe the medication. Any such administrations will be noted in the Medicine book. A letter of consent from parents must be given before any such assistance can be given. Any such medications brought into school will be kept by the staff clearly labelled and out of reach of the children.

If staff need to take medication at work the this must also be stored securely in areas to which children do not have access. A record of the time and dose must be made in the medication record. Should the staff have an adverse reaction they will be sent home or given emergency treatment as appropriate.

Sickness

We do not accept children who are showing symptoms of sickness. Particular illnesses have specified exclusion periods, these are displayed in the entrance and available by request or online. We have a definition of a well child which is on the parent board and below. A child should only attend if they are able to participate in all we offer within their own abilities and fit the definition of a Well Child.

A child who has been unwell is required not to return until they have had no symptoms for at least 48hours and fit the Well Child definition. Staff need to provide a self certification form or a doctors note and must have had no symptoms for 24 hours.

If a child seems to be taken unwell during a session they will be taken aside by a member of staff. Parents or other named contacts will be contacted and asked to collect their child. Special attention will be given to all hygiene issues with respect to the other children in attendance and staff.

If a child or member of staff has contracted an infectious disease they are obliged to inform Artisans Kindergarten. In some cases we will in turn have a duty to inform external authorities and/or parents of other children.

Allergies and Health Matters

Staff will be informed of all relevant health issues regarding the children in their care and necessary precautions and trigger situations, these details are also requested on registration forms. Strict confidentiality will be maintained within Artisans. Where appropriate staff may meet with parents or health professionals prior to a child beginning at Artisans.

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A Well Child

Artisans consider a well child to be one that

- Has plenty of energy
- Has good and even colour in their skin tone
- Is happy
- Has a temperature within a normal range
- Has sparkly eyes
- Has clear breathing passages and quiet breathing patterns

Exclusion Periods

Athlete's foot - excluded for as long as symptoms show, or allowed in with veruccae socks.

Bronchiolitis - excluded for duration of symptoms

Chickenpox - excluded until all spots have crusted over

Cold sores - no exclusion needed but extra care should be taken

Conjunctivitus - exclusion whilst the eye is secreting discharge or is sticky

Croup - exclusion whilst symptoms persist

Diarrhhoea - exclude until 48hrs after symptoms have finished

German Measles / Rubella - exclude for 5 days after the rash appears. It must be notified to health authority.

Head lice - exclude until treated by parents

Hepatitis a - until jaundice has gone or for at least 5 days, whichever is longer

Impetigo - exclude until sores are crusted over

Measles - exclude for 5 days after onset of rash, it is notifiable

Meningitisis - exclude until well

Mumps - exclude for 5 days after onset, it is notifiable

Ringworm - no exclusion necessary but must be covered

Scabies - exclude till treated

Scarlet fever - exclude for 5 days after the start of treatment, it is notifiable

Slapped Cheek - contagious period is prior to symptoms so exclusion ineffective

Tonsillitis - exclude whilst ill

TB - take professional advice for the individual

Typhoid fever - until 3 negative stool samples have been given with at least a week between each and beginning at least 3 weeks after the completion of treatment.

Vomiting - exclude till at least 48hrs after symptoms stop

Whooping cough - exclude for 3 weeks after onset of cough

For further information consult www.healthcareatoz.org or NHS direct on 0845 46 47

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