

	Incident, Injury, Trauma and Illness Policy & Procedures
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Authorisation	General Manager
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Responsible Officer	Manager Evolve Early Learning & Kindergarten
Policy Owner	Evolve Early Learning & Kindergarten

Policy

Evolve Early Learning & Kindergarten is committed to:

- Providing a safe and healthy environment for all children, staff/educators, volunteers, students on placement and any other persons participating in or visiting the service
- Responding to an incident or the needs of an injured, ill or person suffering Trauma at the service
- Preventing injuries and Trauma
- Preventing the spread of Illness through simple hygiene practices, monitoring immunisation records and complying with recommended exclusion guidelines
- Maintaining a duty of care to children and users of Evolve Early Learning & Kindergarten.

Purpose

Evolve Early Learning & Kindergarten is committed to:

- Procedures to be followed if a person is ill, or is involved in a Medical Emergency or an Incident at the service that results in Injury or Trauma
- The responsibilities of staff/educators, parents/guardians and the Approved Provider when a person is ill, or is involved in a Medical Emergency or an Incident at the service that results in Injury or Trauma
- Practices to be followed to reduce the risk of an Incident occurring at the service.
- This policy has been adapted from *PolicyWorks* Manual - National Quality Framework released by the Early Learning Association Australia.

Scope

This policy applies to Evolve Early Learning & Kindergarten who is responsible for the direct education and care of children including offsite excursions and activities.

This policy applies to the Approved Provider, Nominated Supervisor/Primary Nominee, Approved/Accepted Nominee, Certified Supervisor, Educators, Staff, Students on placement, Volunteers, Parents/guardians, Children and others attending Evolve Early Learning & Kindergarten

National Quality Standards (NQS)

Quality Area 2: Children's Health and Safety

2.1.2 Health practices and procedures – Effective illness and injury management and hygiene practices are promoted and implemented

2.2 Safety - Each child is protected

2.2.1 Supervision - At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard

2.2.2 Incident and emergency management – Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented

2.2.3 Child Protection – Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

Background

- People responsible for managing early childhood services and caring for children have a duty of care towards those children.
- All service staff/educators have a responsibility and a duty of care to act to prevent accidents and emergencies at the service.
- An approved service must have policies and procedures in place in the event that a child is injured, becomes ill or suffers Trauma. These procedures should be followed and must include the requirement that a parent/guardian be notified in the event of an Incident, Injury, Illness or Trauma relating to their child as soon as practicable and within 24 hours of the occurrence.
- The National Regulations require an accurate Incident, Injury, Trauma and Illness Record be kept and stored confidentially until the child is 25 years old (National Regulations 183).

Under the National legislation, each service must ensure that an entry is recorded in the Incident, Injury, Trauma and Illness Record for the following occurrences:

- An Incident in relation to a child
- An Injury received by a child
- A Trauma to which a child has been subjected
- An Illness that becomes apparent.

Details that must be entered in the Incident, Injury, Trauma and Illness Record include the following:

- The name and age of the child
- The circumstances leading to the Incident, Injury or Trauma, or relevant circumstances surrounding the child becoming ill (including any symptoms)

- The time and date the Incident occurred, the Injury that was received, the child who was subjected to the Trauma, or the apparent onset of the Illness
- The action taken by the service, including any Medication administered, First Aid provided or medical personnel contacted
- Details of any person who witnessed the Incident, Injury, Trauma, or the apparent onset of Illness
- The name of any person the service notified, or attempted to notify, of any Incident, Injury, Trauma or Illness that a child suffered while being educated and cared for by the service, and the time and date of the notifications/attempted notifications
- The name and signature of the person making an entry in the record, and the time and date that the entry was made
- Signature of a parent/guardian to verify that they have been informed of the occurrence.
- All information will be included in the Incident, Injury, Trauma and Illness Record as soon as is practicable, but not later than 24 hours after the Incident, Injury, Trauma, or the onset of the Illness.
- Medical emergencies may include serious health issues such as Asthma, Anaphylaxis, Diabetes, fractures, choking and seizures. Such emergencies generally involve only one child, however they can affect everyone in the service/program.
- In some cases, it will be appropriate to refer to specific policies for guidance, such as the *Dealing with Medical Conditions Policy*, *Asthma Policy* and *Anaphylaxis Policy*.

Education and Care National Regulations

- Meaning of serious incident (National Regulations 12)
- Incident, injury, trauma and illness policies and procedures (National Regulations 85)
- Notification to parents of incident, injury, trauma and illness (National Regulations 86)
- Incident, injury, trauma and illness record (National Regulations 87)
- Infectious diseases (National Regulations 88)
- First Aid Kits (National Regulations 89)
- Emergency and evacuation procedures (National Regulations 97)
- Authorisations to be kept in enrolment record (National Regulations 161)
- Health information to be kept in enrolment record (National Regulations 162)
- Education and care service must have policies and procedures (National Regulations 168)
- Prescribed information to be notified to Regulatory Authority (National Regulations 174)
- Time to notify certain information to Regulatory Authority (National Regulations 176)

Responsibility/Accountability

The Approved Provider, according to Regulations is responsible for the implementation of this policy. This will be achieved through the Centre Manager and the staff:

- Ensuring that the premises are kept clean and in good repair
- Ensuring that staff/educators have access to Medication, Incident, Injury, Trauma and Illness forms and WorkSafe Victoria Incident report forms
- Ensuring that the service has an *Occupational Health and Safety Policy* and procedures that outline the process for effectively identifying, managing and reviewing risks and Hazards that are likely to cause Injury, and reporting Notifiable Incidents to appropriate authorities (refer to *Occupational Health and Safety Policy*)
- Ensuring that completed Medication records are kept until the end of three years after the child's last attendance (National Regulation 92 and 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 (National Regulations 86)
- Ensuring that Incident, Injury, Trauma and Illness Records (refer to the ACECQA website for template – see *Sources*) are kept and stored securely until the child is 25 years old (National Regulations 87 and 183)
- Ensuring that an educator with a current approved First Aid qualification is on the premises at all times as per regulations
- Ensuring that there are an appropriate number of up-to-date, fully equipped First Aid kits that are accessible at all times (refer to *Administration of First Aid Policy*)
- Ensuring that the orientation and induction of new and relief staff include an overview of their responsibilities in the event of an Incident or Medical Emergency
- 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 an Incident Report is completed and a copy forwarded to the regional DET office as soon as is practicable but not later than 24 hours after the occurrence.

The Nominated Supervisor, Primary Nominees, Certified Supervisors, Nominees and other educators are responsible for:

- Ensuring that the AV How to Call Card is displayed near all telephones
- Ensuring that volunteers and parents assisting at the program are aware of children’s Medical Management Plans and their responsibilities in the event of an Incident, Injury or Medical Emergency
- Responding immediately to any Incident, Injury or Medical Emergency
- Implementing individual children’s Medical Management Plans, where relevant
- Notifying parents/guardians immediately after an Incident, Injury, Trauma or Medical Emergency, or as soon as is practicable
- Requesting the parents/guardians make arrangements for the child(ren) 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 persons as authorised on the child’s enrolment form when the parents/guardians are not contactable
- Recording details of any Incident, Injury, Trauma 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 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 (refer to *Privacy and Confidentiality Policy*)
- 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
- Assisting the Approved Provider with regular Hazard inspections
- Reviewing the cause of any Incident, Injury or Illness and taking appropriate action to remove the cause if required
- Notifying DET in writing within 24 hours of an Incident involving the death of a child, or any Incident, Illness or Trauma that requires treatment by a registered medical practitioner or admission to a hospital

Ensuring that the contact numbers are displayed in close proximity of each telephone for the following:

- 000
- DET regional office ()
- Approved Provider (9747 7200)
- Asthma Victoria (03 9326 7055 or toll free 1800 645 130)
- Victorian Poisons Information Centre (13 11 260)

When there is a Medical Emergency, educators will:

- Reassure the injured/ill child and ensure the other children in care are safe
- Call an ambulance, where necessary, and call parents/guardians
- Administer First Aid, and provide care and comfort to the child prior to the parents/guardians or ambulance arriving
- Implement the child's current Medical Management Plan, where appropriate
- Notify parents/guardians as soon as is practicable of any serious Medical Emergency, Incident or Injury concerning the child, and request the parents/guardians make arrangements for the child to be collected from the service or inform the parents/guardians that an ambulance has been called
- Notify other persons as authorised on the child's enrolment form, if the parents/guardians are not contactable
- Ensure ongoing supervision of all children in attendance at the service
- Accompany the child in the ambulance when the parents/guardians are not present, provided that staff-to-child ratios can be maintained at the service
- Notify the Approved Provider of the Medical Emergency, Incident or Injury as soon as is practicable
- Complete and submit an Incident report to DET, the Approved Provider and the service's public liability insurer following a Serious Incident.

When a child develops symptoms of illness while at the service, educators will:

- Ensure that the Nominated Supervisor, Primary Nominee or person in day-to-day care of the service, contacts the parents/guardians or authorised emergency contact for the child to outline the signs and symptoms observed
- Request that the child is collected from the service if the child is not well enough to participate in the program
- Ensure that they separate the child from the group and have an educator remain with the child until the child recovers, a parent/guardian arrives or another responsible person takes charge
- Call an ambulance (refer to definition of Medical Emergency) if a child appears unwell or has a serious Injury that needs urgent Medical Attention
- Ensure that the child is returned to the care of the parent/guardian or authorised emergency contact person as soon as is practicable
- Ensure that, where Medication, medical or dental treatment is obtained, the parents/guardians are notified as soon as is practicable, and are provided with details of the Illness and subsequent treatment administered to the child
- Ensure that the Approved Provider, Nominated Supervisor/Primary Nominee is notified of the Incident
- Ensure that the Incident, Injury, Trauma and Illness Record is completed as soon as is practicable and within 24 hours of the occurrence.

Parents/guardians are responsible for:

- Providing authorisation in their child's enrolment record for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (National Regulations 161)
- Payment of all costs incurred when an ambulance service is called to attend to their child at the service
- Notifying the service, upon enrolment or diagnosis, of any medical conditions and/or needs, and any management procedure to be followed with respect to that condition or need (National Regulations 162)
- Ensuring that they provide the service with a current Medical Management Plan, if applicable (National Regulations 162)
- Collecting their child as soon as possible when notified of an Incident, Injury or Medical Emergency involving their child
- Informing the service of an infectious disease or Illness that has been identified while the child attended the service, and that may impact on the health and wellbeing of other children, staff/educators and parents/guardians attending the service
- Being contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an Incident requiring Medical Attention
- Signing the Incident, Injury, Trauma and Illness Record, thereby acknowledging that they have been made aware of the Incident
- Notifying the service by telephone when their child will be absent from their regular program
- Notifying staff/educators if there is a change in the condition of their child's health, or if there have been any recent accidents or Incidents that may impact on the child's care e.g. any bruising or head injuries.

Definitions

The terms defined in this section relate specifically to this policy and related procedures. For commonly used terms e.g. Approved Provider, Regulatory Authority etc. refer to the *Glossary of Terms*.

Word/Term	Definition
AV How to Call Card	A card that the service has completed containing all the information that Ambulance Victoria will request when phoned on 000. Once completed, this card should be kept within easy access of all service telephone/s.
First Aid	The provision of initial care in response to an Illness or Injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First Aid training should be delivered by Approved First Aid providers. A list of approved First Aid training is published on the Australian Children's Education and Care Quality Authority (ACECQA) website (see <i>Sources</i>).
Hazard	A source or situation with a potential for harm in terms of human Injury or ill health, damage to property, damage to the environment or a combination of these.
Illness	A disease or episode of sickness affecting the body or mind.
Incident	Any unplanned event resulting in or having potential for Injury, ill health, damage or other loss.
Injury	Any harm or damage to a person.

Word/Term	Definition
Medical Attention	Includes a visit to a registered medical practitioner or attendance at a hospital.
Medical Emergency	An Injury or Illness that is acute and poses an immediate risk to a person's life or long-term health.
Medical Management Plan	A document that has been prepared and signed by a medical practitioner that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child.
Medication	Any substance, as defined in the Therapeutic Goods Act 1989 (Cth), that is administered for the treatment of an Illness or medical condition.
Notifiable Incident	An Incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for Incidents that result in death or serious Injury/Illness, or dangerous occurrences. For a complete list of Incidents that must be reported to WorkSafe Victoria, refer to the Guide to Incident Notification on the WorkSafe Victoria website (see <i>Sources</i>).
Serious Incident	An Incident resulting in the death of a child, or an Injury, Trauma or Illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an Incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the Regulations or is mistakenly locked in/out of the service premises (National Regulations 12). A Serious Incident should be documented in an Incident, Injury, Trauma and Illness Record (sample form available on the ACECQA website) as soon as practicable and within 24 hours of the Incident. The Regulatory Authority (Department of Education & Training (DET)) must be notified within 24 hours of a Serious Incident occurring at the service (National Regulations 176). Records are required to be retained for the periods specified in the National Regulations 183.
Trauma	An emotional wound or shock that often has long-lasting effects or any physical damage to the body caused by violence or an Incident.

INCIDENT, INJURY, TRAUMA AND ILLNESS PROCEDURE

Purpose

This procedure will provide a process to:

- Follow if a person is ill, or is involved in a Medical Emergency or an Incident at the service that results in Injury or Trauma
- Outline responsibilities of staff/educators, parents/guardians and the Approved Provider when a person is ill, or is involved in a Medical Emergency or an Incident at the service that results in Injury or Trauma
- Outline practices to be followed to reduce the risk of an Incident occurring at the service.

Procedures

Parent/guardian consent:

- Parent/guardians are required to provide written consent for staff/educators to seek Medical Attention for their child if required before they start in the service. This information is recorded on the child's enrolment form.

In terms of Accident, Injury, Illness and Trauma records:

- The educator must keep accident, Injury, Illness and Trauma records for children in care, documenting relevant information or comments relating to children's health/wellbeing. Records must contain information outlined in *Education and Care Services National Regulation*.

In terms of minor Illness or Injury where Medical Attention is not required:

- When a child becomes ill or has an accident the parent/guardian will be notified as soon as practicable.
- When all the immediate requirements of the ill/injured child have been attended to, the Illness or Injury of the child is to be recorded in the Incident, Injury, Trauma and Illness Record.

This record is to contain the following information:

- Time of Illness or Injury
 - Symptoms and signs of Illness, details of temperature
 - Location of Injury on child, size of Injury and a detailed report of the Incident
 - Action taken by educator
 - Child's reaction, for example whether the child is distressed
 - Signature of educator
 - Signature of parent/guardian or authorised person collecting the child (where possible)
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- A separate Incident, Injury, Trauma and Illness Record sheet for each child is to be stored in a confidential manner.
 - Educator then contacts the child's parents/guardian to inform them of the Illness or Injury. The parent/guardian in consultation with the educator will determine the most

appropriate action to be taken such as having the parent/guardian collect the child from care.

- If the child has a contagious illness (or is suspected of having such an illness) the parent/guardian must be informed and requested to collect the child from care and seek medical advice.
- If a medical practitioner confirms the illness as contagious, the educator and parent/guardians are to follow exclusion guidelines as set by the Department of Health and Human Services.
- The educator must advise all families in their service of the contagious illness.

Procedure for an emergency - serious Injury/Illness of a child

- Reassure the injured/ill child and ensure the other children in care are safe
- Call an ambulance via 000, and follow the directions of the ambulance operator
- Commence First Aid

When all of the above has been done:

- Contact the parent/guardian of the child to inform them of the Injury/Illness
- If the child has been taken to the hospital by the ambulance, inform the parent of the hospital the child has been taken to, and the time of departure
- Refer all questions and concerns of the parent/guardian regarding the child's health to the hospital
- Only give the parent/guardian the facts of the situation
- Contact the children's services coordinator or team leader

In terms of disaster/emergency situations

- In the case of a disaster such as a gas leak, external fire, bad storms the staff/educators should follow the direction of authorised representatives of emergency services such as the State Emergency Services (SES) or Victoria Police. In some circumstances it may be safer to stay inside the service.

In terms of infection control exclusion

- Refer to *Dealing with Infectious Diseases Policy* and related procedures.

In terms of sick children

- If a child becomes ill whilst in care at the service, educators will notify the parent/guardian or authorised person, to ensure collection of the child as soon as possible. Children cannot return to the service as long as symptoms persist and are visible. This is to support the needs of the child who is unwell, as well as to prevent the spread of infection to other children and educators at the service.
- Educators will make every effort to make the child comfortable and ensure that the child remains under close observation until the parent/guardian or authorised person arrives to collect the child.
- Parents/guardians are asked to inform the service if their child is diagnosed as having an infectious disease. If the child has an infectious disease which is in the Exclusion Table (refer to *Sources - Staying Healthy - Preventing Infectious Diseases in Early Childhood Education and Care Services*), a clearance letter from a medical practitioner needs to be provided to the service before the child can return to care. In some cases, it may be necessary that the educator recommend those in contact with

the child seek medical advice (e.g. when a pregnant woman is in contact with someone suffering rubella).

References, Sources, Links to Legislation and Other Documents

Please refer to Reference and Sources page.

Related service policies:

Administration of First Aid Policy

Anaphylaxis Policy

Dealing with Infectious Diseases Policy

Excursions and Service Events Policy

Privacy and Confidentiality Policy.

Administration of Medication Policy

Asthma Policy

Emergency and Evacuation Policy

Occupational Health and Safety Policy