



Wangaratta Children's Services Centre

Incident, Injury, Trauma and Illness Policy

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1. Statement and Purpose

This policy has been established to ensure clear lines of actions are identified to effectively manage an event involving a child becoming injured, ill or involved in an incident. The Education and Care Service National Regulations require approved providers to ensure their service have policies and procedures in place in the event that a child is injured, becomes ill, or an incident occurs while attending the service.

2. Policy Statement

Our Service implements risk management planning to identify any possible risks and hazards to our learning environment and practices. Where possible, we have eliminated or minimised these risks as is reasonably practicable. We are committed to minimise the spread of infectious diseases by implementing recommendations provided by the Australian Government- Department of Health and Safe Work Australia. Our Service implements procedures as stated in the Staying healthy: Preventing infectious diseases in early childhood education and care services (Fifth Edition) developed by the Australian Government National Health and Medical Research Council as part of our day-to-day operation of the Service. We are guided by explicit decisions regarding exclusion periods and notification of any infectious disease by the Australian Government- Department of Health and local Public Health Units in our jurisdiction under the Public Health Act.

Identifying Signs and Symptoms of Illness Management and Educators are not doctors and are unable to diagnose an illness or infectious disease. To ensure the symptoms are not infectious and to minimise the spread of an infection, medical advice may be required to ensure a safe and healthy environment. Recommendation from the Department of Health will be adhered to minimize risk where reasonably practicable. Children who appear unwell at the service will be closely monitored and if any symptoms described below are noticed, or the child is not well enough to participate in normal activities, parents or an emergency contact person will be contact to collect the child. A child displaying symptoms of a contagious illness or virus will be excluded from care for a minimum of 48 hours.

Symptoms indicating illness may include:

- Behaviour that is unusual for the individual child.
- High temperature or fever.
- Loose bowels
- Faeces that are grey, pale or contain blood.
- Vomiting
- Discharge from the eye or ear.
- Skin that displays rashes, blisters, spots, crusty or weeping sores. •

- Loss of appetite.
- Headaches.
- Stiff muscles or joint pain.
- Continuous scratching of scalp or skin.
- Difficulty in swallowing or complaining of a sore throat.
- Persistent prolonged or severe coughing.
- Difficulty breathing.
- A stiff neck or sensitivity to light.

As per our Infectious Disease Policy, we reserve the right to refuse a child into care if they:

- Unwell and unable to participate in normal activities or require additional attention.
- Have had a temperature/fever or vomiting in the last 48 hours.
- Have had diarrhoea in the last 48 hours.
- Have been given medication for a temperature prior to arriving at the service.
- Have a contagious or infectious disease.

Preventing the Spread of Illness

To reduce the transmission of infectious illness, our service implements effective hygiene and infection control routines and procedures. If a child is unwell or displaying symptoms of a cold or flu virus, parents are requested to keep the child away from the Service.

Infectious illnesses can be spread quickly from one person to another usually through respiratory droplets or from a child or person touching their own mouth or nose and then touching an object or surface.

Preventing strategies:

- Practising effective hygiene helps to minimise the risk of cross infection within our Service.
- Educators model good hygiene practices and remind child to cough or sneeze into their elbow or use a disposable tissue and wash their hands with soap and water after touching their mouth, eyes, or nose.
- Handwashing techniques are practised by all educators and children routinely using soap and water before and after eating and when using the toilet.

- After wiping a child's nose with a tissue, educators will dispose the tissue in a plastic-lined bin and wash their hands thoroughly with soap and water and dry using paper towel.
- All surfaces including bedding used by a child who is unwell, will be cleaned with soap and water and then disinfected.

Other Infectious Illness:

Parents will be notified of any outbreak of an infectious illness (e.g., Gastroenteritis) within the Service via a poster informing of the illness, the symptoms and exclusion periods. The poster will be placed in a prominent area in the foyer and on the room door of the infectious disease taken place. Serious Injury, Incident or Trauma In event of any child, educator, staff, volunteer, or contractor having an accident at the service, an educator who has a First Aid Certificate will attend to the person immediately. Adequate supervision will be provided to all children. Any workplace incident, injury or trauma will be investigated, and records kept. Procedures as per our Administration of First Aid Policy will be adhered to by all staff. The Approved Provider or Nominated Supervisor will notify the regulatory authority through the online NQA ITS within 24 hours of any serious incident or serious complaint at our 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.

Serious incidents include:

- The death of a child at the service or following an incident at the Service.
- Any incident involving a serious injury or trauma to a child at the service, or the child attended or should have attended a hospital e.g., broken limb, amputation, head injury requiring stitches, burns.
- Any incident involving serious illness of a child at the service where the child attended, or should have attended, a hospital e.g., severe asthma attack, seizure, or anaphylaxis.
- Any emergency where emergency services attended i.e., there was an imminent or severe risk to the health, safety, or wellbeing of a person at the service. It does not include incidents where emergency services attended as a precaution.
- A child is missing or cannot be accounted for at the service.
- A child has been taken from the service by someone not authorised to do this.
- A child is mistakenly locked in or locked out of the Service.

Incident, Injury, Trauma, and Illness Record

An Incident, Injury, Trauma, and Illness records contains details of any incident, injury, trauma, or illness that occurs while the child is being educated and cared for at the service. These records are completed via the Xplor app. If the app is not working, completed using the paper Incident, Injury, Illness and Trauma forms found on SharePoint. The record includes:

- Name and age of the child.
- Circumstance leading to the incident, injury, illness.
- Time and date the incident, injury or trauma occurred.
- Details of any illness which becomes apparent while the child is being cared for including any symptoms, time and date of the onset of the illness.
- Details of the action taken by the educator; including any medication administered, first aid provided, or medical professionals contacted.
- Details of any person who witnessed the incident, injury, or trauma.
- Names of any person the educator notified or attempted to notify and the time and date of this.
- Signature of the person making the entry, and the time and date the record was made.

Due to Confidentiality and Privacy laws, only the name of the child injured will be recorded on the Incident, Injury, Trauma, or Illness Record. Any other child/ren involved in the incident will not have their names recorded. If other children are injured or hurt, separate records will be completed for each child involved in the incident. Parents/Authorised Nominee must acknowledge the details contained in the record, sign, and date the record on arrival to collect their child. All Incident, Injury, Trauma, and Illness Records must be kept on the child's file.

Missing or Unaccounted for Child

At all times, reasonable precautions and adequate supervision is provided to ensure children are protected from harm or hazards. However, if a child appears to be missing or unaccounted for, removed from the Service premises that breaches the National Regulations or is mistakenly locked in or locked out of any part of the Service, a serious incident notification must be made to the Regulatory Authority. A child may only leave the Service in the care of a parent, an authorised nominee named in the child's enrolment record, or a person authorised by a parent or authorised nominee or because the child requires medical, hospital or ambulance care or another emergency.

Educators ensure that:

- The attendance record is regularly cross-checked to ensure all children signed into the service are accounted for.
- Children are always supervised.
- Visitors to the service are not left alone with children at any time.

Should an incident occur where child is missing from the Service, Educators and the Nominated Supervisor will:

- Attempt to locate the child immediately by conducting a thorough search of the premises.
- Cross check the attendance record to ensure the child hasn't been collected by an authorised person and signed out by another person.
- If the child is not located within a 10-minute period, emergency services will be contacted, and the Approved Provider will notify the parent/s or guardian.
- Continue to search for the missing child until emergency services arrive whilst providing supervision for other children in care.
- Provide information to police such as: Child's name, age, appearance, details of where the child was last sighted.
- The Approved Provider is responsible for notifying the Regulatory Authority of serious incident within 24 hours of the incident occurring.

Trauma

There are a range of different events that might be traumatic to a child, including accidents, injuries, serious illness, natural disasters (bush fires), assault, and threats of violence, domestic violence, neglect or abuse and war or terrorist attacks. Parental or cultural trauma can also have a traumatising effect on children. This definition firmly places 5 Incident Injury Illness and Trauma Policy trauma into a developmental. Trauma can disrupt the relationships a child has with their parents, educators and staff who care for them. It can transform children's language skills, physical and social development, and the ability to manage their emotions and behaviour.

Children who have experienced traumatic events often need help to adjust to the way they are feeling. When parents, educators and staff take the time to listen, talk, and play they may find children begin to say or show how they are feeling. Providing children with time and space lets them know you are available and care about them. It is important for educators to be patient

when dealing with a child who has experienced a traumatic event. It may take time to understand how to respond to a child's needs and new behaviours before parents, educators and staff are able to work out the best ways to support a child. It is imperative to realise that a child's behaviour may be a response to the traumatic event rather than just 'naughty' or 'difficult' behaviour.

Educators can assist children dealing with trauma by:

- Observing the behaviours and expressed feelings of a child and documenting responses that were most helpful in these situations.
- Creating a relaxation space with familiar and comforting toys and objects children can use when they are having a difficult time.
- Having quiet time such as reading a story about feeling together.
- Trying different types of play that focus on expressing feelings (e.g., Drawing, playing with play dough, dress-ups and physical games).
- Helping children understand their feelings by using reflecting statements (e.g., 'you look sad right now, I wonder if you need some help?')

Strategies to assist families, educators, and staff to cope with children's stress or trauma may include:

- Taking time to calm yourself when you have a strong emotional response. This may mean walking away from a situation for a few minutes or handing over to another educator if possible.
- Planning with a range of possibilities in case difficult situations occur.
- Remembering to find ways to look after yourself, even if it is hard to find time or you feel other things are more important.
- Using supports available to you within your relationship.
- Identifying a supportive person to talk to about your experience. This might be your family doctor or another health professional.
- Accessing support resources (eg. BeYou)

Nominated Supervisor and Educators will ensure:

- Service policies and procedures are always adhered to.

- Each child's enrolment records include authorisations by a parent for staff to seek medical treatment for the child from a registered medical practitioner, hospital, or ambulance service and if required, transportation by an ambulance service.
 - Parents/Guardians are notified as soon as practicable and no later than 24 hours of the illness, accident or trauma occurring.
 - An incident, injury, trauma and illness record is completed accurately and in a timely manner as soon after the event as possible (within 24 hours).
 - Parents are advised to keep the child home until they are feeling well, and they have not had any symptoms for at least 24-48 hours (depending upon the illness and exclusion periods.)
 - Have a current first aid certification.
 - First aid kits are suitably equipped and checked monthly.
 - Adults or children who are ill are excluded for the appropriate period.
 - If the incident, situation, or event presents imminent or severe risk to the health, safety and wellbeing of any person present at the Service, or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident.
 - Parents are notified of any infectious diseases circulating the Service within 24 hours of detection.
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- Staff and children always practice appropriate hand hygiene and cough and sneezing etiquette.
 - Appropriate cleaning practices are followed.
 - Toys and equipment are cleaned and disinfected on a regular basis or immediately if a child who is unwell has mouthed or used these toys or resources.
 - All illnesses are documented using the illness record.

Human Rights

This policy has considered and complies with the Human Rights and Responsibilities contained in the Victorian Charter of Human Rights and Responsibilities Act 2006.

Gender Impact Assessment

This policy has considered and applied Council's Gender Impact Assessment Template and satisfies the provisions established in the Gender Equality Act 2020 (Vic).

Definitions

Term	Meaning	Source
Approved first aid qualification	A qualification that includes training in the matters set out below, that relates to and is appropriate to children and has been approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Matters are likely to include Emergency life support and cardiopulmonary resuscitation; convulsions; poisoning; respiratory difficulties; management of severe bleeding; injury and basic wound care; and administration of an auto-immune adrenalin device.	National Regulations (Regulation 136)
Emergency	An incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the service. For example, a flood, fire or a situation that requires the service premises to be locked down.	Guide to the NQF
Hazard	A source of potential harm or a situation that could cause or lead to harm to people or property. Work hazards can be physical, chemical, biological, mechanical or psychological	
Injury	Any physical damage to the body caused by violence or an incident.	
Notifiable incident	Any incidents that seriously compromise the safety, health or wellbeing of children. The notification needs to be provided to the regulatory authority and also to parents within 24 hours of a serious incident. The	National Law (section 174) National Regulations (Regulation 86)

Trauma	<p>regulatory authority can be notified online through the NQA IT System.</p> <p>Is when a child feels intensely threatened by an event he or she is involved in or witnesses.</p>
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References and related policies

National Quality Standard

- 2.1.2 Effective illness and injury management and hygiene practices are promoted and implemented.
- 2.2 Each child is protected.
- 2.2.1 At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
- 2.2.2 Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
- 2.2.3 Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

National Regulations

Section/Regulation	Description
Sec.165	Offence to inadequately supervise children
Sec. 174(2)(a)	Prescribed information to be notified to Regulatory Authority
Sec.176(2)(a)	Time to notify certain information to Regulatory Authority
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 93	Administration of medication
Regulation 95	Procedure for administration of medication
Regulation 97	Emergency and evacuation procedures
Regulation 103	Premises, furniture and equipment to be safe, clean and in good repair
Regulation 104	Fencing
Regulation 117	Glass
Regulation 161	Authorisations to be kept in enrolment record
Regulation 162	Health information to be kept in enrolment record
Regulation 168	Education and care Service must have policies and procedures
Regulation 170	Policies and procedures to be followed
Regulation 171	Policies and procedures to be kept available
Regulation 177	Prescribed enrolment and other documents to be kept by approved provider
Regulation 183	Storage of records and other documents

References

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Policy and Procedure Guidelines. Incident, Injury, Trauma and Illness Guidelines.

Australian Childhood Foundation. (2010).

Australian Government Department of Education, Skills and Employment Belonging, Being and Becoming: The Early Years Learning Framework for Australia. (2009).

Australian Government Department of Health Health Beyond Blue Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

Education and Care Services National Regulations. (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Health Direct <https://www.healthdirect.gov.au/> National Health and Medical Research Council. (2012).

Staying healthy: Preventing infectious diseases in early childhood education and care services. Fifth Edition (updated 2013).

Link to Other Policies

Administration of Medication Policy

Dealing with infectious diseases

Dealing with medical condition in children

Emergency and evacuation

Delivery of children to, and collection of children from, education and care service premises policy.

Version History		
Version Number	Date of change	Reasons for change
1.0	July 2023	Creation of document