SHOOTING STARS

Pre-School Nursery

Accidents and Incidents Policy and Procedures

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1.0 Policy Statement

Shooting Stars Nursery is committed to providing a safe environment in which children, staff and visitors are protected from avoidable harm.

Accidents, injuries, incidents and near-misses will be responded to promptly, calmly and appropriately. Children will receive suitable first aid and medical assistance where required, and parents or carers will be informed in accordance with statutory requirements and the procedures set out within this policy.

All accidents and significant incidents will be recorded accurately and reviewed appropriately. The nursery will use information from individual events, repeated incidents and emerging patterns to identify risks, improve practice and reduce the likelihood of recurrence.

Staff are expected to remain professionally curious about the circumstances surrounding injuries and incidents. Where an injury, explanation, pattern of accidents or other information raises concerns about a child's safety or welfare, the matter will be treated as a safeguarding concern and the nursery's Safeguarding Policy and Procedures will be followed without delay.

Significant incidents will be reviewed to establish what happened, whether existing controls were effective and whether changes are required to the environment, equipment, staffing, supervision, risk assessments, training or procedures.

Shooting Stars Nursery will fulfil all applicable statutory reporting and notification requirements and will cooperate with Ofsted, the Health and Safety Executive, local safeguarding agencies and emergency services where required.

The nursery aims to promote an open learning culture in which accidents, incidents and near-misses are reported honestly and used to improve the safety and wellbeing of children and adults.

2.0 Our Legal Obligations

Early Years Foundation Stage Statutory Framework for Group and School-Based Providers (effective 1 September 2026) - requires providers to take reasonable steps to ensure the safety of children and to maintain appropriate first-aid arrangements. A suitable first-aid box must always be accessible, and providers must keep a written record of accidents or injuries and any first-aid treatment provided.

Parents and carers must be informed of any accident or injury sustained by their child on the same day, or as soon as reasonably practicable afterwards, together with details of any first aid provided.

Registered providers must notify Ofsted of any serious accident, illness or injury to, or death of, a child while in their care and of the action taken. Notification must be

made as soon as reasonably practicable and, in all cases, within **14 days**. Providers must also notify local child protection agencies of any serious accident or injury to, or death of, a child while in their care and act upon any advice received.

Health & Safety at Work etc. Act 1974 - places duties upon the employer to protect, so far as reasonably practicable, the health, safety and welfare of employees and to protect children, parents, visitors and other people who may be affected by the nursery's activities.

Management of Health and Safety at Work Regulations 1999 – require the nursery to assess health and safety risks and to put suitable arrangements in place for the planning, organisation, control, monitoring and review of preventative and protective measures. Accidents, incidents and near-misses will therefore be considered when reviewing risk assessments and safety arrangements.

UKHSA infection control guidance: hygiene, body-fluids, sharps.

UK GDPR & Data Protection Act 2018: secure, proportionate recording and retention of accident data.

Health and Safety (First-Aid) Regulations 1981 – require the nursery, as an employer, to provide adequate and appropriate first-aid equipment, facilities and personnel so that employees who are injured or become ill at work can receive immediate attention. These workplace duties operate alongside the nursery's separate paediatric first-aid responsibilities under the EYFS

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) – require specified work-related deaths, injuries, occupational diseases and dangerous occurrences to be reported to the relevant enforcing authority.

3.0 Procedures

3.1 Definitions

Accident: an unplanned event that results in injury or physical harm to a child, member of staff, visitor or another person. Examples include a fall, bump, cut, burn or collision.

Incident: an event or behaviour that causes, or has the potential to cause, harm, distress, disruption or a significant safety concern, whether or not an injury occurs. This may include serious behaviour incidents, discriminatory incidents, security breaches, property damage or other significant events requiring a formal response.

Significant Incident: an incident that, because of its seriousness, circumstances, potential consequences or impact upon a child or adult, requires management review, safeguarding consideration, external advice or possible notification to a regulatory or statutory agency.

Near-miss: an unplanned event or unsafe circumstance that did not result in injury or harm but had the potential to do so. Near-misses are recorded so that risks can be identified and action taken before a similar event results in harm.

An event may fall within more than one definition. For example, an incident may also involve an accident, safeguarding concern or near-miss. Staff should record and escalate the matter according to the nature and seriousness of what occurred rather than attempting to assign it to only one category.

3.2 Immediate response and Emergency Action

When an accident, injury or significant incident occurs, the immediate priority is to protect the child or adult from further harm and provide appropriate care.

Staff will remain calm, assess the situation and make the immediate area safe. Where necessary, the activity will be stopped, hazards removed or access to the area restricted. Other children will be reassured and safely supervised.
A member of staff holding a current paediatric first-aid qualification will assess the child and provide first aid within the limits of their training. As Shooting Stars Nursery requires all employees working with children to maintain a current paediatric first-aid qualification, first-aid assistance should be immediately available throughout the nursery day.

Where there is any concern that the injury or illness may be serious or life-threatening, staff must call **999 without delay**.

Emergency action must not be postponed while attempting to contact the Nursery Manager, Designated Safeguarding Lead or the child's parents or carers.

Staff will follow the instructions provided by emergency services and must not undertake treatment or procedures outside the scope of their training.
Where appropriate, the child should remain where they are until they have been assessed, particularly where there is concern about a significant head, neck, back or other serious injury, unless remaining in that location would expose them to further danger.

The Room Leader and Nursery Manager or person in charge will be informed as soon as practicable. Where the circumstances of the injury raise a safeguarding concern, the Designated Safeguarding Lead or Deputy DSL must also be informed without delay.

Safeguarding consideration may be required where the injury is unexplained, the explanation is inconsistent with the injury or the child's developmental ability, there is an unusual pattern of injuries, there has been a significant failure of supervision, or information disclosed by the child or another person raises concern.
Staff must not investigate a possible safeguarding concern themselves. The child's immediate medical needs will be addressed, and the nursery's Safeguarding Policy and Procedures will then be followed.

Safe supervision of all other children must be maintained throughout the response. Staff may be redeployed where necessary but responding to an accident must not result in other children being left unsupervised or statutory staffing requirements being compromised.

Where emergency services attend, a member of staff will provide relevant information about the child and the circumstances of the incident. If a child requires transfer to hospital before their parent or carer arrives, the Nursery Manager or person in charge will make appropriate arrangements in accordance with section 3.4 of this policy.

Once the immediate situation is under control, the accident or incident will be recorded, parents or carers informed and any necessary management, safeguarding or regulatory action taken in accordance with the remaining sections of this policy. Where equipment, furniture, an environmental hazard or another unsafe condition may have contributed to the event, it will be taken out of use or the area secured until it has been assessed and made safe.

3.3 Head injuries

All head injuries will be treated with additional caution because symptoms of concussion or more serious injury may develop after the initial event.

A member of staff holding a current paediatric first-aid qualification will assess the child promptly and provide appropriate first aid within the scope of their training. The child will be comforted and closely observed for any change in their condition. Parents or carers will be contacted promptly following **every head injury**, regardless of whether the injury initially appears minor. They will be informed of what happened, any visible injury, first aid provided and how the child is presenting.

The child will be monitored for symptoms including unusual or increasing drowsiness, vomiting, loss of consciousness, seizure, confusion, unusual behaviour, persistent or worsening distress, problems with balance or walking, changes to vision or hearing, weakness, or blood or clear fluid coming from the ears or nose.

Where symptoms indicate a potentially serious head injury, staff must call **999 without delay** and follow the instructions of emergency services.

NHS guidance identifies signs such as inability to stay awake, seizure, neurological changes, certain significant falls and clear fluid or bleeding from the ears as reasons for emergency assessment.

Where staff are uncertain whether urgent medical assessment is required and the situation is not an emergency, advice may be sought from **NHS 111**. For children under five, NHS guidance advises calling 111 rather than relying on the online service.

The Nursery Manager or person in charge will consider whether the child should be collected following the injury. Collection will normally be requested where the child is

symptomatic, requires continued close observation beyond what can reasonably be provided within the nursery, appears significantly distressed or unwell, or where medical advice recommends that the child be monitored at home or assessed by a healthcare professional.

A child who remains at nursery following a minor head injury will continue to be closely observed. Staff caring for the child will be informed that a head injury has occurred so that any subsequent change in presentation can be identified promptly. Children will be allowed to sleep at their usual sleep time following a minor head injury unless medical advice indicates otherwise. Sleeping children will continue to be supervised in accordance with the nursery's Safer Sleep procedures, with particular attention given to any difficulty waking the child or other change from their normal presentation.

Every head injury will be recorded on the nursery's accident-recording system. The record will include the circumstances of the injury, the area of the head affected, first aid provided, observations made, the time parents were contacted and any medical advice or action taken.

Parents or carers will receive written **Head Injury Information** explaining the signs and symptoms that require further medical attention and will be advised to continue monitoring the child after collection.

Where a child sustains repeated head injuries, or where the circumstances or explanation for an injury are unusual or concerning, the Nursery Manager and Designated Safeguarding Lead will review the incidents collectively. Consideration will be given to supervision, environmental risks, developmental needs and whether there are any safeguarding concerns.

Any equipment, furniture or environmental feature that contributed to the injury will be assessed and appropriate action taken to reduce the risk of recurrence.

3.4 Serious Injury, Illness and Emergency Medical Treatment
Where a child sustains a serious injury, becomes seriously unwell or shows symptoms requiring urgent medical attention, their immediate health and safety will take priority over administrative procedures.

A member of staff will provide appropriate first aid within the scope of their training and will remain with and reassure the child. Where emergency medication is required, this will be administered in accordance with the child's healthcare plan, parental permissions and the nursery's Medication Policy.

999 must be called without delay where a child appears to be seriously ill or injured, their condition is life-threatening or rapidly deteriorating, or staff reasonably believe emergency medical assistance is required.

Staff do not need permission from a manager or parent before calling 999, and emergency assistance must not be delayed while attempts are made to contact them.

Examples requiring emergency assistance may include severe difficulty breathing, choking, loss of consciousness or significantly reduced responsiveness, severe allergic reaction, seizure, uncontrolled or significant bleeding, suspected serious trauma, poisoning or any other condition where staff believe there is an immediate threat to the child's health or life. NHS guidance advises calling 999 for serious and life-threatening emergencies and seeking NHS 111 advice where staff are unsure whether emergency treatment is required.

The Nursery Manager or person in charge will be informed as soon as practicable and will coordinate the wider response while the practitioner caring for the child remains focused on their immediate needs.

Parents or carers will be contacted as soon as possible. Where they cannot initially be reached, attempts will continue using the contact details and emergency contacts held by the nursery. The inability to contact a parent must never delay emergency medical treatment.

Safe supervision of the remaining children will be maintained. Staff will be redeployed where necessary, and additional staff or management support will be called upon where required.

Where an ambulance attends, staff will provide relevant information to emergency personnel, including what happened, first aid or medication provided, known medical conditions, allergies and any changes observed in the child's condition.
Where a child is transferred to hospital before their parent or carer arrives, a familiar and appropriate member of staff will accompany the child where this is permitted by the emergency service and can be arranged safely. Appropriate cover will be organised so that the safety and supervision of the remaining children are not compromised.

The accompanying practitioner will take or make available relevant information about the child, including emergency contact details, known allergies, medical conditions, medication or healthcare plans and information about the accident or illness. Confidential information will only be shared where necessary for the child's care.

Staff will **not transport a seriously ill or seriously injured child to hospital in a personal vehicle as a substitute for calling an ambulance** where emergency medical assistance is required.

Where the situation is urgent but not immediately life-threatening, advice may be sought from **NHS 111**, the child's parents or an appropriate healthcare professional. For children under five, NHS guidance advises calling 111 rather than relying on the online 111 service.

Following the emergency, the Nursery Manager will ensure that the accident or incident is fully recorded and that parents receive all required information. The circumstances will be reviewed to determine whether any changes are required to risk assessments, equipment, staffing, supervision, training or procedures. Where the circumstances raise a safeguarding concern, the Designated Safeguarding Lead will be informed and the Safeguarding Policy and Procedures followed.

The Nursery Manager and Designated Safeguarding Lead, where relevant, will also consider whether the incident requires notification to Ofsted, local child protection agencies, the Health and Safety Executive or another relevant body in accordance with sections 3.11 and 3.12 of this policy. Registered early years providers have specific reporting duties for serious accidents, illnesses and injuries to children in their care.

3.5 Specific Accident Scenarios

The following procedures apply to common accident and injury scenarios that may occur within the nursery. Staff will provide first aid within the scope of their training and will escalate to section 3.4 where an injury or illness is serious, deteriorating or requires urgent medical attention.

Bites

Where a child bites another child, staff will respond calmly and attend to the needs of both children.

The injured area will be assessed and appropriate first aid provided. Where the skin has been broken, the wound will be managed promptly because human bites can create a risk of infection. The wound will be cleaned appropriately, covered where required and medical advice sought where indicated. Current UKHSA guidance advises immediate medical attention or advice where a human bite breaks the skin.

Parents or carers of the children involved will be informed appropriately. Separate records will be maintained so that the identity and personal information of another child are not disclosed.

Repeated biting will be reviewed to identify any pattern, trigger, developmental need or environmental factor and will be managed in accordance with the nursery's Biting and Behaviour procedures. Where behaviour or injuries raise wider safeguarding concerns, the Designated Safeguarding Lead will be informed.

Cuts, Bleeding and Body Fluids

Staff will use standard infection-control precautions whenever they may come into contact with blood, vomit or other bodily fluids.

Appropriate disposable PPE will be used according to the risk, including gloves and an apron where contact or splashing may occur. Blood and bodily-fluid spillages will be cleaned promptly using suitable cleaning and disinfecting products and disposable materials in accordance with infection-control procedures.

Cuts and grazes will be cleaned and covered appropriately. Any contaminated clothing will be managed safely and returned to parents or carers in accordance with the nursery's Infection Prevention and Control Policy.

Where blood or bodily fluids come into contact with broken skin, the eyes, nose or mouth, the affected area will be dealt with promptly and medical advice sought where required. The exposure will also be recorded.

Burns and Scalds
Burns and scalds will be treated promptly in accordance with paediatric first-aid training. The affected area should be cooled with cool running water as soon as possible. NHS guidance recommends cooling burns or scalds under cool running water for at least **20 minutes** and advises against applying creams, oils, butter or similar substances.

Medical assistance will be sought according to the location, extent, cause and severity of the burn and the child's condition. Serious burns, chemical or electrical burns, or any situation causing concern will be managed in accordance with section 3.4.

Parents or carers will be contacted promptly.

The circumstances of any burn or scald will be reviewed to establish how the child gained access to the source of heat and whether changes are required to supervision, equipment, room layout or risk assessments.

Eye Injuries
Eye injuries will be treated cautiously. Staff will not attempt to remove an object embedded in the eye or undertake treatment outside their first-aid training. Where an eye has been exposed to a chemical or other harmful substance, appropriate immediate first aid will be provided and urgent medical advice sought.

Parents or carers will be informed promptly where an eye injury is more than trivial or requires continuing observation or medical assessment.

Dental and Mouth Injuries
Injuries involving the teeth, gums, lips or mouth will be assessed and treated appropriately.

Any significant bleeding, displacement or loss of a tooth, serious facial injury or concern about the child's ability to breathe, swallow or remain comfortable will result in prompt medical or dental advice.

Where a tooth or part of a tooth has been knocked out or damaged, it will be preserved and passed to the parent or healthcare professional where appropriate rather than discarded.

Parents will be contacted promptly following significant dental or mouth injuries.

Suspected Fractures, Dislocations or Serious Limb Injuries
Where a fracture, dislocation or other serious injury is suspected, staff will keep the child as comfortable and still as reasonably possible and will not attempt to straighten or manipulate the affected limb.

Medical assistance will be sought according to the severity and circumstances of the injury. Where there is significant deformity, severe pain, loss of circulation or sensation, major trauma or another serious concern, staff will follow the emergency procedure in section 3.4.

Allergic Reactions
Where a child displays signs of an allergic reaction, staff will follow the child's healthcare plan and the nursery's Allergy and Medication procedures.
Emergency medication, including an adrenaline auto-injector where prescribed and authorised, will be administered by appropriately trained staff in accordance with the child's plan.

Where anaphylaxis is suspected, **999 will be called immediately**. Parents or carers will be contacted as soon as possible, but emergency treatment will not be delayed while attempting to reach them.

The incident will subsequently be reviewed to determine the likely cause of the reaction and whether changes are required to food handling, allergen controls, healthcare plans or risk assessments.

Sharps and Needlestick Injuries
Staff must not handle discarded needles or sharps directly with their hands.
Where a child or adult suffers an injury involving a used or potentially contaminated sharp, immediate first aid will be provided and urgent medical advice sought.
UKHSA guidance advises that a wound caused by a used needle should be washed thoroughly, covered with a waterproof dressing and followed by immediate medical attention or advice because of the potential risk of blood-borne infection.
The area will be secured to prevent further exposure and the sharp will be dealt with safely in accordance with local authority, infection-control and waste-management arrangements.

All such incidents will be reported immediately to the Nursery Manager and recorded. Where an employee is involved, occupational-health advice and RIDDOR consideration will be undertaken where appropriate.

3.6 Injuries Identified on Arrival or of Unclear Origin
Where a child arrives at nursery with an injury, mark, bruise or other physical concern that did not occur while they were in the nursery's care, staff will respond sensitively and objectively.

Where appropriate, the parent or carer may be asked for a brief factual explanation of how the injury occurred. Staff should not question the parent repeatedly, challenge their explanation or attempt to investigate the circumstances themselves.

The injury and any explanation provided will be recorded accurately. Where possible, the record should include the location and general appearance of the injury, when it was first noticed, who observed it and the parent or carer's explanation in their own words.

Staff must clearly distinguish between **what they have observed** and **what they have been told**. Assumptions or diagnoses should not be recorded unless provided by an appropriately qualified healthcare professional.

Where an injury is discovered after the child has been admitted into the setting, for example during nappy changing, toileting, dressing, sleep routines or play, the practitioner must inform the Room Leader and Designated Safeguarding Lead where there is any uncertainty about its origin or significance.

An injury will not automatically be treated as a safeguarding concern simply because it occurred outside the nursery. However, staff must remain professionally curious where:

- there is no explanation for the injury;
- the explanation changes or appears inconsistent;
- the injury appears inconsistent with the child's age, development or mobility;
- the location, type or pattern of injury causes concern;
- there are repeated or frequent unexplained injuries;
- there is a delay in seeking medical treatment where this would reasonably have been expected; or
- the injury forms part of a wider pattern of concerns about the child or family.

Where any safeguarding concern arises, the Designated Safeguarding Lead or Deputy DSL must be informed without delay and the nursery's Safeguarding Policy and Procedures followed.

Staff must not delay reporting a concern while waiting to see whether a similar injury occurs again or while attempting to obtain further evidence.

The Designated Safeguarding Lead will consider the injury alongside all information already known about the child, including previous injuries, safeguarding records, attendance patterns, changes in behaviour or presentation and any involvement from other professionals.

Where necessary, advice or referral will be sought from Children's Social Care, the police or another appropriate safeguarding service in accordance with the nursery's safeguarding procedures.

Parents and carers will normally be informed where an injury has been identified and recorded. However, where there is concern that discussing the injury with a parent or carer could place the child at increased risk or compromise a safeguarding investigation, the Designated Safeguarding Lead will seek professional advice before further discussion takes place.

Where first aid or medical attention is required, this will be provided regardless of whether the injury occurred within the nursery. Parents or carers will be informed of any first aid administered and the treatment will be recorded appropriately.

Records relating to injuries of unclear or external origin will be stored securely and, where they raise safeguarding concerns, incorporated into the child's safeguarding chronology so that patterns can be identified over time.

3.7 Significant Incidents and Non-Injury Events
Shooting Stars Nursery recognises that significant events may occur which do not result in a physical injury but nevertheless require immediate action, formal recording, management review or safeguarding consideration.

A significant incident may include serious or persistent behaviour that places a child or another person at risk, a serious child-on-child incident, discriminatory or threatening behaviour, inappropriate sexualised behaviour, significant physical intervention, an attempted unauthorised collection, a security breach, a person entering or attempting to enter the premises without authorisation, serious damage to premises or equipment, an evacuation or emergency affecting the safe operation of the setting, or another event that creates a substantial risk to children or adults.

The seriousness of an incident will be determined by its circumstances, actual or potential impact, whether the event could reasonably have resulted in harm, whether there is evidence of a pattern and whether safeguarding, regulatory or health and safety action may be required.

When a significant incident occurs, staff will first ensure that children and adults are safe. The situation will be brought under control calmly and proportionately, other children will continue to be appropriately supervised and first aid or emergency assistance will be provided where subsequently required.

The Room Leader and Nursery Manager or person in charge will be informed promptly. Where the incident involves or may indicate abuse, neglect, child-on-child harm, inappropriate adult conduct, exploitation or another safeguarding concern, the Designated Safeguarding Lead or Deputy DSL must also be informed without delay.

Where a child's behaviour has contributed to the incident, staff will respond in accordance with the nursery's Behaviour Policy. The response will focus on safety, co-regulation, understanding the reason for the behaviour and preventing recurrence. A significant incident must not automatically be treated simply as poor behaviour where the circumstances may indicate an unmet developmental, SEND or safeguarding need.

Where physical intervention has been necessary to prevent a child from causing injury to themselves or another person or causing serious damage, only reasonable and proportionate intervention will be used. The circumstances and intervention will be recorded and reviewed in accordance with the nursery's Managing Behaviour and Physical Intervention procedures.

Where the incident involves discriminatory language or behaviour, staff will respond appropriately at the time and consider the child's age and developmental understanding. Repeated, targeted or particularly concerning discriminatory behaviour will be reviewed to establish whether additional support, safeguarding consideration or work with the child and family is required.

Where the incident involves an unauthorised person, attempted collection, threatening behaviour or a security breach, access to children will be prevented and the nursery's security arrangements followed. The police will be contacted immediately where there is a threat to the safety of children, staff or others.

Where an incident relates to a child going missing, being temporarily unaccounted for or leaving a supervised area, the nursery's **Missing Child Procedure** must be followed immediately rather than treating the matter solely as a general incident.

Significant incidents will be recorded factually and as soon as reasonably practicable. The record will explain what occurred, who was present, what staff observed, any immediate action taken, how children were supported, whether parents or external agencies were contacted and any subsequent management or safeguarding action.

Where several children are involved, information concerning each child will be recorded and shared in a way that protects the confidentiality of the other children and families involved.

Parents or carers will be informed in accordance with section 3.8. Staff must not disclose another child's confidential information in order to explain an incident.

The Nursery Manager and, where appropriate, the Designated Safeguarding Lead will review significant incidents to establish whether further action is required. This may include changes to supervision, staffing, room organisation, equipment, risk assessments, individual support plans, staff training or nursery procedures.

Repeated incidents will be considered collectively. An emerging pattern involving the same child, room, activity, member of staff, location or type of event will not be treated as a series of unrelated occurrences.

The Nursery Manager will consider whether the circumstances require notification or referral to Ofsted, Children's Social Care, the Local Authority Designated Officer, the police, the Health and Safety Executive or another relevant agency. **Not every significant incident is automatically reportable to Ofsted**; the applicable notification criteria will be considered in accordance with sections 3.11 and 3.12 of this policy. Ofsted requires registered providers to report specified serious childcare incidents within the applicable statutory timeframe.

3.8 Informing Parents and Carers

Parents and carers will be informed of any accident or injury sustained by their child while in the nursery's care and of any first aid treatment provided. This information will be given on the same day or as soon as reasonably practicable afterwards. For minor accidents and injuries, parents may ordinarily be informed through the nursery's approved recording system and during collection.

Parents or carers will be contacted **promptly by telephone** where the accident, injury or incident is more significant or where they need to make a decision about their child's care. This includes head injuries, significant facial or eye injuries, bites that break the skin, suspected fractures, burns or scalds, significant bleeding, allergic reactions, injuries requiring medical advice or treatment, or any situation where the child becomes unwell or their condition causes concern.

A telephone call will also be made where staff believe that a parent should be aware of an incident before collection, even where no significant physical injury has occurred.

Where emergency medical treatment is required, parents or carers will be contacted as soon as possible. Emergency treatment or a call to 999 must not be delayed while attempts are made to contact them.

Where the child's parent or primary carer cannot be reached, reasonable attempts will be made using the alternative contact details and authorised emergency contacts held by the nursery. Attempts to make contact will be recorded where the matter is significant.

Parents will be given clear factual information about what happened, the injury or symptoms observed, first aid or medication provided, how the child has responded and whether medical advice or emergency assistance has been sought.

Staff must not provide a medical diagnosis or give reassurance beyond the limits of their training. Where further monitoring or medical assessment is recommended, parents will be told clearly what action has been advised.

A written accident or incident record will be completed and made available to the parent or carer. Parents will be asked to acknowledge the record electronically through Famly or by signature where paper records are used.

Where acknowledgement cannot be obtained on the same day, this will not invalidate the record or delay any necessary action. The nursery will record that the parent has been informed and seek acknowledgement as soon as reasonably practicable.

Where an incident involves another child, parents will be informed about what happened to **their own child** and the action taken to keep them safe. Staff will not disclose the name, personal information, medical information or family circumstances of another child.

Where the circumstances of an injury or incident raise safeguarding concerns, the nursery's Safeguarding Policy and Procedures will take priority. Parents will normally be informed, but the Designated Safeguarding Lead may seek advice before doing so where informing a parent could place a child at increased risk or compromise a safeguarding enquiry.

Any advice, information or relevant medical outcome subsequently provided by parents will be added to the child's record where appropriate and considered when determining whether further action or review is required.

For head injuries, parents will additionally receive the nursery's **Head Injury Information Sheet** and will be advised to continue monitoring the child after they leave the setting.

3.9 Recording Accidents and Incidents – Children
All accidents, injuries and significant incidents involving children will be recorded accurately and as soon as reasonably practicable after the immediate needs of the child have been addressed.

Records must be completed on the nursery's approved recording system by a member of staff who witnessed the event or has sufficient direct knowledge of what occurred. Where the person completing the record did not witness the event, this must be made clear.

The record will contain sufficient information to provide a clear and factual account of what happened. This will normally include the child's name and date of birth; the date, time and location of the event; what the child was doing immediately beforehand; what happened; who was present or witnessed the event; the nature and location of any injury; first aid or other action taken; the child's presentation following the event; any medical or emergency assistance sought; when and how parents or carers were informed; and the names of staff involved in responding to the event.

Where an injury is visible, its location will be recorded accurately using the nursery's body-map facility where appropriate.

Records must distinguish clearly between **facts, observations and information provided by another person**. Staff must not speculate about how an injury occurred, assign blame or record a medical diagnosis unless this has been provided by an appropriately qualified healthcare professional.

Where a child is able to communicate what happened, their account should be recorded accurately and, where particularly relevant, their own words should be used.

First-aid treatment must be documented clearly, including what treatment was provided, by whom and whether the child's condition changed following treatment.

Where medication has been administered as part of the response, this must also be recorded in accordance with the nursery's Medication Policy and any relevant healthcare plan.

Parents or carers will be informed in accordance with section 3.8. The record will show when and how they were informed and any advice provided. Parents will normally be asked to acknowledge the accident or injury record electronically through Famly or by signature where a paper form is used.

The statutory requirement is to **record the accident/injury and first aid and inform the parent**; a delayed parental signature does not prevent the nursery from fulfilling those duties. Where acknowledgement cannot be obtained immediately, the nursery will record that the parent was informed and seek acknowledgement subsequently.

Where an event involves more than one child, each child's record will contain only the information necessary to explain what happened to that child and how the nursery responded. Another child's name, medical information or family circumstances will not be disclosed to parents through an accident or incident record.

Where an accident or incident raises a safeguarding concern, the accident or incident record will still be completed where appropriate, but the safeguarding concern will also be recorded separately through the nursery's safeguarding-recording procedure and referred to the Designated Safeguarding Lead. Sensitive safeguarding information will not be included unnecessarily within a record routinely accessible to parents.

Completed records will be reviewed by the Room Leader or appropriate senior practitioner and, where the event is significant, by the Nursery Manager. The review will consider whether the record is complete, whether appropriate action was taken and whether further investigation, safeguarding action, risk reduction or external notification may be required.

Serious accidents and incidents will be brought to the attention of the Nursery Manager promptly rather than awaiting routine review.

If an error is identified after a record has been completed, the original information must not simply be deleted or rewritten in a way that removes the audit trail. Any correction or additional information will be clearly identified, dated and attributable to the person making the amendment.

Accident and incident records will be stored securely, with access restricted to authorised persons, and retained in accordance with the nursery's records-retention and data-protection procedures.

Records will also be used collectively to identify trends and recurring risks. The Nursery Manager and relevant leaders will consider patterns involving particular

locations, equipment, activities, times of day, types of injury or other recurring circumstances in accordance with section 3.14 of this policy.

Where an accident, illness or injury may meet the criteria for notification to Ofsted or another authority, the original nursery record will be preserved and the notification procedure in sections 3.11 and 3.12 followed. Ofsted requires qualifying serious childcare incidents to be notified as soon as reasonably practicable and within **14 days**.

3.10 Staff, Visitor and Contractor Accidents
Any accident, injury or significant incident involving a member of staff, agency worker, student, volunteer, contractor or visitor while on the nursery premises or undertaking nursery-related activities will be responded to promptly and appropriately.

The immediate priority will be to make the situation safe and provide suitable first aid or emergency medical assistance. Where the injury or illness is serious or potentially life-threatening, **999 must be called without delay**.

The Nursery Manager or person in charge must be informed as soon as reasonably practicable of any significant accident or injury involving an adult.

All work-related accidents involving staff, and significant accidents involving visitors, contractors or other adults, will be recorded using the nursery's approved staff accident-recording system or Accident Book. HSE guidance confirms that employers must maintain appropriate records of specified work-related injuries and incidents.

The record should include the individual's name and role or relationship to the nursery, the date, time and location of the accident, what happened, any injury sustained, witnesses, first aid or treatment provided, whether medical assistance was sought and any immediate action taken to prevent further harm.

Records must be factual and must clearly distinguish between what was directly observed and information subsequently provided by the injured person or another individual.

Where an employee is unable to continue working safely following an injury or illness, the Nursery Manager will make appropriate arrangements for them to stop work, seek medical advice or leave the premises safely. An injured employee must not remain responsible for children where their condition may impair their ability to provide safe care or supervision.

Where an accident involves a contractor or visitor, the nursery will cooperate appropriately with their employer or organisation where relevant. Information will only be shared where necessary and in accordance with data-protection requirements.

The Nursery Manager will review significant adult accidents to identify whether the event arose from the premises, equipment, working practices, staffing arrangements

or another health and safety risk. Any immediate hazard will be removed, isolated or otherwise controlled until it has been made safe.

Where the accident indicates that a risk assessment or working practice is inadequate, appropriate corrective action will be taken and monitored to completion.

Where an employee sustains an injury that results in absence from work or an inability to perform their normal duties, the Nursery Manager will maintain sufficient information to determine whether the event meets the relevant **RIDDOR**reporting threshold.

RIDDOR does not require every workplace accident to be reported. For workers, specified injuries and certain injuries resulting in more than seven consecutive days of incapacity are among the reportable categories.

For visitors, volunteers and other people who are not working, a work-related accident may be reportable where it causes an injury and the person is taken **directly from the scene to hospital for treatment**. Being taken to hospital purely as a precaution, where no injury is apparent, does not by itself make the event reportable.

The Nursery Manager will assess potential RIDDOR cases in accordance with section **3.12** of this policy. RIDDOR reports will only be submitted by the appropriate responsible person on behalf of the nursery. HSE states that responsible persons include employers and people in control of work premises.

Where an accident involving an adult also raises a safeguarding concern—for example, because an employee's actions placed a child at risk—the matter will additionally be referred to the Designated Safeguarding Lead and managed under the nursery's Safeguarding, Allegations or Staff Conduct procedures as appropriate.

Adult accident records will be stored securely and access will be restricted to authorised persons.

3.11 Ofsted and Safeguarding Notifications
hooting Stars Nursery will make all statutory notifications arising from serious accidents, illnesses, injuries and incidents within the required timescales.

The Registered Provider remains responsible for ensuring that statutory notifications are made. The Nursery Manager will identify incidents that may require notification, gather the relevant information and ensure that the appropriate Director or authorised person is informed without delay. An authorised Nursery Manager may complete a notification on behalf of the provider where appropriate.

A notification must not be delayed simply because the nursery has not yet completed its internal investigation or does not yet have every piece of information. Initial information will be provided within the required timescale and any further action taken will be recorded.

Notification to Ofsted

Ofsted will be notified of any **serious accident, illness or injury to, or death of, a child while in the nursery's care**, together with the action taken.

The notification will be made **as soon as reasonably practicable and in all cases within 14 days of the incident occurring**. Failure by a registered provider to meet this requirement without reasonable excuse is an offence under the EYFS requirements.

Not every accident or hospital visit requires notification to Ofsted. The Nursery Manager will consider the circumstances and current Ofsted guidance when determining whether an injury or illness is serious.

Examples that Ofsted currently identifies as reportable include an event requiring resuscitation, admission to hospital for more than 24 hours, a fracture, dislocation of a major joint, loss of consciousness, severe breathing difficulties, certain serious eye injuries and injuries requiring treatment following exposure to harmful substances or electricity. Minor cuts, grazes, ordinary bruising and similar minor injuries do not normally require notification.

Where there is uncertainty about whether an event is notifiable, the Nursery Manager or Registered Provider will check the current Ofsted reporting guidance and seek appropriate advice where necessary. Uncertainty must not be used as a reason to ignore or unnecessarily delay consideration of notification.

The Ofsted notification will contain an accurate factual account of the incident, the child's injury or illness, treatment or medical assistance provided, action taken by the nursery and any immediate measures introduced to protect children or reduce the risk of recurrence.

A copy or record of the notification, the date submitted and any subsequent correspondence or action from Ofsted will be retained securely with the relevant management records.

Local Child-Protection Agency Notification

The nursery will also notify the appropriate **local child-protection agency of any serious accident or injury to, or the death of, a child while in its care**, and will act upon any advice received.

The Designated Safeguarding Lead will be involved where the circumstances raise safeguarding concerns or where liaison with Children's Social Care or another safeguarding service is required.

As this policy applies across more than one nursery site, staff will use the **Site Safeguarding Contacts Sheet** applicable to the nursery at which the incident occurred to identify the correct local authority service.

A serious accident or injury will not automatically be treated as evidence of abuse or neglect. However, where the circumstances also raise concerns about the child's welfare, supervision, staff conduct, unexplained injury or another safeguarding matter, the nursery's Safeguarding Policy and Procedures will be followed alongside this notification procedure.

Where immediate safeguarding action is necessary, a referral to Children's Social Care or contact with the police must **not**be delayed while an Ofsted notification is being prepared.

Food Poisoning

Registered providers must also notify Ofsted of **food poisoning affecting two or more children cared for on the premises**. This notification must be made as soon as reasonably practicable and within 14 days.

Any suspected outbreak will additionally be managed in accordance with the nursery's Infection Prevention and Control and Food Safety procedures, including contact with relevant public-health or environmental-health services where required.

Other Agencies

Following a serious accident or incident, the Nursery Manager will also consider whether notification is required to the nursery's insurer, local authority or another relevant organisation under applicable contractual or regulatory arrangements.

Separate consideration will be given to whether the event is reportable under **RIDDOR**, in accordance with section 3.12. An Ofsted notification does not automatically mean that a RIDDOR report is required, and a RIDDOR assessment does not replace the nursery's EYFS notification duties.

3.12 RIDDOR
Shooting Stars Nursery will comply with the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)** and will report qualifying work-related incidents to the relevant enforcing authority.

RIDDOR does not require every accident, injury or near-miss to be reported. The Nursery Manager will assess the circumstances of an event against the current Health and Safety Executive guidance and will seek advice where the reporting threshold is unclear.

A RIDDOR report will only be made by the appropriate **responsible person**, such as the employer or person in control of the premises. Individual employees, parents or injured persons are not responsible for submitting the nursery's RIDDOR report.

Injuries to employees and other workers

A work-related accident involving an employee or other worker may be reportable where it results in death, a specified injury or more than seven consecutive days of incapacity for their normal work.

Specified injuries include certain fractures, amputations, serious eye injuries, serious crush injuries, serious burns and other injuries identified within the RIDDOR Regulations.

Where an employee is unable to perform their normal work for **more than seven consecutive days** because of a work-related injury, the incident must be reported within **15 days of the accident**. The period includes days the employee would not normally have worked, such as weekends or rest days, but does not include the day of the accident itself.

Accidents resulting in more than three consecutive days of incapacity but not exceeding seven days may still need to be recorded even though they are not reportable under the over-seven-day RIDDOR requirement.

Injuries to children, parents, visitors and other non-workers

An accident involving a child, parent, visitor or other person who is not at work may be RIDDOR-reportable where:

- the accident arose out of or in connection with the nursery's work activity;
- the person sustained an injury; and
- because of that injury, they were taken **directly from the scene of the accident to hospital for treatment**.

A child being taken to hospital does **not automatically make an accident RIDDOR-reportable**.

For example, where a parent chooses to take a child to hospital later as a precaution following an ordinary childhood accident that was not caused by the nursery's work activity, this would not necessarily meet the RIDDOR threshold.

Equally, being taken to hospital purely for observation or precaution, where no injury requiring treatment has occurred, does not by itself make the event reportable.

When determining whether an accident arose out of or in connection with work, the Nursery Manager will consider whether the way the nursery activity was organised, the premises or equipment, or the condition of the premises contributed to the accident.

Dangerous occurrences

Certain specified events must be reported under RIDDOR even where nobody is injured. These are known as **dangerous occurrences** and are events specifically

listed within the Regulations because they have a high potential to cause serious harm.

Not every near-miss is a RIDDOR dangerous occurrence. The Nursery Manager will check the current HSE list where a serious event involving equipment, structures, electrical systems, lifting equipment, fire, explosion, hazardous substances or another significant workplace hazard occurs.

All near-misses, whether RIDDOR-reportable or not, will still be managed under section 3.13 of this policy.

Occupational disease and exposure

Where a member of staff receives a confirmed medical diagnosis of a disease or condition that may be reportable because of their occupational exposure, the Nursery Manager or Registered Provider will consider whether a RIDDOR report is required.

Only specified occupational diseases linked to identified workplace hazards are reportable; ordinary illness or infection is not automatically reportable.

Reporting timescales

For most reportable incidents, the responsible person must notify the relevant enforcing authority **without delay**, with the report received within **10 days** of the incident.

For an injury resulting in more than seven consecutive days of worker incapacity, the report must be made within **15 days of the accident**.

Reportable occupational diseases must be reported when the responsible person receives the relevant diagnosis.

RIDDOR reports will normally be submitted using the appropriate HSE online reporting system. A copy or confirmation of the submission will be retained securely by the nursery.

Recording and investigation

Where an incident is or may be reportable under RIDDOR, the Nursery Manager will ensure that relevant accident records, witness information, risk assessments and other evidence are preserved.

A RIDDOR report does not replace the nursery's responsibility to investigate the circumstances, identify contributing factors and take appropriate corrective action.

The incident will also be considered separately under the nursery's **Ofsted and safeguarding notification procedure in section 3.11**. An event may require

notification to Ofsted without meeting the RIDDOR threshold or may require consideration under both regimes.

3.13 Near-Miss Reporting

Shooting Stars Nursery encourages the prompt reporting of near-misses so that hazards and weaknesses in practice can be identified and corrected before they result in injury or harm.

A near-miss is an event or unsafe circumstance that did not result in injury or harm but had the realistic potential to do so. The absence of an injury does not mean that the event should be ignored.

Examples may include a child almost falling because equipment became unstable, a door or gate being found unsecured before a child accessed it, an object falling close to a child, equipment failing without causing injury, a child briefly accessing an unsafe area, or another event where harm was narrowly avoided.

Staff who identify or witness a near-miss must take any immediate action necessary to remove or control the risk. Where equipment, furniture or an area cannot immediately be made safe, it will be taken out of use or access restricted until appropriate action has been taken.

The Room Leader or Nursery Manager will be informed of the near miss. Where there was potential for serious harm, a significant failure of supervision or security, or circumstances that may raise a safeguarding concern, the Nursery Manager and Designated Safeguarding Lead must be informed immediately.

Near-misses will be recorded through the nursery's approved reporting system. The record should provide a brief factual description of what happened, where and when it occurred, who may have been affected, what prevented harm from occurring, any immediate action taken and whether further action is required.

The purpose of near-miss reporting is to **learn and improve rather than assign blame**. Staff are expected to report near-misses honestly, including where their own action or omission may have contributed to the event. HSE advises employers not to use accident and near-miss reporting systems primarily to blame individuals, as this can discourage reporting and prevent organisations from learning about underlying risks.

However, a learning approach does not prevent the nursery from addressing deliberate unsafe practice, repeated failure to follow procedures or conduct that places children or adults at risk. Where such concerns arise, they will be managed through the appropriate safeguarding, supervision or staff-conduct procedures. Significant near misses will be reviewed promptly rather than waiting for routine trend analysis. The review will consider what could reasonably have happened, why the existing control did not fully prevent the event and what additional measures are required.

Actions may include changes to the environment, equipment, staff deployment, supervision arrangements, risk assessments, working practices, training or nursery procedures. Actions identified following a near-miss will be allocated to a responsible person and followed through to completion.

Near-miss records will also be reviewed collectively **at least termly** to identify recurring locations, hazards, activities, equipment or patterns. Where a pattern emerges, the Nursery Manager will take appropriate preventative action even where no injury has yet occurred.

Where a near-miss meets the legal definition of a **RIDDOR dangerous occurrence**, the reporting requirements in section 3.12 will be followed. Only specified categories of dangerous occurrence are reportable under RIDDOR; an ordinary nursery near-miss is not automatically reportable to the HSE.

Learning from significant near misses will feed into the nursery's investigation and review process under **section 3.14** and will be shared with relevant staff where this can reduce the likelihood of recurrence.

3.14 Investigation, Review and Learning
Shooting Stars Nursery will review accidents, significant incidents and near-misses to understand what happened, identify any contributing factors and reduce the likelihood of recurrence.

Minor accidents will be monitored through routine accident analysis. Significant accidents, incidents and near-misses will receive a more detailed management review.

The Nursery Manager will normally lead the review, with involvement from the Room Leader, Designated Safeguarding Lead, Health and Safety Lead, Directors or other relevant persons depending on the circumstances.

Where the incident is particularly serious, involves a potential safeguarding allegation, serious staff conduct concern or regulatory investigation, the nursery will consider whether the review should be led or supported by someone who was not directly involved in the event.

A significant event will normally be reviewed within **5 working days**, although immediate safety action must be taken as soon as a risk is identified. The review must not be delayed simply because an external investigation or notification is also taking place.

The purpose of the review is to establish:

What happened?
The sequence of events will be established using available factual information, including accident or incident records, staff accounts, attendance information, relevant risk assessments and other appropriate records.

Why did it happen?
The review will consider both immediate and underlying factors. This may include the environment, equipment, supervision, staff deployment, communication, children's individual needs, training, procedures, workload, room organisation or whether existing risk controls were sufficient.

Could it reasonably have been prevented?
The nursery will consider whether reasonable precautions were already in place, whether those precautions were followed and whether additional measures could reduce the likelihood or severity of a similar event.

Were there previous warning signs?
Relevant previous accidents, incidents, near-misses or concerns will be reviewed to determine whether a pattern had already begun to emerge.

The review will focus on **learning and system improvement rather than automatically attributing blame to an individual**. Human error will be considered alongside the circumstances and systems in which the event occurred.

However, where evidence indicates deliberate unsafe practice, reckless behaviour, repeated failure to follow established procedures or conduct that may place children at risk, the matter may also be addressed through supervision, disciplinary or safeguarding procedures.

Where appropriate, staff directly involved in the event will be given an opportunity to provide a factual account and contribute to identifying improvements. Staff must not be pressured to alter their account or agree with another person's version of events. Where a child is able to communicate relevant information about what happened, this may also be considered in an age- and developmentally appropriate way without repeatedly questioning the child.

Following the review, any required improvements will be clearly recorded. Actions may include changes to:

- risk assessments or control measures;
- room layout, equipment or premises;
- staff deployment or supervision;
- individual care or support plans;
- training, induction or competency checks;
- communication or handover arrangements; or
- nursery policies and procedures.

Each action will have a named person responsible and an appropriate completion date. Completion of actions will be monitored by the Nursery Manager rather than simply recorded as recommendations.

Where an immediate risk is identified, temporary controls will be introduced until a permanent solution is implemented.

The Nursery Manager will consider whether findings should be shared with other rooms or nursery sites. Where the learning is relevant across Shooting Stars Nursery, appropriate changes will be communicated across the organisation rather than being limited to the site where the event occurred.

Significant learning will be communicated through staff meetings, briefings, supervision, training or updates to procedures. Information about individual children, families or staff will only be shared where necessary.
Accident, incident and near-miss data will also be reviewed collectively to identify trends. This will include consideration of recurring types of injury, locations, equipment, activities, times of day, age groups and other patterns that may indicate an unidentified risk.

Where an investigation raises a safeguarding concern, the Designated Safeguarding Lead will ensure that the nursery's Safeguarding Policy and Procedures are followed. Internal investigation must not interfere with or prejudice enquiries being undertaken by the police, Children's Social Care, LADO, Ofsted or another authority.
Any required statutory notifications will be made within their applicable timescales and will **not be delayed until the internal investigation has been completed**.

Records of significant investigations, decisions, actions and subsequent reviews will be retained securely in accordance with the nursery's record-retention arrangements. A final review will confirm whether agreed actions have been completed and whether they have effectively reduced the identified risk.

3.15 Accidents and Incidents During Outings or Off-Site Activities
The same standards of care, first aid, recording, parental notification and safeguarding apply when children are participating in an outing or other nursery activity away from the registered premises.

Before an outing takes place, the person leading the outing will ensure that appropriate risk assessments and emergency arrangements are in place. Consideration will be given to the nature and location of the activity, the ages and individual needs of the children, staffing and supervision arrangements, access to emergency services, communication arrangements and the first-aid equipment or medication that may be required.

A suitable travelling first-aid kit will accompany the group and must be accessible throughout the outing. Any emergency medication or healthcare equipment required by individual children will also accompany them and remain readily accessible.

Shooting Stars Nursery requires all employees working with children to hold a current paediatric first-aid qualification. Staff deployment on outings will therefore ensure that appropriately trained first-aid assistance is immediately available throughout the activity.

If an accident, injury or medical incident occurs, staff will first make the situation safe and provide appropriate first aid. The outing leader will coordinate the wider response and ensure that the remaining children continue to be safely supervised.

Where the child appears seriously injured or unwell, **999 must be called without delay**. Staff should provide the emergency services with the clearest possible information about the group's location and the child's condition. Emergency medical treatment must not be delayed while attempting to contact the nursery or the child's parents.

The Nursery Manager or person in charge at the nursery will be informed as soon as reasonably practicable of any significant accident, illness or incident. Parents or carers will be contacted promptly in accordance with section 3.8.

Where a child needs to be transferred to hospital before their parent or carer arrives, a familiar and appropriate member of staff will accompany the child where this is permitted by the emergency service and can be arranged safely.

The outing leader must ensure that this does not leave the remaining children inadequately supervised. Where necessary, additional support will be requested from the nursery or another suitable contingency arrangement identified within the outing risk assessment will be implemented.

The accompanying practitioner will provide relevant information about the child to healthcare professionals, including known medical conditions, allergies, medication or healthcare plans and details of the incident. Confidential information will only be shared where necessary for the child's care.

Staff must not use a personal vehicle to transport a seriously ill or seriously injured child to hospital as a substitute for requesting emergency medical assistance where an ambulance is required.

Where an incident occurs at a venue, the outing leader will cooperate appropriately with venue staff and follow any necessary emergency procedures. However, responsibility for the children remains with Shooting Stars Nursery and staff must continue to follow the nursery's own safeguarding, supervision and accident procedures.

If an accident or incident results from a hazard associated with the venue, activity, transport arrangements or equipment, the relevant activity will be stopped or altered where necessary to prevent further harm. The outing leader will determine whether it remains safe and appropriate for the outing to continue.

Where circumstances make it unsafe to continue, arrangements will be made for the group to return to the nursery or another suitable safe location.

Any accident, injury or significant incident occurring during an outing will be recorded through the nursery's normal accident or incident recording procedures as soon as

reasonably practicable. The record will include the location of the event, first aid provided, emergency or medical assistance sought and any action taken by staff or the venue.

Where an incident raises a safeguarding concern, the Designated Safeguarding Lead will be informed and the nursery's Safeguarding Policy and Procedures followed.

Following a significant incident, the Nursery Manager and outing leader will review what occurred and consider whether changes are required to the outing risk assessment, staffing arrangements, transport arrangements, venue selection, equipment or future procedures.

The Nursery Manager will also consider whether the event meets the requirements for notification to **Ofsted, local safeguarding agencies or the Health and Safety Executive** under sections 3.11 and 3.12. Serious accidents, illnesses or injuries remain subject to the EYFS notification requirements even when they occur away from the nursery while the child is in the provider's care.

3.16 Contingency if Famly is Unavailable

Where Famly or another approved digital recording system is temporarily unavailable, staff must continue to record accidents, injuries and significant incidents without delay.

The unavailability of the digital system must not result in an accident or incident being left unrecorded or parental notification being postponed.

Staff will use the nursery's approved paper accident or incident form and complete it to the same standard required for a digital record. The form must include all relevant information about the event, injury, first aid provided, parental communication and staff involved.

Parents or carers will be informed in accordance with section 3.8 and will be asked to acknowledge the paper record where appropriate.

Completed paper records will be stored securely in a designated location accessible only to authorised staff until the digital system is restored.

Once Famly becomes available again, the information will be entered onto the appropriate digital record **as soon as reasonably practicable**. The digital entry should make clear that the original record was completed on paper during a system outage and should record the date on which it was subsequently entered.

The original paper record will be retained in accordance with the nursery's records-retention procedure and must not be destroyed solely because the information has later been entered electronically.

Care will be taken to ensure that the same accident or incident is not treated as two separate events when reviewing accident statistics or trends.

Where a significant accident, incident or injury requires immediate management review, safeguarding action, medical assistance or statutory notification, this action must proceed normally and **must not wait for Famly to become available**.

Where an incident raises a safeguarding concern, the Designated Safeguarding Lead will ensure that the concern is recorded through the nursery's safeguarding contingency arrangements and followed up in accordance with the Safeguarding Policy and Procedures.

If access to Famly is unavailable for an extended period, the Nursery Manager will ensure that suitable temporary arrangements are maintained for recording, reviewing, storing and retrieving accident and incident information until normal systems are restored.

4.0 Roles and Responsibilities

Registered Provider / Directors: have overall responsibility for ensuring that the nursery complies with its statutory duties relating to accidents, incidents, first aid, health and safety and regulatory notifications. They ensure that appropriate policies, resources, equipment, training and management arrangements are in place and that significant risks or recurring concerns are appropriately addressed.

The Registered Provider / Directors retain oversight of serious accidents and incidents and ensure that required notifications to Ofsted, the Health and Safety Executive or other relevant authorities are made by an authorised person within the required timescales.

Nursery Manager (H&S Lead): has day-to-day responsibility for implementing this policy within the setting. The Manager ensures that first-aid supplies and emergency arrangements are maintained, accident and incident records are appropriately reviewed, hazards are addressed and significant events are investigated.

The Manager is responsible for determining whether an accident or incident requires further investigation, risk-assessment review, safeguarding consideration, parental follow-up or consideration under the nursery's Ofsted and RIDDOR notification procedures.

The Manager will ensure that actions arising from accidents, incidents and near-misses are allocated, completed and subsequently reviewed for effectiveness.

Designated Safeguarding Lead (DSL): considers whether an accident, injury or incident may indicate abuse, neglect, inadequate supervision, child-on-child harm, inappropriate adult conduct or another safeguarding concern.

The DSL will review relevant patterns of injury or incidents, ensure safeguarding concerns are recorded separately where required, liaise with Children's Social Care, LADO, police or other safeguarding agencies where appropriate, and ensure that safeguarding action is not delayed by an accident investigation.

Room Leaders: support the effective implementation of this policy within their rooms. They ensure that immediate action is taken following accidents and incidents,

that records are completed promptly and accurately, that parents are informed appropriately and that hazards or recurring patterns are escalated to the Nursery Manager.

Room Leaders will support staff deployment and supervision during emergencies and ensure that any immediate environmental or equipment risk is controlled until further management action is taken.

All staff: are responsible for taking reasonable steps to prevent avoidable accidents and responding appropriately when an accident, injury, incident or near-miss occurs. All staff working with children at Shooting Stars Nursery are required to maintain a current paediatric first-aid qualification and must provide first aid within the limits of their training when required.

Staff must make the situation safe, seek additional or emergency assistance where necessary, maintain supervision of children, report significant events promptly, inform parents in accordance with this policy and complete accurate records as soon as reasonably practicable.

Staff must report hazards and near-misses even where no injury has occurred and cooperate with any subsequent review or investigation.

No member of staff requires managerial permission to call **999** where they reasonably believe a child or adult requires emergency medical assistance.
Staff must also remain professionally curious about injuries and incidents. Where the circumstances, explanation, pattern or presentation of an injury raises a safeguarding concern, the matter must be reported to the DSL or Deputy DSL without delay.

Parents/Carers: are responsible for keeping emergency contact and medical information up to date, providing the nursery with relevant information about their child's health, acknowledging accident and injury records where requested and seeking medical advice where this has been recommended.

Parents and carers should inform the nursery of any subsequent medical assessment or diagnosis that may be relevant to the child's ongoing care or to the nursery's review of an accident or incident.

Students, Volunteers and Agency Workers: must follow this policy and immediately report accidents, incidents, injuries, hazards and near-misses to the appropriate member of nursery staff. They must not undertake first-aid treatment beyond their level of training or responsibility.