

Incident, Injury, Trauma and Illness policy / procedure

This policy/procedure **MUST** be read in conjunction with *the following Organisational policies*

- Workplace health, safety and wellbeing policy
- Incident management policy
- Reportable conduct & mandatory reporting policy
- Risk of suspected or alleged physical or sexual abuse policy

Policy Statement

Uniting Early Learning 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;
- Supporting children as citizens with rights
- promptly responding to the needs of an injured, ill or traumatised child/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 the service.

Executive Summary

The wellbeing of children, staff, volunteers, students and visitors is of high priority to Uniting Early Learning. Responsible for managing early childhood services and caring for children requires all involved to have a duty of care towards those children and act to effectively respond, manage and prevent accidents and emergencies at the service.

We support educate children in developing responsibility for their own safety

Prevention strategies are essential to protect those participating in a children's program from foreseeable risk of harm, injury and infection. Each service must have occupational health and safety procedures that outline the process for effectively identifying, managing and reviewing risks and hazards for the specific context. Environmental, health, behavioural factors and workplace procedures will require consideration to ensure the minimisation of risk in the context of the service environment.

Staff must be able to identify and monitor signs and symptoms of any injury, trauma and illness and accurately complete all administrative requirements to systematically document and report these. Any concerns are to be communicated promptly to the relevant people, including the notification of parents. Services must follow the incident reporting and escalation process and ensure they comply with any regulatory or legislative responsibility.

Current Environmental Context

Educators are encouraged and supported to have an approved and current first aid qualification.

The education and care program supports children 's understanding of how to care for themselves

Policies and procedures in place will guide staff to prevent or respond immediately to identified issues, administer first aid when appropriate and report any incident, injury or medical emergency.

Documentation to provide accurate records must be maintained, kept and stored securely until the child is 25 years of age.

Workplace safety for all staff is essential and procedures for controlling the risks associated with hazardous tasks must be engaged. Under the Occupational Health and Safety Act both employers and employees have responsibilities to ensure the health and safety of individuals while working. This duty extends to any person who may be affected by the organisation's activities and includes children and volunteers.

Medical emergencies may include serious health issues such as asthma, anaphylaxis, diabetes, fractures, choking and seizures. In some cases, the decision to call an ambulance will need to be made by the person in day-to-day in charge of the service.

DOCUMENT TITLE & NUMBER	INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer		Page 1 of 8
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Attachment 9a: Responsibilities relating to the Incident, Injury, Trauma and Illness Policy

Attachment 9b: Serious incident reporting

Attachment 9c: Procedure for child requiring an ambulance

[Form 9.1: Serious Incident record – Category 1- Use by Family Day Care Services](#)

[Form 9.2: Serious Incident record – Category 2 – Use by Family Day Care services](#)

[Form 9.3: Non serious incident, injury and illness record](#)

[Form 9.4: Complaint record – Serious and Non serious](#)

[Form 9.5: Serious Incident - Internal Investigation record](#)

[Form 9.6: Serious Incident – Witness Statement record](#)

[Form 33.2: Daily Indoor-Outdoor safety checklist](#)

Reference/Sources

This policy should be read in conjunction with:

Uniting Child Safety Policy – Uniting adopts the Uniting Church Australia National Child Safety Policy Framework, 2019 and the principles of this Policy Framework

Administration of First Aid Policy	Administration of Medication Policy
Anaphylaxis Policy Appendix	Asthma Policy Appendix
Hygiene and Infectious Diseases Policy	Dealing with Medical Conditions Policy
Diabetes Policy Appendix	Emergency and Evacuation Policy
Enrolment and Orientation Policy	Epilepsy Policy Appendix
Excursions Regular Outings and Service Events Policy	Workplace Health, Safety and Wellbeing Policy
Privacy Policy	Incident management policy
Reportable conduct scheme protocol	Reporting Allegations of child abuse protocol

- Children’s Services amendment Act 2019
- Children’s Services Regulations 2020
- *Education and Care Services National Law Act 2010*: Section 174(2)
- *Education and Care Services National Regulations 2011*: 177, 85–87, 103, 177, 183
- Phoenix Australia-Understand trauma and renew lives - <https://www.phoenixaustralia.org/resources/trauma-research/>
- *Growing a mentally healthy generation – Be You-(sourced 2019)* <https://beyou.edu.au/>
- *National Quality Standard, Quality Area 2: Children’s Health and Safety, Quality Area 3: Physical Environment, Quality Area 7: Leadership and Service Management*
- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition, 2013) National Health and Medical Research Council: <https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services>
- *Tasmanian Licensing Standards for Centre Based Child Care, 2014, Class 5 (0-12years)* s15
- WorkSafe Victoria: Online notification forms: <http://www.worksafe.vic.gov.au/safety-and-prevention/health-and-safety-topics/incident-notification>
- WorkSafe Tasmania: <http://www.workcover.tas.gov.au/>
- Australian Government-National Health and Medical Research Council -5th Edition Staying healthy <https://www.nhmrc.gov.au/sites/default/files/documents/attachments/ch55-staying-healthy.pdf>

Authorisation - This policy was adopted by Uniting Early Learning on: 1/12/2020

Review - This policy is to be reviewed by: 1/12/2021

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 2 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	

Attachment 9a Responsibilities relating to the Incident, Injury, Trauma and Illness Policy

Approved Provider

- Ensure the premises are kept clean and in good repair
- Ensure that staff have access to the *Non serious incident, injury and illness, RiskMan, Complaints*, and WorkSafe Victoria incident report forms
- Ensure the service has access/copy of the *Uniting Workplace Health, Safety and wellbeing 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 including Uniting
- Support staff to report any notifiable incident to Worksafe Victoria/Tasmania
- Support staff to report any serious incidents (*and if a parent complaint relates to an incident/injury that a child has sustained or an allgatin made, this incident is also entered*) into RiskMan as an incident, and the regulatory authorities in the relevant state (Victorian and Tasmania) (If required)
- Support staff to report any legislative or regulatory breaches to the relevant Department
- Support staff to report any concerns for a child’s wellbeing to ChildFIRST
- Support staff to report any concerns for a child in need for protection to the Child Protection Unit
- Ensure that completed medication records are kept until the end of 3 years after the child’s last attendance
- Ensure that a parent of the child is notified as soon as is practicable, but no later than 12 hours after the occurrence, if the child is involved in any incident, injury, trauma or illness while at the service
- Ensure that all *Non serious incident, injury and illness* records are kept and stored securely until the child is 25 years old ([Form 9.3](#)).
- Ensure the required number of educators on the premises have a current approved first aid qualification
- Support educators to have a current approved first aid qualification
- Ensure that there is an appropriate number of up-to-date, fully equipped first aid kits that are clearly identified and accessible at all times
- Ensure 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
- Ensure that an appropriate incident reporting and escalation process is in place and followed at the service (refer to *Attachment 9b*)

Responsible person

- Notify the Approved Provider via RiskMan and Regulatory Authority in writing within 12 hours of a Serious incident within the required time-frame for a notifiable incident/complaint ([refer to Glossary](#))
- Ensure that the following are displayed near all telephones:
 - Emergency number 000
 - Regulatory Authority regional office and phone number
 - Approved Provider email and phone number
 - Asthma foundation of **Victoria**: (03) 9326 7088 or toll free 1800 645 130
 - Asthma foundation of **Tasmania** (03) 6272 9175 or 1800 278 462
 - **Victoria & Tasmania** Poisons Information Centre: 13 11 26
 - **Tasmania** Pharmaceutical Services (03) 6166 0400
 - Local council or shire .phone number
- Ensure that volunteers and parents on duty are aware of which children have medical management plans and their responsibilities in the event of an incident, injury or medical emergency

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 3 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	

- Plan and implement an education and care program that fosters the children's learnings of how to care for and keep themselves safe
- Ensure that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service
- Request that parents make arrangements for the child or children involved in an incident or medical emergency to be collected from the service, or informing parents if an ambulance has been called
- Investigate and review the cause of the incident and rectify if practical, or alternatively report the incident and seek assistance to remove the cause immediately
- Follow the Incident Reporting and Escalation Procedure (refer to *Attachment 9c*) at the service
- Notify the Early Learning Coordinator/Area Manager, Approved Provider immediately in the event of a serious incident (refer to *Glossary*) or notifiable complaint/incident (refer to *Glossary*)
- Notify parents by placing a notice on the door of the service if there has been an outbreak of an infectious disease or illness that has been identified, and that may impact on the health and wellbeing of children, educators and parents attending the service
- Respond immediately to any incident, injury or medical emergency
- Implement individual children's medical management plans, where relevant
- Record details of any serious incident (category 1 or 2), complaints, non serious incident, injury and illness, and or WorkSafe incident report as soon as is practicable but not later than 12 hours after the occurrence
- Notify other person/s as authorised on the child's enrolment form when the parents are not contactable
- Maintain all enrolment and other medical records in line with the *Privacy Policy*
- Ensure that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency
- Ensure ongoing adequate and effective supervision of all children in attendance at the service
- Implement the daily indoor and outdoor safety checklist for hazards, and take the appropriate action to ensure the safety of the children when a hazard is identified. (Refer to form No: 33.2)
- Review the cause of any incident, injury or illness and taking appropriate action to remove the cause if required
- During and following an Incident, Injury, Trauma and/ or Illness check on the staff's wellbeing and advise of EAP

Educator

- Respond immediately to any incident, injury or medical emergency
- Implement individual children's medical management plans, where relevant
- Implement an education and care program that fosters the children's learnings of how to care for and keep themselves safe
- Record details of any serious incident (category 1 or 2), in RiskMan, non serious incident, injury and illness, and or WorkSafe incident report as soon as is practicable but not later than 12 hours after the occurrence
- Notify other person/s as authorised on the child's enrolment form when the parents are not contactable
- Maintain all enrolment and other medical records in line with the *Privacy Policy*
- Ensure that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency
- Implement the daily indoor and outdoor safety checklist for hazards, and take the appropriate action to ensure the safety of the children when a hazard is identified. (Refer to form No: 33.2)
- Notify the Responsible Person immediately in the event of a serious incident (refer to *Glossary*) or notifiable complaint/incident (refer to *Glossary*)

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 4 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	

In a medical emergency (includes: incident and injury):

- call an ambulance, where necessary
- administer first aid, and provide care and comfort to the child prior to the parents or ambulance arriving
- implement the child's current medical management plan, where appropriate
- notify parents as soon as is practicable of any serious medical emergency, incident or injury concerning the child, and request the parents make arrangements for the child to be collected from the service and/or inform the parents that an ambulance has been called
- if the parents are not contactable, notify other person/s as authorised on the child's enrolment form.
- ensure ongoing supervision of all children in attendance at the service
- when the parents are not present, if required and with the ambulance officer's consent, accompany the child in the ambulance, provided that staff-to-child ratios can be maintained at the service

When a child develops symptoms of illness:

- ensure that the Responsible Person, or person in day-to-day care of the service, contacts the parents 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 the child is separated from the group whilst still being adequately supervised and provide care and comfort until the child recovers, a parent arrives or another responsible person takes charge
- call an ambulance if a child appears very unwell (refer to *Attachment 9c*)
- collaborate with and act on advice from emergency services
- ensure that, where medication, medical or dental treatment is obtained, the parents are notified as soon as is practicable and within 12 hours, and are provided with details of the illness and subsequent treatment administered to the child
- ensure that the Approved Provider is notified of any external medical intervention and/or emergency service involvement
- ensure that the relevant record is accurately completed as soon as is practicable, and updated with outcome for the child within 24 hours of the occurrence

In the case of traumatic incident:

- ensure that the Responsible Person, contacts the parents or authorised emergency contact for the child to outline the signs and symptoms observed
- call an ambulance, where necessary
- provide care and comfort to the child prior to the parents or ambulance arriving
- identify, reduce and/or eliminate any risk factors contributing to the trauma
- closely observe and monitor child's behaviour and play to avoid the escalation of the traumatic response
- maximise the child's feelings of safety, stability and wellbeing
- if required, refer parent/child to a specialised support service

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 5 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	

Parent

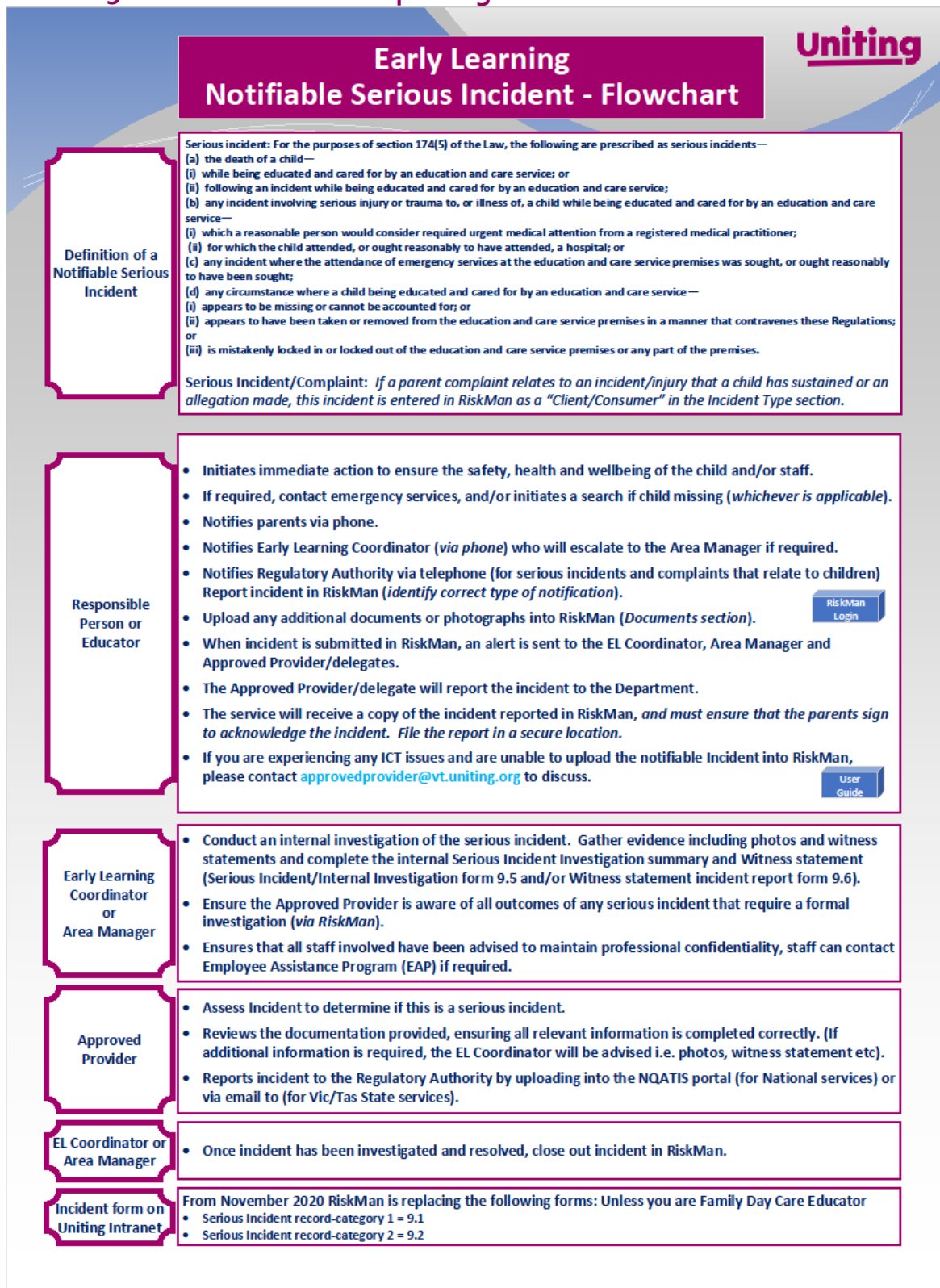
- Provide authorisation in your child's enrolment record for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service
- Pay all costs incurred when an ambulance service is called to attend to their child at the service
- Notify the service, upon enrolment or diagnosis, of any medical conditions and/or needs, and any management procedure to be followed with respect to that condition or need
- Ensure you provide the service with a current medical management plan for your child, if applicable
- Collect your child as soon as possible when notified of an incident, injury or medical emergency involving the child
- Inform 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 attending the service
- Be contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical attention
- Sign the Serious Incident (category 1 or 2), on the RiskMan report, Non serious incident, injury and illness record, acknowledging that you have been made aware of the incident
- Notify the service by telephone/email if your child will be absent from their regular program
- Notify staff/educators if there is a change in the condition of your 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

Note: Volunteers and students, while at the service, are responsible for following this policy and its procedures

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 6 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	

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Attachment 9b: Serious Incident reporting



DOCUMENT TITLE & NUMBER	INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer		Page 7 of 8
Document Author	EL Practice Manager	Document Version	V 6.0
Date Published	01/12/2020	Revision Due Date	15/12/2021

Attachment 9c - Procedure for a child requiring an Ambulance Medical emergency may include:

- Not breathing and lifeless: call 000 then begin CPR
- Respiratory distress/ difficulty breathing
- Unconscious
- Change in mental status
- Broken limb
- Severe bleeding
- Seizure that lasts longer than 5 mins
- Head trauma
- Asthma attack that becomes worse/unmanageable
- Anaphylaxis reaction
- Choking
- Diabetes complications

Immediate Action:

- Nominated first aider assess the injury, trauma or illness, administer **Emergency First Aid, and determine if it is a medical emergency** and requests assistance. If no assistance available, dial 000 immediately
- The second responder telephones and requests ambulance to attend – dial 000
- Ensure the child is comfortable and kept under adult supervision
- Inform the Centre Director/Service Coordinator/Responsible Person
- Centre Director/Service Coordinator/Responsible Person to inform Parent/Emergency contact **immediately**
 - Tell the Parents/Guardians/Emergency Contact that an ambulance is on its way to the service. If he/she is unable to reach the service to meet the ambulance, then ask him/her to meet the ambulance at the hospital (Indicate the expected hospital)
- When appropriate, ensuring that staff/child ratios are maintained at the service at all times and ambulance officers provide consent, an educator whom is known to the child, is to accompany him/her to the hospital
- In the circumstance where an educator accompanies the child to hospital, ensure that the educator has the following information
 - Child’s enrolment form
 - Fully charged mobile phone
 - Planned return to the service or home
- Ensure ongoing supervision of all children in attendance at the service and child-to-staff ratios are maintained at all times
- The nominated first aider to complete an Incident, Injury, Trauma and Illness record in RiskMan and provide parents with a copy as soon as possible
- **Notification of the serious incident must be made to the relevant authorities, in writing, within 12 hours of the incident**
- The Responsible Person to notify Early Learning Coordinator/Area Manager
- The Responsible Person is to contact the Parents/Guardians/Emergency Contact for further information regarding the child's progress and well-being as soon as practicable

Please note: Parents will be responsible for any costs associated with an ambulance attending a service for their child’s medical emergency

DOCUMENT TITLE & NUMBER		INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY/PROCEDURE		
Content Owner	Uniting Early Learning – Executive Officer			Page 8 of 8
Document Author	EL Practice Manager	Document Version	V 6.0	Policy No. 09
Date Published	01/12/2020	Revision Due Date	15/12/2021	