



## Incident, Injury, Trauma and Illness Policy

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### NQS

QA2	2.3.3	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
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### National Regulations

Regs	12	Meaning of serious incident
	85	Incident, injury, trauma and illness policies and procedures
	86	Notification to parents of incident, injury, trauma and illness
	87	Incident, injury, trauma and illness record
	88	Infectious diseases
	89	First aid kits
	97	Emergency and evacuation procedures
	161	Authorisations to be kept in enrolment record
	162	Health information to be kept in enrolment record
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	174	Prescribed information to be notified to Regulatory Authority
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### Aim

The service and all educators can effectively respond to and manage accidents, illness and emergencies which occur at the service to ensure the safety and wellbeing of children, educators and visitors.

### Related Policies

Death of a Child Policy

Emergency Service Contact Policy

Emergency Management and Evacuation Policy

Enrolment Policy

Food Nutrition and Beverage Policy

Health, Hygiene and Safe Food Policy

Infectious Diseases Policy

Medical Conditions Policy



## Implementation

This policy and related policies and procedures at The Yellow Cottage will be followed by nominated supervisors and educators of, and volunteers at, The Yellow Cottage in the event that a child -

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

The approved provider of The Yellow Cottage will ensure that a parent of a child is notified as soon as practicably possible and without undue delay. 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 Yellow Cottage 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, anaphylaxis management training and asthma management training is current and updated at least every 3 years, and that all components of the first aid certificate are current if some require an earlier revision.

First aid qualified educators will be present at all times at The Yellow Cottage. They will never exceed their qualifications and competence when administering first aid.

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.

## 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 nominated supervisor and a first aid qualified educator of the incident, illness or injury



- Nominated supervisor or first aid qualified educator 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.
- Nominated supervisor and educators supervise and care for children in the vicinity of the incident, illness or injury
- If required, first aid qualified educator or nominated supervisor notifies and co-ordinates ambulance
- If required, first aid qualified educator or nominated supervisor notifies parent or authorised nominee that child requires medical attention from a medical practitioner
- If required, educator or nominated supervisor contacts parent or authorised nominee to collect child from service
- 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.

## First Aid Kit Guidelines

### Any First Aid kit at the service must -

- Not be locked.
- Not contain paracetamol.
- Be appropriate for the number of employees and children and adequate for the immediate treatment of injuries at the service.
- Be in a place that takes an employee no longer than two minutes to reach, including time required to access secure areas.
- Be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents
- Be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments.
- Be regularly checked using the First Aid Kit Checklist to ensure the contents are as listed and have not deteriorated or expired.
- Have a white cross on a green background with the words 'First Aid' prominently displayed on the outside.
- Be easy to access and if applicable, located where there is a risk of injury occurring.



- Display emergency telephone numbers, the phone number and location of the nearest first aid trained educators (including appropriate information for those employees who have mobile workplaces).
- Be provided on each floor of a multi-level workplace.
- Be provided in each work vehicle.
- Consideration should be given to preventative measures such as sunscreen protection and portable water if working outdoors.
- First Aid kits must be taken on excursions and be attended by First Aid qualified educators.
- Be maintained in proper condition and the contents replenished as necessary.
- Our First Aid delegated individual responsible for maintaining all First Aid kits at the service is:

Name Emma Fogarty                      Role    Educator

Number of First Aid Kits Responsible For In the Service

4

- Our back-up First Aid delegated individual responsible for maintaining all First Aid kits when the person listed above is away is:

Name Nicole Cook                      Role    Trainee

Number of First Aid Kits Responsible For In the Service

6

**These two staff members will complete regular checks of the First Aid Kits and notify the Nominated Supervisor if they require additional resources outside of the checks made by Upper Hunter Fire Protection. Upper Hunter Fire Protection maintain our First Aid kits they are responsible for using the First Aid Checklist and ensuring each Kit has the required quantities, items are within their expiry dates and sterile products are sealed. This will occur after each use or if unused, at every six months. They will also consider whether the first aid kits and modules suit the service's hazards and the injuries that have occurred. If the kit requires additional resources, these individuals will advise and follow up with the nominated supervisor.**

- We will display a well recognised, standardised first aid sign to assist in easily locating first aid kits. Signage will comply with AS 1319:1994 – Safety Signs for the Occupational Environment.



## First Aid Kit Checklist

Our Service will use the Checklist in Safe Work Australia's First Aid in the Workplace Code of Practice as a guide to what to include in our First Aid Kit.

<http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/693/First%20aid%20in%20the%20workplace.pdf>

We will determine whether we need additional items to those in the checklist, or whether some items are unnecessary, after considering the number of children at our Service and what injuries children or adults may incur. We will check our incident, injury, trauma and illness records to help us make an informed decision about what to include. Educators may wish to provide additional items or modules, for example burns modules and eye wound modules. We will also include appropriate resources to deal with a child at risk of anaphylaxis and other medical conditions.

## Incident, Injury, Trauma and Illness Record

Our service will use the Incident, Injury, Trauma and Illness Record template published by the national authority ACECQA at

<http://files.acecqa.gov.au/files/Templates/1-Incident,%20injury,%20trauma%20and%20illness%20record%20word%20version.pdf>

## Incident, injury, trauma and illness record

(Circle relevant type of record)

### Child details

Surname: ..... Given names: .....

Date of birth: ...../...../..... Age: .....

Room/group: .....

### Incident/injury/trauma/illness details

#### Incident/injury/trauma

Circumstances leading to the incident/injury/trauma: .....

.....  
.....

Products or structures involved: .....

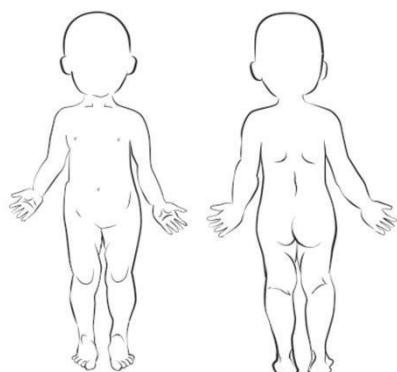
.....  
.....

Location: ..... Time: ..... am/pm Date: ...../...../.....

Name of witness: .....

Signature: ..... Date: ...../...../.....

- Bruise
- Burn
- Concussion



Nature of injury sustained:

- Abrasion, scrape
- Bite
- Broken bone / fracture
- Cut



- Rash
  - Sprain
  - Swelling
  - Other (please specify)
- .....



## Illness

Circumstances surrounding child becoming ill, including apparent symptoms: .....

.....  
.....  
.....  
.....

Time of illness: ..... am/pm                      Date of illness: ...../...../.....

### Action Taken

Details of action taken, including first aid administration of medication: .....

.....  
.....

Medical personnel contacted: Yes / No

If yes, provide details: .....

.....  
.....

### Details of person completing this record

Name: ..... Signature: .....

Time record was made: ..... am/pm    Date record was made ...../...../.....

### Notifications (including attempted notifications)

Parent/guardian: .....    Time: ..... am/pm    Date: ...../...../.....

Director/teacher/coordinator: .....    Time: ..... am/pm    Date: ...../...../.....

Regulatory authority (if applicable): .....    Time: ..... am/pm    Date: ...../...../.....

### Parental acknowledgement:

I.....







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## Notification of serious incidents and complaints

The Approved Provider will notify the regulatory authority within 24 hours of any serious incident at our service (s. 174). This includes any serious injury or trauma to, or illness of a child which a reasonable person would consider required urgent medical attention from a medical practitioner or for which the child attended, or ought reasonably to have attended, a hospital.

Serious injuries, traumas and illnesses include:

- head injuries
- broken limbs
- burns
- removal of fingers
- meningococcal infection
- anaphylactic reaction requiring urgent medical attention
- witnessing violence or a frightening event
- epileptic seizures
- bronchiolitis
- whooping cough
- measles
- diarrhoea requiring urgent medical attention
- asthma requiring urgent medical attention
- sexual assault

A serious incident also includes:

- The death of a child at the service or following an incident at the Service
- An incident at the service where the emergency services attended or ought reasonably to have attended
- A child is missing
- A child has been taken from the service without the authorisations required under the regulations
- A child is mistakenly locked in or out of the service.

If our service only becomes aware that the incident was serious afterwards, we will notify the regulatory authority within 24 hours of becoming aware that the incident was serious.

We will notify the regulator using form [SI01 Notification of Serious Incident](#) .

The Approved Provider will also notify the regulatory authority in writing:

- within 24 hours of any complaints alleging that the safety, health or wellbeing of a child is being compromised at the service or
- within 7 days of any circumstances arising at the Service that pose a risk to the health, safety and wellbeing of a child.
- within 24 hours of the attendance of any children being educated and care for in an emergency. This includes where the child needs protection under a child protection order or



the parent of the child needs urgent health care. The emergency care can be for no more than two consecutive days the service operates.

We will advise the regulatory authority what the emergency is and make a statement that the Approved Provider has taken into account the safety, health and wellbeing of all the children attending the service before deciding to accept the additional child/children.

## Work Health and Safety (OHS) requirements

Serious injury or illness is a “notifiable incident” under the work, health and safety legislation.

Serious injury or illness means a person requires:

- immediate treatment as an in-patient in a hospital, or
- immediate treatment for:
  - the amputation of any part of the body
  - a serious head injury
  - a serious eye injury
  - a serious burn
  - the separation of skin from an underlying tissue (such as degloving or scalping)
  - a spinal injury
  - the loss of a bodily function
  - serious lacerations or
- medical treatment within 48 hours of exposure to a substance.

A serious illness includes any infection to which the carrying out of work is a significant contributing factor, for example an infection that can be linked to providing treatment to a person or coming into contact with human blood or body substances.

A dangerous incident is also notifiable under the legislation. Dangerous incidents include:

- an uncontrolled escape, spillage or leakage of a substance
- an uncontrolled implosion, explosion or fire
- an uncontrolled escape of gas or steam
- an uncontrolled escape of a pressurised substance
- electric shock
- the fall or release from a height of any plant, substance or thing
- the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with the regulations
- the collapse or partial collapse of a structure
- the collapse or failure of an excavation or of any shoring supporting an excavation
- the inrush of water, mud or gas in workings, in an underground excavation or tunnel



The approved provider must notify WorkCover by telephone or in writing (including by facsimile or email) as soon as possible after the injury, illness or incident. Records of the incident must be kept for at least 5 years from the date that the incident is notified. The approved provider/nominated supervisor must ensure the site where the incident occurred is left undisturbed as much as possible until an inspector arrives or as directed by WorkCover.

## **Sources**

**Education and Care Services National Regulations 2011**

**National Quality Standard**

**Work Health and Safety Act 2011**

**Work Health & Safety Regulation 2011**

**Safe Work Australia Legislative Fact Sheets First Aiders**

**Safe Work Australia First Aid in the Workplace Code of Practice**

## **Review**

The policy will be reviewed annually.

The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

**Last reviewed: 1/12/2014**

**Date for next review: 1/12/2015**