

2.06 INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

QUALITY AREA 2 | VERSION 1.23

PURPOSE

This policy provides a clear set of guidelines for:

- procedures to be followed if a child 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 child 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

VALUES

LEVNT EC Services are committed to:

- providing a safe and healthy environment for all children, staff, volunteers, student teachers and any other persons participating in or visiting an LEVNT EC Service
- responding to the needs of an injured, ill or traumatised child at an LEVNT EC Service
- preventing injuries and trauma through appropriate risk assessment and risk management procedures
- 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 LEVNT EC Services

SCOPE

This policy applies to the Approved Provider, persons with management or control, nominated supervisor, persons in day-to-day charge, parents/guardians, student educators, volunteers and contractors attending LEVNT EC Services, including during offsite excursions and activities.

BACKGROUND

People responsible for managing early childhood services and caring for children have a duty of care towards those children. All LEVNT EC staff have a responsibility and a duty of care to act to prevent accidents and emergencies at their service.

All LEVNT EC services 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)*).

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 or trauma to which a child has been subjected
- an illness that becomes apparent

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 children's service. In some cases it will be appropriate to refer to specific policies

for guidance, such as the *Dealing with Medical Conditions Policy*, *Asthma Policy*, *Anaphylaxis Policy*, *Diabetes Policy* and *Epilepsy Policy*.

DEFINITIONS

The terms defined in this section relate specifically to this policy. For regularly used terms refer to the Definitions file of any LEVNT EC service's policy folder.

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

Illness: Any sickness and/or associated symptoms that affect the child's normal participation in the program at the service.

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

Incident, Injury, Trauma and Illness Record: Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. The Approved Provider must ensure an Injury, Trauma and Illness Record is kept in accordance with *Regulation 87 of the Education and Care Services National Regulations 2011* and kept for the period of time specified in *Regulation 183*.

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

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

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.

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.

RESPONSIBILITIES

The Approved Provider, persons with management and control, nominated supervisor and/persons in day-to-day charge are responsible for meeting legislated requirements of the ECEC sector are indicated with **LR**.

	Approved Provider and/or persons with management	Nominated supervisor and persons in day-to-day	Early childhood teachers, educators and all other	Parents, guardians and carers	Contractors, volunteers and those on student
Ensuring that the premises are kept clean and in good repair	LR	LR	✓		✓
Maintaining effective supervision for all enrolled children in all aspects of the service's program that is reflective of each child's needs, abilities, age and circumstances	LR	LR	✓		
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	LR	LR	✓		
Being proactive, responsive and flexible in using professional judgments to prevent injury from occurring	LR	LR	✓		✓
Having ready access to an operating telephone or other similar means of communication to enable immediate communication to and from parents and emergency services	LR	LR	✓		
Ensuring that staff have access to medication, Incident, Injury, Trauma and Illness forms and WorkSafe Victoria incident report forms	LR	✓			
Ensuring that each 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 appropriate authorities	LR	✓	✓		
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>)	LR	✓			
Ensuring that there are an appropriate number of up-to-date, fully equipped first aid kits that are accessible at all times	LR	✓	✓		
Ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service	LR	✓		✓	
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				✓	
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				✓	
Notifying the service when their child will be absent from their regular program				✓	

	Approved Provider and/or persons with management	Nominated supervisor and persons in day-to-day	Early childhood teachers, educators and all other	Parents, guardians and carers	Contractors, volunteers and those on student
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. NB. As 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	LR	✓	✓	✓	✓
Responding immediately to any incident, injury or medical emergency	LR	LR	LR		
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	LR	✓	✓		
Notifying other person/s as authorised on the child's enrolment form when the parents/guardians are not contactable	LR	✓	✓		
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	LR	✓	✓		
Ensuing notifications of serious incidents are made to the regulatory authority (DET) through the NQA IT System as soon as is practicable but not later than 24 hours after the occurrence.	LR	✓			
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	LR	✓			
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	LR	✓	✓		
Ensuring that completed medication records are kept until the end of 3 years after the child's last attendance	LR	✓			
Ensuring that Incident, Trauma and Illness Records are maintained and stored securely until the child is 25 years old	LR	✓			
Communicating with families about children's health requirements in culturally sensitive ways and implementing individual children's medical management plans, where relevant	LR	✓	✓	✓	
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	LR	✓	✓	✓	
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				✓	

SPECIFIC PROCEDURES

Ensure the following contact numbers are displayed in proximity of each telephone:

- 000
- DET regional office
- Approved Provider – LEVNT (03) 9236 1250
- Asthma Victoria: (03) 9326 7088 or toll free 1800 645 130
- Victorian Poisons Information Centre: 13 11 26
- Local council or shire

When there is a medical emergency, all staff will:

- call an ambulance, where necessary
- 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 and/or inform the parents/guardians that an ambulance has been called
- notify other person/s 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 Service Leader (who notifies the Children's Services Manager) of the medical emergency, incident or injury as soon as is practicable

When there is a medical emergency:

- the Service Leader (in conjunction with the Children's Services Manager) will complete and submit an incident report to DET.
- the Approved Provider will ensure LCA Insurance is notified following a serious incident.

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

- observe the symptoms of the child's illness and injuries and systematically record and share this information with their family (and medical professionals where required)
- ensure that the child's lead educator contacts the parents/guardians or authorised emergency contact for the child, or delegates this task to the nominated supervisor or person in day-to-day care of the service
- 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 a staff member remain with the child until the child recovers, a parent/guardian arrives or another responsible person takes charge
- call an ambulance if a child appears very 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 within 24 hours, and are provided with details of the illness and subsequent treatment administered to the child
- ensure that the Approved Provider 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

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

- Lead Educator to inform the Service Leader/person in day-to-day charge of any contact made with parents/guardians to ensure they are aware of the situation

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 or trauma, or the onset of the illness.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider 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 all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk

AUTHORISATION & REVIEW

This policy was adopted by Lutheran Education VIC, NSW, TAS and ACT Ltd as Approved Provider on 20 April 2023.

REVIEW DATE April 2025 or earlier as required.

REFERENCES

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Australian Standards AS3745–2002, Emergency control procedures for buildings, structures and workplaces
- Education and Care Services National Law Act 2010: Section 174(2)
- Education and Care Services National Regulations 2011: Regulations 77, 85–87, 103, 177, 183
- Public Health and Wellbeing Act 2008 (Vic)
- Public Health and Wellbeing Regulations 2009 (Vic)
- Occupational Health and Safety Act 2004 (Vic)
- Occupational Health and Safety Regulations 2007
- WorkSafe Victoria Compliance Code: First aid in the workplace (2008)
- National Quality Standard, Quality Area 2: Children’s Health and Safety
- National Quality Standard, Quality Area 3: Physical Environment
- National Quality Standard, Quality Area 7: Governance and Leadership
- Therapeutic Goods Act 1989 (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
- Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au

SOURCES

- ACECQA sample forms and templates: www.acecqa.gov.au
- Building Code of Australia: www.abcb.gov.au
- Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th edition, 2013) National Health and Medical Research Council: www.nhmrc.gov.au
- VMIA Insurance Guide, Community Service Organisations program: www.vmia.vic.gov.au
- WorkSafe Victoria: Guide to Incident Notification: www.worksafe.vic.gov.au
- WorkSafe Victoria: Online notification forms: www.worksafe.vic.gov.au

RELATED POLICIES

- 2.05V Administration of First Aid
- 2.07V Dealing with Infectious Diseases
- 2.08V Dealing with Medical Conditions
- 2.09V Emergency and Evacuation
- 2.10V Delivery & Collection of Children
- 2.11V Providing a Child Safe Environment
- 2.13V Transportation of Children
- 2.15V Administration of Medication
- 2.16V Anaphylaxis
- 2.17V Asthma
- 2.18V Diabetes
- 2.19V Epilepsy
- 2.21V Hygiene
- 2.24V 1.1 Excursions and Service Events
- 3.02V Occupational Health and Safety
- 7.02V Privacy and Confidentiality