



Wattle Grove Out of School Hours Care/Vacation Care
 Cressbrook Drive, Wattle Grove NSW 2173
 Phone; 02 98254700
Wattlegrovekidsclub@optusnet.com.au

INCIDENT, INJURY, TRAUMA & ILLNESS POLICY & TEMPLATE

2020

Education and Care Services National Law & Regulations	National Quality Standards & Elements	Other Service policies/documentation	Other
S167, 174 R12, 77, 81, 85, 86, 87, 88, 89, 90, 91, 97, 98, 99, 109, 161, 162, 175, 176, 177	Standards 2.1, 2.2, 3.1, 7.1 Elements 2.1.1, 2.1.2, 2.2.1, 2.2.2, 2.2.3, 3.1.2, 7.1.2	<ul style="list-style-type: none"> - Acceptance and Refusal of Authorisations Policy - Enrolment and Orientation Policy - Medical Conditions and Administration of Medication Policy - Providing a Child Safe Environment Policy - Administration of First Aid Policy - Risk Assessment Policy - Governance and Management Policy - Child Protection Policy - Dealing with Infectious Diseases Policy - Emergency and Evacuation Policy 	<ul style="list-style-type: none"> - Work, Health and Safety Act 2011 - ACECQA "Frequently Asked Questions" - NSW Department of Health guidelines - Disability Discrimination Act 1975 - NSW Anti-discrimination Act 1977 - Staying Healthy in Child Care (5th Edition) - Parent Handbook - Staff Handbook - Enrolment records - Emergency procedures - Incident Report forms - Medication Records - Risk Assessments - Supervision Plans - Safety Checklists

Purpose

Wattle Grove Out of School Hours Care's purpose is to ensure that immediate action is taken in the case of any incident, injury, trauma, or illness, and accident or emergency treatment is initiated as well as accurate records completed and kept (**National Regulation 85, 86, 87, 183(2)(b)**).

Strategies

- Ensure enrolment forms have Paracetamol/Asthma medication authorisation included and correctly filled in.
- Staff are aware of signs of illness and are aware of responsibilities and procedures.
- Parents have been issued with Incident, Injury, Trauma & Illness Policy on enrolment.
- Refer to administration of first aid policy.
- To ensure the symptoms are not infectious and to minimise the spread of an infection, medical advice is required to ensure a safe and healthy environment.
- Symptoms indicating illness may include:
 - Behaviour that is unusual for the individual child
 - High temperature or fevers



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- Loose bowels
- Faeces that are grey, pale or contains blood
- Vomiting
- Discharge from the eye or ear
- Skin that display rashes, blisters, spots, crusty or weeping sores
- Stiff muscles or joint pain
- Continuous scratching of scalp or skin
- Sore throat
- Persistent, prolonged or severe coughing
- Difficulty breathing

Administration of First Aid

When an accident, injury or illness occurs, requiring staff to administer first aid, a staff member with current first aid qualifications must be the one to administer the treatment.

Staff will:

- Assess the situation for any further danger to themselves or others;
- Ensure no further danger is present and clear children away from the accident site and continue with the normal routine.
- Respond to the injury, illness or trauma needs of the child or adult within the capability of their training in first aid, asthma or anaphylaxis. Referral to the child's medical management plan and risk minimisation plan should be made.
- Staff will wear gloves whilst attending to a child who is bleeding.
- Staff are to practice hygiene procedures such as disposal of gloves, used gauze/wipes/tissues, etc after treatment.
- No medications will be used on the child unless they are prescribed for that child.
- Notify the Nominated Supervisor/ Responsible Person and parents of the incident, illness, injury or trauma the same day that it occurs.
- The Nominated Supervisor or other responsible person is to sight and sign the form.
- As part of first aid response educator may if required:
 - Call an ambulance (or ask another staff member to call and co-ordinate the ambulance).
 - Notify a parent or authorised nominee that the child requires medical attention from a medical practitioner.
 - Contact a parent or authorised nominee to collect the child from the service if required within an agreed time, as soon as practicable, depending on the travel time of the parent or other factors.
- If first aid is administered, an Incident, Injury and Trauma or Illness report is to be filled out by the staff member present at the time of the accident and the staff member who treated the child/adult. Information should be recorded as soon as possible in the Accident/Injury Register, and within 24 hours after the incident, injury, trauma or illness. This will state:
 - Date and time of accident.
 - Where the accident occurred.
 - Nature of incident/injury trauma (be specific).



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- Parent/person contacted and the time they were contacted (if necessary).
 - Adult witnesses.
 - Name of child/adult.
 - Circumstances of the accident (be specific).
 - Treatment given.
 - Person who administered the first aid.
 - Ways in which the accident could be prevented from occurring in the future.
 - Signed by staff member.
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- The parent is to sight and sign the form and receive a copy within 24 hours of the incident injury or trauma (if they request one). If contact is not possible on the day of the accident, the nominated supervisor or Responsible Person must contact parents by phone or in person as soon as possible the next day.
 - A copy of the form is to be put in the child's file and the details entered on a tracking sheet in the Accident/Injury Register so that staff can review the number and kinds of injuries and make decisions as to how to prevent them happening in the future.
 - The National Regulations require that an incident, injury, trauma and illness record be kept, and that the record be accurate and remain confidentially stored until the child is 25 years old (**National Regulation 183(2)(b))**.
 - Continue to monitor the child's condition. If the child's condition deteriorates, then the Nominated Supervisor or Responsible Person is to assess the situation and if necessary, call an ambulance, the parents or other emergency contacts nominated in the enrolment form. If either of these staff members are unavailable, then another member of staff is to do this, and the Nominated supervisor or Responsible Person is to be notified as soon as possible.
 - If the parents are not available and a child needs to go to hospital by ambulance, a staff member is to go with them. In this case the Director is to take the staff member's place, or a casual staff member called to come urgently to maintain staff/child ratios as per the Education and Care Services National Regulation (**National Regulation 123**).
 - Remaining staff are to continue to try to contact the parents/emergency contacts.
 - A copy of the child's enrolment form is to be taken to the hospital by the staff member accompanying the child.
 - If a child requires hospitalisation, the Nominated Supervisor or Responsible Person is to contact the regulatory authority, the NSW Early Childhood Education and Care Directorate via NQA ITS Portal within 24 hours.
 - A small first aid kit is to be kept in an evacuation pack, which is used in the evacuation of the service, e.g. fire, bomb threat, etc.
 - In case of a death of a child in care, the Nominated Supervisor or Responsible Person must immediately give notice of the fact to:
 - The parent of the child.
 - The Police.
 - The regulatory authority, the NSW Early Childhood Education and Care Directorate within 24 hours.
 - The Approved Provider of the service.

Illness/ High Temperature



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If an educator notices that a child has a high temperature of 38°C or higher:

- They are required to take the temperature of the child and notify responsible person.
- Take off any excess clothing and socks.
- Give a cool cloth to wipe down the child's face and body.
- Make sure the child has access to water to keep them hydrated.
- Check child's enrolment form for permission to administer Panadol/Paracetamol.
- There must be two staff members present at the time of administration and one of which must be a responsible person of the service.
- Administer Panadol/ Paracetamol according to the age of the child. Dosage amount can be found on the Panadol/ Paracetamol label.
*Ensure that the Panadol/ Paracetamol is the correct age group for child.
- Record temperatures on their medication record at time of fever, after 15 minutes and after 45 minutes if the child is still in attendance at the service.
- The parents should be called to come and collect the child within the hour of being notified.
**This is only acceptable if the parent/guardian or authorised nominee, who is on their way to collect and cannot do so within a reasonable time frame, that being within 15 to 20 mins.*
- Verbal authorisation without written authorisation is acceptable only when two staff members receive the verbal authorisation. In all instances the parent/guardian or authorised nominee must be on their way to collect the child. If the parent/guardian or any other authorised nominee in the child's file does not answer the call to administer Panadol/Paracetamol and the child has permission on their enrolment form the, the Nominated Supervisor or Responsible Person is able to administer Panadol/Paracetamol and sign off for it if the child is in distress from feeling unwell.
- Infants under the age of 6 months should not be given Panadol/Paracetamol except under the guidance of a medical practitioner.
- The child is not allowed to return to the service until 24 hours AFTER their LAST fever and bring in a medical clearance to say they are fit to return to the service.

Serious Incident/ Injury

If the incident/ injury has required the administrations of a medical practitioner or the child has attended hospital, it will be considered a serious incident.

If the attention of a medical practitioner was sought or the child attended hospital due to the injury, trauma or illness the incident is considered a serious incident and must be notification must be made within 24 hours of the incident occurring.

To decide if an injury, trauma or illness is a 'serious incident' when the child did not attend a medical practitioner or hospital, the following should be considered:

- Was more than basic first aid needed to manage the injury, trauma or illness?
- Should medical attention have been sought for the child?
- Should the child have attended a hospital or an equivalent facility?

Serious incidents also include: (National Regulation 12)

- The death of a child.
- An incident at the service where the emergency services attended or should have attended.
- A child is missing.



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- A child has been taken from the service without the authorisations required under National Regulation
- A child is mistakenly locked in or out of the service.

If the service only becomes aware that the incident was serious afterwards, notification to the regulatory authority within 24 hours of becoming aware that the incident was serious will be made. Notification using form SI01 Notification of Serious Incident will be made. This can be accessed and uploaded via the NQA IT portal.

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. **(National Regulation 176 (2)(i)).**
- Any head injuries
- Fractures
- Burns
- Removal of appendages.
- Meningococcal infection.
- Anaphylactic reaction requiring hospitalisation.
- Witnessing violent or a frightening event.
- Epileptic seizures.
- Bronchiolitis.
- Whooping cough.
- Measles.
- Diarrhoea requiring hospitalisation.
- Asthma requiring hospitalisation.
- Sexual assault.
- Within 7 days of any circumstances arising at the Service that pose a risk to the health, safety and wellbeing of a child.

NSW Health Notifiable Diseases and Illnesses

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ("German measles")
- Measles
- Pertussis ("whooping cough")
- Tetanus

Responsibilities of the Approved Provider

- Ensure that the parent of the child is notified as soon as practicable, but no longer than 24 hours after the occurrence, if the child is involved in any incident injury, trauma or illness while the child is being educated and cared for by the education and care services.



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- The Approved Provider of the education and care service must ensure that an incident, injury, trauma and illness record is kept in accordance with this regulation (**National Regulation 183(2)(b)**).
- Ensuring that the children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (**National Regulation 161(2)(a)**).
- Ensuring that an incident report is completed and a copy forwarded to the regulatory authority as soon as is practicable but not later than 24 hours after the occurrence (**National Regulation 86**).
- Ensuring that there is a minimum of one educator with a current approved first aid qualification on the premises at all times (**National Regulation 136(1)**).
- Ensure there is permission on all enrolment forms that parents/guardians must tick whether they allow Panadol to be administered by the educators at the service should their child require it.
- Ensure that SIO1 forms are submitted for any and all serious incidents.

Responsibilities of the Nominated Supervisor

- Notifying parents/guardian immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable (**National Regulation 86**).
- Requesting the parents/guardians to make arrangements for the child or children involved in the incident or medical emergency to be collected from the service or informing parent/guardians if an ambulance has been called.
- Notifying other person/s as authorised in the child's enrolment form when the parents/guardians are not contactable.
- Must ensure ACECQA is notified of any serious incident, injury, trauma or illness through the ACECQA NQA ITS portal that have required medical treatment with 24 hours attached with relevant information and documentation (**National Regulation 86**).
- Reviewing the cause of incident, injury, trauma and illness and taking appropriate actions to remove cause if required.
- Ensure that responsible persons of the service are administering medication if necessary.
- The Nominated Supervisor will ensure a copy of this policy is available to the families and provided to parents when they enrol their child.
- Ensure first aid qualified educators are present at all times on the roster and in the Service.
- Ensure first aid kits are suitably equipped and checked on a monthly basis.
- Ensure first aid kits are easily accessible when children are present at the Service and during excursions.
- Ensure first aid, anaphylaxis management training, and asthma management training is current and updated as required.
- Ensure adults or children who are ill are excluded for the appropriate period.
- Parents are notified of any infectious diseases circulating the Service within 24 hours of detection.

Responsibilities of the Educators

- Record details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record as soon as the practical but no later than 24 hours.
- Seek further medical attention if required.
- Familiarise and be aware of any symptoms of any illness/trauma.
- Be aware of any children with allergies status and familiarise with attending days to use this knowledge when attending to any incident, injury or illness.
- Respond to children demonstrating any symptoms if the child and record appropriately. Educators will contact authorised person to inform them of the illness signs or request the collection of the child.
- Ensure that two people are present any time medication is being given to children in care and that the Nominated Supervisor or responsible person is notified before administering.



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Responsibilities of the Family

- Be informed of policies and procedures during the enrolment process regarding first aid, illness whilst at the service, exclusion practices, including immunisation status and illnesses at the service.
- Inform the service of their child's health records, such as allergies, medical conditions, health plans etc.
- Inform the service immediately if child reports injuries whilst at service and if it needed medical follow up.
- Receive access of where is policy and notification of its existence.
- Be notified of any incidents, injury, trauma, or illnesses as soon as practicable, but not later than 24 hours after the incident had occurred and to be provided with a copy of the report should you require.
- Be provided access to information on children's development, the service program, and relevant health and wellbeing resources from the service.

Record Keeping

- 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 ages 25 years **(National Regulation 183(2)(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.

Procedures

Below is a list of different procedures required in regulations of how to handle trauma, illness and injury in our service **(National Regulation 85)**.

If an educator witnesses a Trauma:

- Notify the Nominated Supervisor/Responsible Person of the trauma.
- Emergency services are to be notified.
- Nominated Supervisor is to contact the parent and notify them of the trauma.
- Child is to be given first aid appropriate to their situation.
- Remain calm and keep the child calm and relaxed until emergency services/family arrives.
- Fill out appropriate paperwork such as incident form, action taken, and first aid given.
- Notify regulatory authority within 24 hours of emergency.

The Approved Provider considers a child with teething issues or pain after surgery to be included in the service, if a medical letter provided, stating any pain medication or other controls to be administered to the child, its frequency and also the time frame of this management to occur. If a child becomes distressed and the educators cannot care for her/his needs, the Nominated Supervisor/Responsible persons will contact the parents who will be required to collect the child.

If an educator notices that a child has a non-serious injury:

- Checks child over for injury/comforts child
- Notifies Nominated Supervisor/Responsible Person
- Performs first aid appropriate to the situation
- Notifies family of the child
- Fills out appropriate documentation

Related Statutory Obligations & Considerations

Australian Children's Education & Care Quality Authority (ACECQA)	https://www.acecqa.gov.au/resources/applications
Children (Education and Care Services) National Law (NSW) No 104a	https://www.legislation.nsw.gov.au/#/view/act/2010/104a/full



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Education and Care Services National Regulations	https://www.legislation.nsw.gov.au/#/view/regulation/2011/653/full
Work Health and Safety Act 2011	

Related Telephone Numbers

- Early Childhood Education and Care Directorate - 1800 619 113
- Emergency Service - 000
- ACECQA - 1300 422 327
- Guild Insurance - 1800 810 213
- NSW Health - 1300 066 055

Amendment History

Version	Amendment	Date
Previous	Until the Adaptation of ACA policy, same name policy was in place.	May 2018

This policy will be updated to ensure compliance with all relevant legal requirements every year. Appropriate consultation of all stakeholders (including staff and families) will be conducted on a timely basis. In accordance with Regulation 172 of the *Education and Care Services National Regulation*, families of children enrolled will be notified at least 14 days and their input considered prior to any amendment of policies and procedures that have any impact on their children or family.

Date: September 2020

Version: 01/2020

Last Amended By: Julia Koti

Next Review: October 2021

Position: Approved Provider/Director

Incident, injury, trauma and illness record

Details of person completing this record

Name: Position/role:
Date and time record was made/...../..... Signature:

Child details



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Child's full name:

Date of birth:/...../..... Age: Gender : ☐ Male ☐ Female

Incident details

Incident date:/...../..... Time: am/pm Location:
Name of witness:
Witness signature: Date:/...../.....

General activity at the time of **incident/injury/trauma/illness**:

Cause of **injury/trauma**:

Circumstances surrounding any **illness**, including apparent symptoms:

Circumstances if child appeared to be **missing** or otherwise unaccounted for (incl duration, who found child etc):

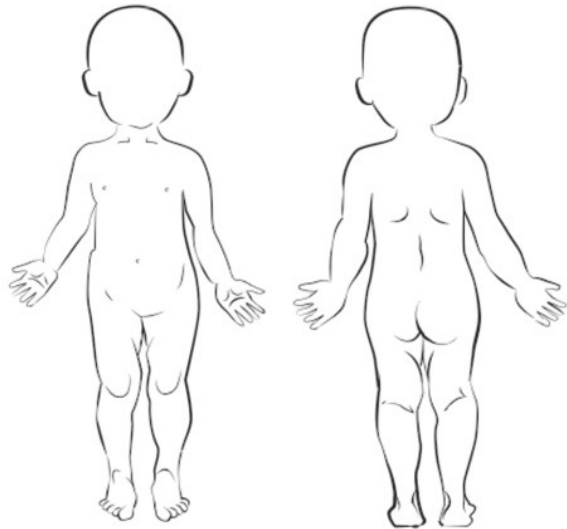
Circumstances if child appeared to have been **taken or removed** from service or was **locked in/out** of service (incl who took the child, duration):

Nature of injury/trauma/illness:

Indicate on diagram the part of body affected



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- | | |
|---|---|
| <input type="checkbox"/> Abrasion / Scrape | <input type="checkbox"/> Eye injury |
| <input type="checkbox"/> Allergic reaction (not anaphylaxis) | <input type="checkbox"/> Infectious disease (incl gastrointestinal) |
| <input type="checkbox"/> Amputation | <input type="checkbox"/> High temperature |
| <input type="checkbox"/> Anaphylaxis | <input type="checkbox"/> Ingestion / inhalation / insertion |
| <input type="checkbox"/> Asthma / respiratory | <input type="checkbox"/> Internal injury / Infection |
| <input type="checkbox"/> Bite wound | <input type="checkbox"/> Poisoning |
| <input type="checkbox"/> Bruise | <input type="checkbox"/> Rash |
| <input type="checkbox"/> Broken bone / fracture / dislocation | <input type="checkbox"/> Respiratory |
| <input type="checkbox"/> Burn / sunburn | <input type="checkbox"/> Seizure /unconscious/ convulsion |
| <input type="checkbox"/> Choking | <input type="checkbox"/> Sprain / swelling |
| <input type="checkbox"/> Concussion | <input type="checkbox"/> Stabbing / piercing |
| <input type="checkbox"/> Crush / jam | <input type="checkbox"/> Tooth |
| <input type="checkbox"/> Cut / open wound | <input type="checkbox"/> Venomous bite/sting |
| <input type="checkbox"/> Drowning (non-fatal) | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Electric shock | |

Action Taken

Details of action taken (including first aid, administration of medication etc):

.....

.....

.....

.....

Did emergency services attend?: Yes / No

Was medical attention sought from a registered practitioner / hospital?: Yes / No

If yes to either of the above, provide details:

.....

.....

.....

Have any steps been taken to prevent or minimise this type of incident in the future?:

.....

.....

.....

Notifications (including attempted notifications)

