



First Aid Policy October 2025 (Updates in Red)

It is policy within the nursery that a trained First Aider is present at all times in the Nursery. Additionally, all other staff will have a working knowledge of basic First Aid procedures through appropriate training with most staff being qualified First Aiders. **A first aid trained member of staff will always be present at mealtimes just in case of a choking incident.**

In the event of a child or staff member sustaining a slight injury as a result of an accident then minor First Aid treatment should be administered.

Most commonly First Aid is required for minor cuts, bruises and bumps. Room leaders should be informed of any accident involving children.

First Aid Kits are available in the following locations:

- Office
- Corridor by entrance
- Outings Bag

The contents of these kits will conform to the provisions of the *First Aid Regulations, 1981*, and will be checked on a monthly basis by the Health and Safety Lead and replenished as needed.

All incidents requiring First Aid must be recorded using the accident reporting system.

All staff are made aware that head injuries can lead to brain injury due to the risk of concussion developing. In the event that a child suffers an injury to their head whilst at nursery, a member of SMT will be informed as soon as possible so that parents can be informed.

For staff members and visitors, if immediate First Aid does not resolve the problem, they should be referred to the Accident & Emergency Department of Princess Alexandra Hospital, Harlow.

For children, if immediate First Aid does not resolve the problem, a member of SMT will inform the child's parents / carers using emergency contact numbers to advise them of the situation, and the need for medical treatment following the Accident Policy

First Aid Dos and Don'ts

- Do not give first aid with dirty hands – **Do** put on disposable gloves
- Do not use unsterilised paper towels or tissues to clean up superficial cuts and grazes – **Do** use plenty of clean water and sterilised swab (use sterile antiseptic wipe if water unavailable).
- Do not leave cuts uncovered – **Do** dry cuts with a sterile swab and cover with a plaster or dressing.
- Do not try to clean serious bleeds – **Do** apply pressure by pressing down over a sterilised dressing placed over the bleed.
- Do not use a cold wet flannel for serious bruising and bumps especially when on head (cold wet flannels should only be used for very superficial scrapes) – **Do** use an ice pack
- Do not apply ice packs directly on skin – **Do** wrap in a flannel (as long as the skin is unbroken) and apply at intervals.

- Do not apply flannels directly on broken skin – **Do** place a sterile dressing under flannels or other types of cold compress.
- Do not try and pull out a splinter using hands – **Do** clean the area with warm soapy water without disturbing splinter, remove by pulling out at the same angle splinter entered with a pair of clean tweezers. Squeeze around wound to encourage a little bleeding to wash out germs then wash and cover.
- Do not tip head back for nosebleeds – **Do** tip head forward and pinch nose for 10 minutes.
- Do not put anything in eyes to try and remove small particles out of eyes – **Do** use lots of cold clean water to flush eye out (use sterile water from first aid kit if tap water unavailable).
- Do not use ice or an ice pack to cool down a burn – **Do** cool, using cold running water for 10 minutes, if necessary, then apply a burn soothing gel to area affected.
- Do not put fingers in children’s mouths to look for choke hazards – **Do** encourage the child to cough the items out and remove if in reach.
- Do not rush in to give back blows for a child who is in the process of coughing items up – **Do** give back blows and lean child forward if the child is not able to breathe, talk, cough, or becoming red in the face.
- Do not use abdominal thrusts on babies – **Do** use chess thrusts on babies using 2 fingers.