

Howe Dell Day Care

Health, Illness and First Aid Policy

Policy adopted in August 2007, to be reviewed September 2026

Aim

We are committed to encouraging and promoting good health and dealing efficiently and effectively with illnesses and first aid that may arise whilst children are in our care. Our aims are to include all children with medical conditions in all Day Care activities. We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution

Parents (The term 'parent' implies any person or body with parental responsibility such as foster parent or carer) The parents of a child at Day Care have a responsibility to inform Day Care if their child has a medical condition.

Procedure





This will be achieved by children with medical conditions being encouraged to take control of their condition. Children feel confident in the support they receive from the Day Care to help them do this.

Our Day Care ensures all staff understand their duty of care to children and young, people in the event of an emergency. All staff feel confident in knowing what to do in an emergency. Howe Dell Day Care understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.

The medical conditions policy is supported by a clear communication plan for staff, parents, and children to ensure its full implementation. Parents are informed about the medical conditions policy, which can be found on our website and hardcopy by the Day Care office and within the newsletter at intervals in the Day Care year.

Day Care will take appropriate action if children are ill or infectious. These procedures will also cover the necessary steps to prevent the spread of infection.

Day Care staff are informed and reminded about the medical policy

-  At staff meetings/room meetings
-  Via Room Leaders
-  At scheduled medical conditions training
-  Via Staff Handbook and Induction Pack

All staff understand the Day Care's general emergency procedures.

All staff in Day Care to have had Paediatric First Aid Training, this is updated every three years or when needed. A trained first aider will administer first aid treatment.

First Aid trained staff understand their duty of care to children in the event of an emergency, staff are trained in what to do in an emergency for the most common serious medical conditions and what action to take.

This includes:

How to contact emergency services and what information to be given.

Action to take in a general and medical emergency is displayed in prominent locations within each classroom and within the main Day Care office.

If a child needs to be taken to hospital, a member of staff will accompany them if parents are unavailable, or Day Care will ask parent to meet ambulance at A&E. Staff should not take pupils to hospital in their own car.

All rooms will have a first aid box. A member of staff will be designated in maintaining the first aid box and ensuring the contents are correct and in date.

First aid bags will also be taken outside and taken with staff when children use other parts of the school. A first aid bag will be taken on all off-site visits/outings. Walkie-Talkies are used with any outdoor learning.

First Aid kit and any key medication required are taken outdoors for any outdoor learning, such as an EpiPen. If the child visits another class, all medication will follow the child.

Procedure for managing children who are sick, unwell and/or infectious.

Parents are required to keep their child at home if they are unwell. Parents are required to inform the setting of the nature of the illness to enable other parents to be contacted if necessary.

If children appear unwell during the day, have a temperature, sickness, rashes, diarrhoea, or pains, particularly in the head or stomach, staff will contact the parents/carers and ask them to collect the child, as soon as possible or within a reasonable timeframe.

If a child has a temperature, they will be kept cool by removing top clothing. The child's temperature will be taken using a head thermometer, ear or under arm thermometer. Day Care follow NHS guidance, *a normal temperature in babies and children is about 34.4C, but this can vary slightly from child to child. A high temperature is 38C or more. If a child's temperature reaches 39C or above whilst at Day Care, parents will be asked to collect immediately.*

Day Care will only administer Calpol (paracetamol) if your child has a raised temperature or is in pain.

It is important that you tell a member of staff if your child has recently had Calpol (paracetamol) for any reason when you arrive at Day Care.

Day Care will contact parents for permission to administer Calpol. If we are unable to contact parents, we will only administer Calpol where there is prior parental written consent has been obtained at the time of registration on the child's Howe Dell Day Care Registration Form, and four hours has lapsed since child has arrived at Day Care.

Children can attend their sessions if they have had Calpol only if they are well to do so. It is important that you tell a member of staff if your child has recently had Calpol (paracetamol) for any reason when you arrive at Day Care.

Parents will need to collect their child if Calpol is administered for a second time within the session. Please do not send your child to Day Care if they are unwell.

Parents may be asked to take their child to seek medical advice before returning them to Day Care. Day Care can refuse admittance to children who have a temperature, sickness / diarrhoea or a contagious infection or disease, or appear unwell.

In some cases of infection, UK Health Security Agency, Public Health exclusion will be implemented.

COVID-19 Procedure

During the Coronavirus outbreak or any pandemic, Day Care will follow the Government guidance, and this will be implemented.

Infection Control Procedure

For cases of sickness, diarrhoea and/or infectious diseases please refer to the **UK Health Security Agency, Public Health exclusion** guidelines on infection control in schools and childcare settings. These guidelines recommend time periods an infectious child should stay away from the setting, before returning. **In multiple cases, clusters or outbreaks Howe Dell Day Care will report and follow guidance from UK Health Security Agency in relation to exclusion periods and procedures.**

For diarrhoea and sickness, the child must stay at home for 48 hours after their last episode of sickness or diarrhoea, they are completely recovered, with their eating, and stools returned to normal.

Staff will wear disposable personal protective equipment when dealing with or cleaning blood, urine, faeces, or vomit. Clinical waste will be disposed of in the yellow bin and affected surfaces and toys cleaned with disinfectant.

The Manager/Deputy or Assistant Deputies will not admit anyone on the premises who appears to be suffering from an infectious or contagious illness/disease.

Any child who has a sore throat, discharge from eyes/nose or any contagious infection should be kept at home until child is fully recovered or 48 hours have elapsed since the last outbreak.

Please do not bring children who are unwell in the setting, as they will be sent home upon arrival.

Staff will inform you of the number of loose stools your child has had. After your child has had two loose stools, we will contact you and ask that you collect your child from the setting. Additionally, staff will advise you on the recommended period your child should stay away from the setting based on their specific illness. These procedures are in place to protect the health and well-being of all children, staff, and visitors within our setting.

In the event of a major accident, incident, or illness in the first instance the Manager/ Deputy or Assistant Deputies will be notified and take responsibility for deciding upon the appropriate action.

OFSTED will be informed of all major incidents.

Advice from UK Health Security Agency, Public Health exclusion will be implemented.

Procedure for First Aid

Gloves will be worn when administering first aid. Soiled dressings etc. will be disposed of in a sealed bag.

First Aiders will assess the situation and decide whether the child needs to go straight to hospital or whether they can safely wait for the Parent/Carer to arrive. Manager/ Deputy or Assistant Deputy Manager will be notified.

If a child needs to go to hospital, an ambulance will be called. The Parent will also be contacted. If the Parent is not available, a member of staff will accompany the child to the hospital and will consent to medical treatment being given so long as the emergency medical treatment section of the registration form has been completed and signed.

The children's records will be taken to hospital with the child. If consent has not been given, the member of staff will refer to the hospital medical staff recommendations. In the event the parent cannot be contacted, emergency contacts will be notified. We will continue to try to contact the parents.

If a child does not need to go to hospital but their condition means they need to go home the parent will be contacted and asked to collect their child. In the meantime, the child will be made as comfortable as possible and be kept under close supervision. Infection control regulations will govern when a child can return.

If a child does not need hospital treatment and they are able to safely remain at the setting, the first aider will remove the child from the activities and if appropriate treat the injury/illness. When the child is feeling better, they will be resettled back into the activities and kept under close supervision for the remainder of the day.

Accidents in Day Care will be recorded on accident forms and parents will be informed and given a copy at the end of the session.

Date, time, incident, injury, first aid administered, and name of the first aider will be recorded on the accident form.

For a bump to the head, Day Care staff will inform parent. An accident form will be completed, also a monitoring form to monitor the child, for the rest of their session. Staff will go through the accident form with parents, and given a paper copy of the accident, parents will be asked to sign monitoring sheet when they collect their child at the end of the day.

All accidents and incidents will be recorded and logged. Parents will be asked to sign the incident form and given a paper copy of the accident when they collect their child at the end of the day. All forms will be audited on a regular basis and shared with parents if needed.

If any of the accidents or incidents highlights any weaknesses in the policies, the Manager will act accordingly and make suitable adjustments when necessary.

Injury outside the setting

If a child comes into Day Care with an injury acquired from outside of the setting, staff will log the injury and ask parents/carers what happened. Staff will record this information on an injury outside setting form. Parents will be asked to sign this. A risk assessment may be carried out to determine if a child is safe to return to Day Care with an injury.

Recording of accidents and incidents

Ofsted will be informed if a child has been taken to hospital and Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) will be contacted to report the incident.

Procedure for Administering Medicine

While it is not our policy to care for sick children, who should be at home until they are well enough to return, we will agree to administer most prescribed medication as part of maintaining their health and well-being or when they are recovering from illness.

Prescribed Medication

Prescription medicines will not be administered unless it has been prescribed a doctor, dentist, nurse, or pharmacist (medicines containing aspirin will only be given if prescribed by a doctor).

Medicine (both prescription and non-prescription) will only be administered to a child where written permission for that particular medicine has been obtained from the parent. **This medication must be in their original package and have child details on.** If your child is unwell and taking prescribed medication, it is required that they are kept at home for the first 48 hours after their first dose to ensure there are no reactions or side effects, as well as to give time for the medication to take effect.

Non-Prescribed Medication

If a child requires medicine orally, creams or ointment during their time with us the parent/carer will be asked to complete a medicine permission form which indicates the child's name, medicine name, date, dosage, and time it should be administered and signed by the parent and staff member.

Day Care will only administer Piriton Syrup (antihistamine) if your child is having an allergic reaction. Day Care will contact parents for permission to administer Piriton Syrup. If we are unable to contact parents, we will only administer Piriton Syrup where there is prior parental written consent. **It is important that you tell a member of staff if your child has recently had Piriton Syrup for any reason when you arrive at Day Care.**

Parents will need to collect their child if condition continues. Please do not send your child to Day Care if they are unwell due to an allergic reaction.

If a child has a known allergy this should be disclosed on your booking form and discussed with Day Care staff. A health Care Plan will be implemented. Medication must be kept onsite while child is attending setting. Antihistamine, 2 EpiPen.



Healthcare Plans

Howe Dell Day Care uses a Healthcare Plan to record important details about individual children's medical needs at Day Care, their triggers, signs, symptoms, medication, and other treatments.

Healthcare Plans are used to create a centralised register of children with medical needs. The Room Leader has responsibility for the register at Howe Dell Day Care.

A Healthcare Plan, accompanied by an explanation of why and how it is used, is completed with parents with a long-term medical condition.

This is completed:

-  Before child joins Day Care
-  When a diagnosis is first communicated to the Day Care

Parents are regularly reminded to inform the Day Care office if their child has a medical emergency or if there have been changes to their symptoms, or their medication and treatments change. This is to ensure the Healthcare Plan can be updated accordingly.

On completion details displayed within the Day Care office and in a wallet within all classrooms. Healthcare Plans will be updated yearly or when needed. **Children will not be able to attend sessions if a Healthcare Plan is not complete or medication is not on site.**

A risk assessment may need to be completed depending on condition.

If a child has need for regular medication such as an asthma pump or insulin this is to be left on site on the days, the child attends. These will be accessible to staff and kept in a plastic wallet along with

clear instruction on how to administer the medication. **Children will not be able to attend sessions if a Healthcare Plan is not complete or medication is not on site.**

Safe storage – general

The Facilities Manager ensures the correct storage of medication at Day Care. Some medication at Day Care may need to be refrigerated. All refrigerated medication is stored within the Baby room refrigerator. This is in a secure area, inaccessible for children.

It is the parent's responsibility to ensure new and in date, medication comes into Day Care on the first day.

Three times a year Room Leaders checks the expiry dates for all medication stored at Day Care. This information is fed back to Health and Safety Governors via site walks.

Staff along with the parents of child with medical conditions, ensures that all emergency and non-emergency medication brought into Day Care is clearly labelled with the child's name, the name and dose of medication and the frequency of dose. **This medication will not be accepted unless the medication is clearly labelled with the child's name.**

Emergency medication, such as an Epipen will also be stored in plastic wallets. **Two Epipen's must be left on site while your child is attending, children will not be able to attend sessions if not provided.** Wallets will be labelled with child's name, date of birth, photo, name of medication, expiry date, start date, dosage and frequency. A Healthcare Plan will also be included.

Administering Medicines

A member of staff will be responsible for administering medication for each child and will be responsible in ensuring that prior consent has been arranged, and all the necessary details are recorded on the permission form, medicine is labelled and stored safely. Another member of staff will act as a witness to ensure that the correct dosage is given; this will be a senior member of staff.

A medicine form will be completed by the member of staff administering the medicine and include date, time, medicine, dosage given, staff and witness signatures. Parents will be required to sign this at the end of the session.

If for any reason, a child refuses to take their medication staff will not attempt to force them, if this situation arises the Manager /Deputy, will notify parents and it will be recorded on the medicine form. This may result in the parent coming in to administer medication or if necessary, taking the child home.

If there is any change to the medication regarding dosage, time, or other changes from that on the medication permission form, then a new form must be completed.

All medicine, including staff medication will be stored appropriately out of children's reach.

Staff have the right to decline administering medication if they feel any way uncomfortable. The setting is likely to decline a request to administer medication where this involves technical knowledge or training, until training has taken place.

Safe disposal of medication

Parents are asked to collect out of date medication. If parents do not collect out of date medication, medication is taken to a local pharmacy for safe disposal.

The parent is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least three times a year.

Any used gloves and dressings etc, are placed in yellow bags and removed from site.

Procedures for children with allergies/medical needs

We are a no nuts setting. Parents are made aware so that no nuts or no nut products are accidentally brought onto the site, for example for packed lunches or a party.

Please refer to Howe Dell Day Care Food and Drink Policy for information about catering for dietary needs.

Education and learning

Howe Dell Day Care ensures that children with medical conditions can participate fully in all aspects of the Early Years Foundation Stage Framework and ensures appropriate adjustments and extra support are provided.

Staff are aware of the potential for children with medical conditions to have special educational needs (SEN). Children with medical conditions who are finding it difficult to keep up with their development are referred to the Inclusion Lead. The Day Care Inclusion Lead consults with parents. Parents ensure that the effect of the child's condition on their registration/ care plan is properly considered.

See Schools Drugs and Alcohol Policy for further educational focus.

Children must wear suitable clothing for all seasons while attending Day Care, as we do access outdoor learning at times.

Suitable footwear at all times. No open toes shoes, Jelly shoes or Croc's, as not suitable for outside activities.

Children can wear stud earring, no hoops.

Employer

Howe Dell Day Care's employer has a responsibility to:

Ensure the health and safety of their employees and anyone else on the premises or taking part in activities, (this includes all children). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or trips.

Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency. Understand the medical policy.

Know which children in their care have a medical condition. Maintain effective communication with parents including informing them if their child has been unwell at Day Care.

Inclusion Lead will liaise with parents, child's healthcare professional, other agencies, if condition is affecting child's development. Provide extra support when needed.

Ensure all children have their medication when they go on a visit or out of the classroom.

Ensure no children with medical conditions are excluded unnecessarily from activities they wish to take part in.

Executive Head Teacher of School and Day Care / Day Care Manager

Executive Head Teacher / Day Care Manager has a responsibility to:

Ensure the Day Care is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.

Liaise between interested parties including child, Day Care staff, and school staff, Inclusion Leads, Health Visitors, Community Nursery Nurse, Parents and Governors.

Ensure the policy is put into action, with good communication of the policy to all. Ensure every aspect of the policy is maintained.

Ensure information held by the Day Care is accurate and up to date and that there are good information sharing systems in place-using child's care plans.

Ensure child's confidentiality.

Assess the training and development needs of staff and arrange for them to be met. Ensure all new staff; agencies staff know the health, illness and first aid policy.

Parents (The term ‘parent’ implies any person or body with parental responsibility such as foster parent or carer)

The parents of a child at Day Care have a responsibility to: Inform Day Care if their child has a medical condition.

Ensure the Day Care has a complete and up-to-date Healthcare plan for their child. Inform the Day Care of any changes to their child’s condition.

Notify Day Care about any changes to their child’s medication, what they take, when and how much.

Ensure their child’s medication and medical devices are labelled with their child’s full name. Ensure medication is within expiry dates.

Keep their child at home, if they are not well enough to attend Day Care.

Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.

Sun Protection

We understand the dangers posed to children by exposure to the sun. Sun cream should be applied before child attends the setting.

Day Care will supply sun cream on site, which can be reapplied throughout the session. If your child has an allergy to sun cream, please provide your own brand. Day Care staff will apply sun cream to the children who need support.

Hats should be provided by the parent/carer and will be worn when playing outside. During hot weather, children will be encouraged to have time in the shade.

Water will always be available and offered frequently.

Head lice

Head lice are not an excludable condition, although in some circumstances a parent may be asked to keep the child away until the infestation has cleared.

On identifying cases of head lice, all parents are informed and asked to treat their child.

Eye infections

Eye infections are not an excludable condition, although in some circumstances a parent may be asked to keep the child away until the infection has cleared. On identifying an eye infection, the child’s parents are informed and asked to seek treatment for the child.

It will be at the Manager’s/Deputy Manager or Assistant Deputies discretion to allow a child to attend Day Care if the infection continue and parents have not sought advice or if a child for any reason has

been temporarily impaired due to eye drops/cream. When antibiotic drops/cream has been prescribed the 48-hour exclusion procedure must be followed.

Closure to site

In very exceptional circumstances, the setting may need to be closed at very short notice due to an unexpected emergency for example serious weather conditions or pandemics. Steps will be taken to inform parents/carers for example telephone, web site, local radio and group calls.

Snow and bad weather

Parents are reminded that in the event of heavy snow the school site may be closed due to dangerous road conditions and travelling to site not being possible. Parents are advised check their emails and to listen to the local radio stations; BBC Three Counties, Chiltern FM for the announcement of Howe Dell School site closure.

Please also check the main school website www.howedell.herts.sch.uk where Howe Dell School will post whether the site is open or closed.

Messages will also be put on the Day Care website, Facebook and Twitter; however, these messages can sometimes be delayed due to demand on the network.

Appendix 1 -

Asthma awareness for Day Care staff

What to do in an asthma attack

Keep calm.

Encourage the child or young person to sit up and slightly forward.

Make sure the child or young person takes two puffs of reliever inhaler (usually blue)

Immediately – preferably through a spacer.

Ensure tight clothing is loosened.

Reassure the child.

If there is no immediate improvement

Continue to make sure the child or young person takes one puff of reliever inhaler

Every minute for five minutes or until their symptoms improves.

Call 999 or a doctor urgently if:

The child's symptoms do not improve in 5–10 minutes.

The child is too breathless or exhausted to talk.

The child's lips are blue.

You are in doubt.

Ensure the child takes one puff of their reliever inhaler every minute until the ambulance or doctor arrives.

It is essential for people who work with children with asthma to know how to recognise the signs of an asthma attack and what to do if they have an asthma attack.

If ambulance called then Care Plan, information printed off ready for ambulance crew on arrival. This will give name, age, next of kin information.

Common signs of an asthma attack are:

Coughing

Shortness of breath

Wheezing

Tightness in the chest

Being unusually quiet

Difficulty speaking in full sentences

Sometimes younger children express feeling

Tight in the chest as a tummy ache.

After a minor asthma attack

Minor attacks should not interrupt the involvement of a child with asthma in Day Care.

When the child feels better, they can return to activities. The parents/carers must always be told if their child has had an asthma attack.

Important things to remember in an asthma attack

Never leave a child having an asthma attack.

If the child does not have their inhaler and/or spacer with them, send another adult to their classroom to get their spare inhaler and/or spacer. In an emergency, staff are required under common law, duty of care, to act like any reasonably prudent parent.

Reliever medicine is very safe. During an asthma attack, do not worry about a child overdosing.

Send another member of staff to get another adult if an ambulance needs to be called.

Contact the child's parents or carers immediately after calling the ambulance/doctor.

A member of staff should always accompany a child taken to hospital by ambulance and stay with them until their parent or carer arrives.

Appendix 2 –

Epilepsy awareness for Day Care staff

Complex partial seizures

Common symptoms

The person is not aware of their surroundings or of what they are doing

Plucking at their clothes

Smacking their lips

Swallowing repeatedly

Wandering around

Call 999 for an ambulance if...

You know it is the person's first seizure

The seizure continues for more than five minutes

The person is injured during the seizure

You believe the person needs urgent medical attention

Do...

Guide the person from danger

Stay with the person until recovery is complete

Be calmly reassuring

Don't...

Restrain the person

Act in a way that could frighten them, such as making abrupt movements or shouting at them

Assume the person is aware of what is happening, or what has happened

Give the person anything to eat or drink until they are fully recovered

Attempt to bring them round

Explain anything that they may have missed

Tonic-clonic seizures

Common symptoms:

The person goes stiff,

Loss of consciousness

Falls to the floor

Do...

Protect the person from injury (remove harmful objects from nearby)

Cushion their head

Look for an epilepsy identity card/identity jewellery

Aid breathing by gently placing the person in the recovery position when the seizure has finished

Stay with them until recovery is complete

Be calmly reassuring

Don't...

Restrain the person's movements

Put anything in their mouth

Try to move them unless they are in danger

Give them anything to eat or drink until they are fully recovered

Attempt to bring them round

Call 999 for an ambulance if...

You know it is the person's first seizure

The seizure continues for more than five minutes

One seizure follows another without the person regaining consciousness between seizures

The person is injured

You believe the person needs urgent medical treatment

If ambulance called then Care Plan, is ready for ambulance crew on arrival. This will give name, age, next of kin information.

Appendix 3 –

Anaphylaxis awareness for staff

ANAPHYLAXIS

Symptoms of allergic reactions:

Ear/Nose/Throat - Symptoms:

Runny or blocked nose, itchy nose, sneezing, painful sinuses, headaches, postnasal drip, loss of sense of smell/taste, sore throat/swollen larynx (voice box), itchy mouth and/or throat and blocked ears.

Eye - Symptoms:

Watery, itchy, prickly, red, swollen eyes. Allergic 'shiners' (dark areas under the eyes due to blocked sinuses).

Airway - Symptoms:

Wheezy breathing, difficulty in breathing and or coughing (especially at nighttime).

Digestion:

Swollen lips, tongue, itchy tongue, stomach ache, feeling sick, vomiting, constipation and or diarrhoea.

Skin:

Urticarial - wheals or hives-bumpy, itchy raised areas and or rashes.

Eczema -cracked, dry, weepy or broken skin. Red cheeks.

Angioedema - painful swelling of the deep layers of the skin.

Symptoms of Severe Reaction/ Anaphylaxis:

These could include any of the above together with:

Difficulty in swallowing or speaking.

Difficulty in breathing -severe asthma

Swelling of the throat and mouth

Hives anywhere on the body or generalized flushing of the skin

Abdominal cramps, nausea and vomiting

Sudden feeling of weakness (drop in blood pressure)

Alterations in heart rate (fast Pulse)

Sense of Impending doom (anxiety/panic)

Collapse and unconsciousness

TREATMENT

First aider onsite, collect both EpiPen's and to ask staff member to ring for an ambulance and parents.

If a child is conscious keep them in an upright position to aid breathing. Trained member of staff to administer EpiPen as per training. Record time of giving on child hand.

If child is unconscious then place in recovery position, trained member of staff to administer EpiPen as per training. Record time of giving on child hand.

If no improvement within 5 minutes, then 2nd EpiPen to be administered.

Keep used EpiPen's and give to paramedics when they arrive.

If ambulance called, then Care Plan information is ready for ambulance crew on arrival. This will give name, age, next of kin information.

Appendix 4 –

Diabetes awareness and treatment for staff, what is it?

Abnormal fluctuations in blood sugar can lead to someone with diabetes becoming unwell and, if untreated, losing consciousness.

There are two conditions associated with diabetes - hyperglycaemia (high blood sugar) and hypoglycaemia (low blood sugar).

Hypoglycaemia is the more common emergency, which affects brain function and can lead to unconsciousness if untreated.

Signs and symptoms:

Hypoglycaemia:

Hunger

Feeling 'weak' and confused

Sweating

Dry, pale skin

Shallow breathing

Hyperglycaemia:

Thirst

Vomiting

Fruity/sweet breath

Rapid, weak pulse

First aid aims

Hypoglycaemia:

Raise blood sugar level as quickly as possible

Get casualty to hospital, if necessary

Hyperglycaemia:

Get casualty to hospital as soon as possible

Treatment-

SEE INDIVIDUAL CHILD'S DIABETIC CARE PLAN

Hypoglycaemia:

Sit casualty down

If conscious, give them a sugary drink, chocolate or other sugary food

If there is an improvement, offer more to eat or drink. Help the casualty/Staff to find their glucose testing kit to check their level. Advise them to rest and see their doctor as soon as possible.

If consciousness is impaired, do not give them anything to eat or drink. Dial 999 for an ambulance

Hyperglycaemia:

Call 999 immediately

Further actions

If the casualty loses consciousness

Open airway and check breathing

Place them in recovery position

Prepare to give resuscitation

If ambulance called then Care Plan, is ready for ambulance crew on arrival. This will give name, age, next of kin information.