**INTRODUCTION**

At Grove Villa we make every effort to ensure that all children are safeguarded and well cared for. The children are the centre of our focus in all decision‐making and arrangements. The nursery sees adequate First Aid provision as vital in the daily process of caring for the children.

Paediatric first aid trained staff can take action to supply first aid treatment in the event of an accident involving a child or adult.

**FIRST AIDERS**

All staff attend Paediatric first aid training every 3 years by an Ofsted approved training company. We always aim to have 100% of all members of staff fully paediatric first aid trained.

The first aid box is inside an outings bag and inside the nursery.

**RECORD KEEPING**

Records of illnesses, accident and injuries, along with any first aid treatment, non- prescription/prescription medication or treatment given to a child, are kept and filed accordingly.

Parents are notified immediately if a child has an accident including a head injury or becomes unwell.

If an injury is classed as “non-serious” e.g. fell over in garden and scratched knees, the parents will be notified when they collect their children at the end of the session and will be given an accident form via **TAPESTRY** app describing the accident and the action/first aid given, in the case of a minor head injury a phone call will be made to the parent as soon as possible were convenient after the child has received first aid.

**This First Aid Policy** Is effective **from: 10/05/21 until further notice**

I have read and been informed about the content, requirements, and expectations of the **First Aid Policy** for employees at Grove Villa Childcare.

I have received a copy of the **First Aid Policy** and agree to abide by the policy guidelines as a condition of my employment and my continuing employment at Grove Villa Childcare.

I understand that if I have questions, at any time, regarding the **First Aid Policy**, I will consult with my immediate manager / supervisor.

Please read the **First Aid Policy** carefully to ensure that you understand the policy before signing this document.

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| Full Name | Signature  | Date |
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