

## First Aid, Administration of Medicine and Sickness Policy

### First Aid

#### Supplies

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

It is kept in the staff space in the emergency exit box, 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 there is at least one member of staff with a current first aid certificate on site at any time.

#### Emergency care

It is the decision of the senior 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.

#### Parental permission

All parents are asked to give permission at the time of acceptance for their child to receive necessary emergency medical treatment, or for professional advice to be sought and followed.

### 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, usually Sarah Phimester, in accordance with the instructions printed on the medication by the distributing pharmacy, alongside written permission from the parents. Any such administrations will be noted in the Medicine Book. Recording the following details: name of child, name of staff member, date, time, medicine, dosage, expiry date as shown on container, 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. 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.

### Sickness

We do not accept children who are showing symptoms of sickness. Particular illnesses have specified exclusion periods, these are displayed in the entrance. We have a definition of a well child which is on the parent board. See below.

A child or member of staff who has been unwell is required not to return until they have had no symptoms for at least 48hours. Staff need to provide a self certification form or a doctors note.

If a child seems to be taken unwell during sessions 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.

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. Where appropriate staff may meet with parents or health professionals prior to a child beginning at Artisans.

### 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

Conjunctivitis – exclusion whilst the eye is secreting discharge or is sticky

Croup – exclusion whilst symptoms persist

Diarrhoea – 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

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

Meningitis – 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.healthcaretoz.org](http://www.healthcaretoz.org) or NHS direct on 0845 46 47

### Designated Staff Member

Georgina Smith

