



24a. Choking Policy

Policy Statement

This setting believes that the health and safety of children is paramount. We make our setting a safe and healthy place for children, parents, staff, and volunteers. We ensure that children are supervised at mealtimes and that children are always within sight and hearing of a member of staff **and where possible staff are sat facing children when eating to ensure they are eating in a way that prevents choking and so they can prevent food sharing and be aware of any unexpected allergic reactions.**

Aim

We aim to make children, parents, and staff aware of health and safety issues and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment. All staff have been trained and hold a current and valid certificate for paediatric first aid.

We take steps to minimise the risk of children/adults choking. These include:

- Staff having overall awareness of the children and promoting the importance of not putting objects in their mouths.
- Staff ensuring that there are no small objects that could cause choking left unattended.
- Staff and children sitting down when eating at snack/lunchtimes and ensuring that children do not leave the table with food still in their mouths.
- Staff ensuring that all toys and equipment are age appropriate and in good condition.
- All snacks provided for children are cut up appropriately. Parents providing grapes/cherry tomatoes/olives in lunchboxes are requested to cut them up into quarters.

Choking happens when someone's airway suddenly gets blocked so they cannot breathe. Their airway can be partly or fully blocked. In adults, choking is usually caused by food getting stuck. In young children, it can be caused if they put small objects in their mouths that then get stuck.

If someone was choking, we would assess the situation quickly to see how best we can help.

Mild choking in adults and children over one year old

If the airway is only partly blocked, the person will usually be able to speak, cry, cough or breathe. If this is the case, the person will usually be able to clear the blockage themselves.

Staff would encourage the person to keep coughing to try and clear the blockage. Staff would remove any obvious blockage from their mouth, using first two fingers and thumb to grasp the object. Staff would be vigilant and ready to help in case the airway became fully blocked, or the choking became severe.

Severe choking in adults and children over one year old Where choking is severe, the person will not be able to speak, cry, cough or breathe. Without help they will eventually become unconscious.

Staff would stand slightly behind the person to one side, support their chest with one hand and lean the person forward so that the object blocking their airway will come out of their mouth, rather than go further down.

The member of staff would give up to five sharp blows between the shoulder blade with the heel of their hand, stopping after each blow to check if the blockage has cleared.

If the blockage has not cleared, staff will give up to five abdominal thrusts, stopping after each thrust to check if the blockage has cleared.



If the person's airway is still blocked after three cycles of back blows and abdominal thrusts, staff will send for help. A second staff member will dial 999 (or 111) for an ambulance immediately. Staff will continue with the cycles of back blows and abdominal thrusts until help arrives.

If staff have any doubt that the person is breathing normally, and have been trained to do so, they will begin external chest compressions and rescue breaths (CPR).

Important: Abdominal thrusts must not be used on babies under one year old, pregnant women or people who are obese.

1. Stand behind the person who is choking.
2. Place your arms around their waist and bend them well forward.
3. Clench your fist and place it right above the person's navel (belly button).
4. Place your other hand on top, then thrust both hands backwards into their stomach with a hard, upward movement.
5. Repeat this until the object stuck in their throat comes out of their mouth.

Abdominal thrusts can cause serious injuries. Where this potentially life-saving treatment has been necessary, a health professional should always examine the person afterwards.

Complications: Once the person's airway is cleared, parts of the material that caused the choking can sometimes remain and can cause complications later. If the person still has a persistent cough, difficulty swallowing, or feels as though something is still stuck in their throat, the need to seek medical advice urgently.

This policy was agreed at an Under 5s AGM meeting held on...17th...November 2025.. (Date)

Signed on behalf of the preschool...

(Chair)