

INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory – Quality Area 2

Precious Gems Childcare Pty Ltd trading as "Kids Haven Childcare"

- Quality Area 2.1.1** Wellbeing and comfort – Child’s wellbeing and comfort
Quality Area 2.1.2 Health practices and procedures – illness, management & hygiene practices
Quality Area 2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness
- Quality Area 2.2** Safety – Each child is protected
Quality Area 2.2.2 Plans to effectively manage incidents and emergencies
- Quality Area 3.1** The design and location of the premises is appropriate for the operation of a service
- Quality Area 3.1.2** Premises, furniture and equipment are safe, clean and well maintained
Quality Area 7.3 Administrative systems enable the effective management of a quality service
Quality Area 7.3.1 Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements
- Quality Area 7.3.2** Administrative systems are established and maintained to ensure effective operation of the service
- National Law Section 51(1)(a)** Ensures the safety, health and well-being of the children being educated and cared for by the service;
- National Law Section 161** Offence to operate education and care service without nominated supervisor
- National Law Section 162A** Persons in day-to-day charge and nominated supervisors to have child protection training
- National Law Section 165** Offence to inadequately supervise children
National Law Section 166 Offence to use inappropriate discipline
National Law Section 167 Offence relating to protection of children from harm and hazards
National Law Section 168 Education and care service must have policies and procedures
National Law Section 169 Offence relating to staffing arrangements
National Law Section 174(2)(b) - You must notify the regulatory authority within 24 hours of any complaint alleging that a serious incident has occurred while the child is educated and cared for or complaints alleging that the Law has been contravened.
- National Law Section 175** Offence relating to requirement to keep enrolment and other documents
- Regulation 12** Meaning of serious incident
Regulation 77 Health, hygiene and safe food practices
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 88 Infectious diseases
Regulation 89 First aid kits
Regulation 97 Emergency and Evacuation policy
Regulation 97 Emergency and Evacuation policy
Regulation 122 Ensuring children are actively supervised at all times
Regulation 123 Educator to **child ratios**—centre-based services
Regulation 136(1)(a) First aid qualifications
Regulation 160(3)(iv) **Child enrolment records to be kept by approved provide**
 (3) An enrolment record must include the following information for each child— (iv) any person who is authorised to consent to medical treatment of, or to authorise administration of medication to, the child; and

Regulation 161	Authorisation to be kept in enrolment record
Regulation 162	Health information to be kept in enrolment record
Regulation 162(d)	Ensuring that the service is provided with a current medical management plan
Regulation 168	Education and care service must have policies and procedures
Regulation 175	Prescribed information to be notified to Regulatory Authority
Regulation 176	Time to notify certain information to Regulatory Authority
Regulation 183(2)	Storage of records and other documents The records must be kept—

- (a) if the record relates to an incident, illness, injury or trauma suffered by a child while being educated and cared for by the education and care service, until the child is aged 25 years;
- (b) if the record relates to an incident, illness, injury or trauma suffered by a child that may have occurred following an incident while being educated and cared for by the education and care service, until the child is aged 25 years;
- (c) if the record relates to the death of a child while being educated and cared for by the education and care service or that may have occurred as a result of an incident while being educated and cared for, until the end of 7 years after the death;
- (d) in the case of any other record relating to a child enrolled at the education and care service, until the end of 3 years after the last date on which the child was educated and cared for by the service;
- (e) if the record relates to the approved provider, until the end of 3 years after the last date on which the approved provider operated the education and care service;
- (f) if the record relates to a nominated supervisor or staff member of an education and care service, until the end of 3 years after the last date on which the nominated supervisor or staff member provided education and care on behalf of the service;
- (g) in case of any other record, until the end of 3 years after the date on which the record was made.

Related Service policies

- *Administration of First Aid Policy*
- *Control of Infectious Disease Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Supervision of Children Policy*
- *Handwashing Policy*
- *Medical Condition Policy*
- *Administration of Medication Policy*
- *Covid-19 Management Policy*
- *Occupational Health and Safety Policy*
- *Enrolment Policy*
- *Immunisation Policy*
- *Pregnancy in Early Childhood Policy*

PURPOSE

This policy will define the:

- 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
- responsibilities of staff, 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.

POLICY STATEMENT

1. VALUES

Precious Gems Childcare is committed to:

- providing a safe and healthy environment for all children, staff, volunteers, students on placement and any other persons participating in or visiting the service
- responding to the needs of an injured, ill or traumatised person 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 Kids Haven Childcare.

2. SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities at Kids Haven Childcare, including during offsite excursions and activities.

3. PROCEDURES

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

- 000
- DET regional office
- Approved provider
- Asthma Victoria: (03) 9326 7088 or toll free 1800 645 130
- Victorian Poisons Information Centre: 13 11 26
- Local council or shire.

4. RESPONSIBILITIES

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring that the premises are kept clean and in good repair	R	R	√		√
Maintaining effective supervision (<i>refer to Supervision of Children Policy</i>) for all enrolled children in all aspects of the service's program that is reflective of the children's needs, abilities, age and circumstances	R	R	√		
Regularly checking equipment in both indoor and outdoor areas for hazards (<i>refer to Attachment 1</i>), and taking the appropriate action to ensure the safety of the children when a hazard is identified	R	R	√		
Being proactive, responsive and flexible in using professional judgments to prevent injury from occurring	R	R	√		√
Having ready access to an operating telephone or other similar means of communication to enable immediate communication to and from parents and emergency services	R	√	√		
Ensuring that staff have access to medication, Incident, Injury, Trauma and Illness forms (<i>available from ACECQA – refer to Sources</i>) and WorkSafe Victoria incident report forms (<i>refer to Sources</i>)	R	√			
Ensuring that the service has an <i>Occupational Health and Safety policy</i> 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	R	√	√		

appropriate authorities (<i>refer to Occupational Health and Safety Policy</i>)					
Ensuring that there is a minimum of one educator with a current approved first aid qualification on the premises at all times (<i>refer to Administration of First Aid Policy</i>)	R	√			
Ensuring that there are an appropriate number of up-to-date, fully equipped first aid kits that are accessible at all times (<i>refer to Administration of First Aid Policy</i>)	R	√	√		
Ensuring that children’s enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (<i>Regulations 161</i>)	R	√		√	
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 (<i>Regulation 162</i>)				√	
Informing the service of an infectious disease or illness that has been identified while the child has not attended the service, and that may impact on the health and wellbeing of other children, staff and parents/guardians attending the service				√	
Ensuring that the service is provided with a current medical management plan, if applicable (<i>Regulation 162(d)</i>)				√	
Notifying the service when their child will be absent from their regular program				√	
Notifying staff/educators if there is a change in the condition of a/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.					
<div style="border: 1px solid black; background-color: #e0e0e0; padding: 10px; margin: 10px 0;"> <p>Part of the Child Safe Standards, it is important that if a child presents upon arrival to the service with any visible injury or trauma, this should be discussed and documented prior to the parent/guardian leaving the service (<i>refer to Child Safe Environment and Wellbeing policy</i>)</p> </div>	R	√	√	√	√
Responding immediately to any incident, injury or medical emergency (<i>refer to procedures and Administration of First Aid policy</i>)	R	R	R		
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 (<i>Regulation 86</i>)	R	√	√		
Notifying other person/s as authorised on the child’s enrolment form when the parents/guardians are not contactable	R	√	√		
Considering the emotional wellbeing of all children and educators during and following an accident, injury, trauma or illness events	√	√	√		

Ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency	R	√	√		
Ensuing notifications of serious incidents (<i>refer to Definitions</i>) are made to the regulatory authority (DET) (<i>refer to Definition</i>) through the NQA IT System (<i>refer to Definitions</i>) as soon as is practicable but not later than 24 hours after the occurrence	R	√			
Recording details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record (<i>refer to Definitions</i>) as soon as is practicable but not later than 24 hours after the occurrence	R	√			
Signing the Incident, Injury, Trauma and Illness Record, thereby acknowledging that they have been made aware of the incident				√	
Reviewing and evaluating procedures after an incident or illness as part of the quality improvement process and taking appropriate action to remove the cause if required. For example, removing a nail found protruding from climbing equipment or retraining staff to adhere more closely to the service's <i>Hygiene Policy</i>	R	√	√		
Ensuring that completed medication records are kept until the end of 3 years after the child's last attendance (<i>Regulation 92, 183</i>)	R	√			
Ensuring that Incident, Injury, Trauma and Illness Records are maintained and stored securely until the child is 25 years old (<i>Regulations 87, 183</i>) (<i>refer to Privacy and Confidentiality Policy</i>)	R	√			
Communicating with families about children's health requirements in culturally sensitive ways and implementing individual children's medical management plans, where relevant	R	√	√	√	
Being contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical attention				√	
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	R	√	√	√	
Collecting their child as soon as possible when notified of an incident, injury or medical emergency involving their child				√	
Arranging payment of all costs incurred when an ambulance service required for their child at the service				√	

5. BACKGROUND AND LEGISLATION

Background

People responsible for managing early childhood services and caring for children have a duty of care towards those children. All service staff 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 possible and within 24 hours of the occurrence.

The National Regulations require an accurate *Incident, Injury, Trauma and Illness Record* to be kept and stored confidentially until the child is **25 years old** (Regulation 183(2)).

- *Education and Care Services National Regulations 2011*: Regulations 77, 85–87, 103, 177, 183

6. DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Emergency services: Includes ambulance, fire brigade, police and state emergency services.

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, and a list is published on the ACECQA website:

www.acecqa.gov.au/qualifications/approved-first-aid-qualifications

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.

Incident: Any unplanned event resulting in or having potential for injury, ill health, damage or other loss.

Incident, Injury, Trauma and Illness Record: The Approved Provider must ensure an *Incident, Injury, Trauma and Illness Record* is kept in accordance with Regulation 87 of the *Education and Care Services National Regulations 2011*. A sample is available on the ACECQA website at:

<http://www.acecqa.gov.au/sample-forms-and-templates-now-available>

Injury: Any physical damage to the body caused by violence or an incident.

Medication: Any substance, as defined in the *Therapeutic Goods Act 1989* (Cth), that is administered for the treatment of an illness or medical condition.

Medical management plan: A document that has been prepared and signed by a doctor 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. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCIA) action plan for anaphylaxis.

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.

Minor incident: An incident that results in an injury that is small and does not require medical attention.

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. This website also contains online reporting forms: www.worksafe.vic.gov.au

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 (Regulation 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 possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 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.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider of Kids Haven Childcare will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- review and analyse information gathered from the *Incident, Injury, Trauma and Illness Record* and staff first aid records regarding incidents at the service
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Precious Gems Childcare on 01st December 2022.

REVIEW DATE: 01/01/2024

If any box is marked with a "No", it is deemed to be unsatisfactory and must be followed up using an appropriate risk assessment and control checklist.