



Incident, Injury, Trauma and Illness Policy



Policy Number	QA 2/7	Title	Incident, Injury, Trauma and Illness Policy
Revision	1.2	Written By	Nominated Supervisor
Reviewed By	EHOOSH Management Committee	Approved By	EHOOSH Management Committee
Supersedes	Version 1.1	Effective Date	May 2024

1. Policy Statement

This policy has been established to ensure clear lines of action are identified to effectively manage an event involving a child becoming injured, ill, or involved in an incident. Furthermore, the policy is established to outline that:

- The safety, health and wellbeing of children is a paramount consideration for our service.
- Educators and staff members will receive relevant and up-to-date training to ensure they can effectively respond to incidents, injuries, trauma and illness.
- Care will be taken when assessing the seriousness of an incident and if there is a need for emergency services to be contacted.
- Keeping families informed is paramount: families will be notified of any serious incident involving their child at our service as soon as possible.
- High levels of supervision will be maintained, ratios will be met at all times and supervision plans will be regularly reviewed.

- Educators and staff will be provided with access to appropriate and up-to-date information and regular professional development on the management of incidents.
- All educators and staff will be provided with the necessary resources to respond to incidents and injuries.
- Confidentiality is important and will be maintained at all times.

An injury, trauma or illness will be regarded by the Service as a 'serious incident' if more than basic first aid was needed to manage the injury, trauma or illness and medical attention was sought for the child, or should have been sought, including attendance at a hospital or medical facility for further treatment.

Any serious incident will be documented in accordance with the Education and Care Services National Law Act 2010 and associated Regulations.

2. Background

The Education and Care Services National Regulations require approved providers to ensure their services have policies and procedures in place in the event that a child is injured, becomes ill, or an incident occurs while attending the service.

3. Procedure

This policy and related policies and procedures at the service will be followed by nominated supervisors and educators of, and volunteers at, the service in the event that a child:

- a) is injured; or
- b) becomes ill; or
- c) suffers a trauma.

The approved provider of the service will ensure that a parent of a child is notified as soon as practicably possible. Parents will be notified no later than 24 hours of the injury, illness or trauma. An Incident, Injury, Trauma and Illness Record will be completed without delay.

First aid kits will be easily recognised and readily available where children are present at the service and during excursions. They will be suitably equipped having regard to the hazards at the service, past and potential injuries and size and location of the service.

We will ensure first aid training is updated every three years and anaphylaxis management

training and asthma management training completed every year.

We will display these qualifications and expiry date where they can easily be viewed by all educators and staff.

Staff will never exceed their qualifications and competence when administering first aid. When practical a 'First Aid Officer' will be present on shift to attend to any first aid needs.

During induction training for new educators and staff we will:

- Advise which educators have first aid qualifications, and asthma and anaphylaxis management training and the location of the first aid kit.
- Obtain information about any first aid needs the educator may have that could require specific treatment in a medical emergency. This information will only be provided to first aid qualified educators with the employee's consent.

We will review our first aid response plan, the location of the first aid kit and who our first aid trained educators are, at least annually or when there are any changes during staff meetings or through newsletters, emails or memos.

2.1. Administration of First Aid

If there is an accident, illness or injury requiring first aid, the following response procedure will be implemented:

- Educator or staff member notifies the Nominated Supervisor/RPIC and if applicable the First Aid Officer of the incident, illness, or injury.
- The Nominated supervisor/RPIC/First Aid Officer reviews child's medical information including any medical information disclosed on the child's enrolment form, medical management plan or medical risk minimisation plan before the first aid qualified educator attends to the injured or ill child or adult. If the illness or incident involves asthma or anaphylaxis, an educator with approved asthma or anaphylaxis training will attend to the child or adult.
- If required, the Nominated Supervisor/RPIC/First Aid Officer notifies and co-ordinates an ambulance.
- If required, the Nominated Supervisor/RPIC/First Aid Officer notifies parent or authorised nominee that the child requires medical attention from a medical practitioner or that the child needs to be picked up from the service.
- The Nominated supervisor ensures Incident, Injury, Trauma and Illness Record is completed in full and without delay and parent or authorised nominee is notified as soon as possible and within 24 hours of the injury, illness or trauma.
- If necessary, The RPIC will ensure other children can be quickly organised and kept away from the injured person and in a safe, secure, and supervised environment. If necessary, an emergency lockdown or stay in place procedure can be used.

- Immediately contact the parent/guardian (or the emergency contact) regarding what has happened and the action that is being taken, including clear directions of where the child is being taken (e.g., hospital). There should be no delay in organising proper medical treatment if contact is not possible.
- Stay with the injured child until suitable help arrives, or further treatment is given. Educators will try to make the child comfortable and not move them and continue talking to them. They will remain vigilant that the child's situation does not deteriorate.
- Ensure that all blood or bodily fluids are cleaned up in a safe manner.
- Ensure that anyone who has been in contact with any blood or bodily fluids washes their hands in warm soapy water.
- If an ambulance is called and the child needs to be taken to hospital, and no family has arrived to accompany the child, an educator will go with the child, taking enrolment forms/medical plans with them. If there is no time to collect hard copies, soft copies will be sent to educator's phone.
- If necessary, call for emergency relief staff or a Parent Management Committee member.
- Complete an *Illness, Injury or Trauma Report* form.
- Contact the Parent Management Committee and School Principal to advise of the situation.
- As a means of ensuring staff wellbeing, hold staff debrief meeting after a major incident.
- Review and evaluate risk and revise risk assessments if necessary.

2.2. Reporting of Serious Incident, Injury or Trauma

The Nominated Supervisor will notify the regulatory authority within 24 hours of any serious incident at our service. This includes any serious injury, trauma or illness of a child which requires urgent medical attention from a medical practitioner or for which the child attended, or ought reasonably to have attended, or ought reasonably to have attended a hospital. Furthermore, the child's parent or emergency contact must be notified of any incident, injury, or illness the child suffers as soon as possible, and no later than 24 hours after the event.

If it becomes apparent that an incident that was considered minor at the time was in fact serious, the Nominated Supervisor must notify the regulatory authority within 24 hours of becoming aware that the incident was serious.

In the event of a serious injury or death to a child it must be reported to:

- An Ambulance service
- The Police

- The Parent/Guardian of the child
- The Regulatory Authority

2.3. Death at the Service

Staff at the Service must be prepared to handle all incidents in a professional and sensitive manner, no matter how tragic. In the event of the death of a child or a staff member, all educators and staff members will follow the guidelines set out below:

- The Service will notify the parent/guardian that a serious incident has happened and request that they attend the relevant hospital.
- Under no circumstances is an educator to advise the parent/guardian or emergency contact that a death has occurred. Only a qualified medical practitioner can declare a person dead and therefore staff should only advise parents that the injury is serious and refer them to the hospital where the child has been taken.
- The Information should be provided in a calm and extremely sensitive manner.
- All members of the EHOOSH Parent Management Committee should be informed.
- The Nominated Supervisor should contact the regulatory authority to seek advice as to the appropriate response from the Service. The school and Network of Community Activities should also be contacted to seek additional support, resources or advice.
- Wherever possible, other families at the Service should not be advised of a death until after the deceased child's parents/guardians have been informed. A 24-hour delay in releasing news of the tragedy should occur to allow educators and the Parent Management Committee to formulate a plan of action, be in a position to answer queries and engage counsellors. Educators will not discuss the incident with any person unless instructed to do so by the Committee.
- Counselling and follow-up support will be made available to all educators and families involved.

3. Roles and Responsibilities

Approved Provider

- Ensuring that the premises are kept in good repair.
- Ensuring that there is a minimum of one staff member or one Nominated Supervisor at the service with a current approved first aid qualification on the premises at all times.

Nominated Supervisor

- Ensuring that an accurate incident report is completed and a copy forwarded to the regulatory authority as soon as is practicable but not later than 24 hours after the occurrence.
- Ensuring that completed medication records are kept until the end of 3 years after the child's last attendance (regulation 92, 183).
- Ensuring that a parent/guardian of the child is notified as soon as is practicable, but not later than 24 hours after the occurrence, if the child is involved in any incident, injury, trauma or illness while at the service (regulation 86).
- Ensuring that incident, injury, trauma and illness records are kept and stored securely until the child is 25 years old (regulations 87, 183).
- Ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service.
- Ensuring that any *Incident, Injury Trauma or Illness Report* be stored confidentially until the child is 25 years old.
- Requesting the parents/guardians make arrangements for the child or children involved in an incident or medical emergency to be collected from the service, or informing parents/guardians if an ambulance has been called.
- Notifying other person/s as authorised on the child's enrolment form when the parents/guardians are not contactable.
- Ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency.
- Maintaining all enrolment and other medical records in a confidential manner.
- Regularly checking equipment in both indoor and outdoor areas for hazards, and taking the appropriate action to ensure the safety of

	<p>the children when a hazard is identified.</p> <ul style="list-style-type: none"> • Reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required. • Notifying families of this policies existence and providing them with access. • Providing access to information on children’s development, the service program, and relevant health and wellbeing resources from the service. • Ensuring that there is an educator with appropriate qualifications is present at the service at all times.
<p>Responsible Person in Charge</p>	<ul style="list-style-type: none"> • Notifying parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable. • Regularly checking equipment in both indoor and outdoor areas for hazards, and taking the appropriate action to ensure the safety of the children when a hazard is identified. • Reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required. • Recording details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record as soon as is practicable but not later than 24 hours after the occurrence. • Ensuring that children are quickly moved away from the area where the incident occurred. • If necessary, plan and action a lockdown.
<p>Educators and Support Staff</p>	<ul style="list-style-type: none"> • Recording details of any incident, injury or illness in the <i>Incident, Injury, Trauma and Illness Record</i> as soon as is practicable but not later than 24 hours after the occurrence. • Seeking further medical attention for a child if required. • Being aware of the signs and symptoms of illness/trauma. • Being aware of individual children’s allergies and immunisation status and use this knowledge when attending/responding to any incident, injury or illness. • Responding to children showing signs of illness and begin

	<p>monitoring the symptoms of the child and recording as appropriate.</p> <ul style="list-style-type: none"> • Educators will inform the Nominated Supervisor/RPIC/First Aid Officer about contacting the child’s authorised person to inform them of the incident, injury or illness, or to request the collection of the child. • In response to a child registering a high temperature, follow procedures for temperatures, and complete the <i>Incident, Injury, Trauma and Illness Record</i> as required. • When necessary, coordinate with emergency services.
<p>First Aid Officer</p>	<ul style="list-style-type: none"> • Work with the Nominated Supervisor, RPIC and Educators to acquire and share information about a child who had the incident, injury or illness when it is appropriate. • Communicate with the child’s parents/authorised person of the child and inform them of the incident, injury or illness, or to request the collection of the child. • First Aid Officer reviews child’s medical information including any medical information disclosed on the child’s enrolment form, medical management plan or medical risk minimisation plan. • When necessary, coordinate with emergency services.
<p>Families</p>	<ul style="list-style-type: none"> • Being informed of policies and procedures upon enrolment with regards to first aid, illness whilst at the service, and exclusion practices, including immunisation status and illnesses at the service. • Informing the service of their child’s requirements, and provide any relevant paperwork to the service, such as immunisation status, health plans, allergies, etc. • Families are requested to provide at least contact numbers in case of an emergency or accident.

4. References

4.1. Statutory Authority

- Education and Care Services National Law Act 2010 (Regulation 12, 85, 86, 87)
- National Quality Standard (Standard 2.1.4, 2.3.3)
- Work Health and Safety Act 2011

4.2. Relevant Service Policies

- *Providing a Child Safe Environment*
- *Administration of First Aid Policy*
- *Administration and Storage of Medication Policy*
- *Hygiene and Infection Control Policy*
- *Illness and Infectious Diseases Policy*

4.3. National Frameworks

- ACECQUA website: <http://www.acecqa.gov.au/national-quality-agenda-it-system>
- Framework for School Age Care in Australia, 'My Time, Our Place' (Outcome 3), <https://www.acecqa.gov.au/sites/default/files/2023-02/MTOP-2022-V2.0.pdf>

5. Legislative Requirements

Regulation 165	Offence to inadequately supervise children
Regulation 174	Offence to fail to notify certain information to Regulatory Authority
Regulation 167	Offence relating to protection of children from harm and hazards
Regulation 85	Incident, injury, trauma and illness policies and procedures
Regulation 86	Notification to parents of incident, injury, trauma, and illness
Regulation 87	Incident, injury, trauma, and illness record
Regulation 89	First aid kits
Regulation 95	Procedure for administration of medication
Regulation 97	Emergency and evacuation procedures
Regulation 103	Premises, furniture, and equipment to be safe, clean and in good repair
Regulation 161	Authorisations to be kept in enrolment record
Regulation 168	Education and care service must have policies and procedures
Regulation 170	Policies and procedures to be followed
Regulation 171	Policies and procedures to be kept available
Regulation 172	Notification of change to policies or procedures
Regulation 177	Prescribed enrolment and other documents to be kept by approved provider
Regulation 183	Storage of records and other documents

Revision Chronology

Version Number	Date	Reason for Change
1.0	April 2018	Endorsed by OOSH executive committee
1.1	February 2021	Updated policy
1.2	May 2024	Updated policy