

	<h2 style="color: green;">Thornbury Kindergarten</h2> <h3>Policies</h3>
Policy Title	<i>Incident, injury, trauma and illness</i>
Quality Area	<i>2 – Children’s health and safety</i>
Category	<i>Mandatory</i>

PURPOSE

This policy will define the:

- procedures to be followed if a person 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 person 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

1. VALUES

Thornbury Kindergarten Inc. 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
- responding to the needs of an injured, ill or traumatised 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 Thornbury Kindergarten Inc.

2. SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities at Thornbury Kindergarten Inc., including during offsite excursions and activities.

3. BACKGROUND AND LEGISLATION

Background

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

An approved service must 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.

Details that must be entered in the *Incident, Injury, Trauma and Illness Record* include the following:

- the name and age of the child
- the circumstances leading to the incident, injury or trauma, or relevant circumstances surrounding the child becoming ill (including any symptoms)
- the time and date the incident occurred, the injury was received or the child was subjected to the trauma, or the apparent onset of the illness
- the action taken by the service, including any medication administered, first aid provided or medical personnel contacted
- details of any person who witnessed the incident, injury or trauma, or the apparent onset of illness
- the name of any person the service notified, or attempted to notify, of any incident, injury, trauma or illness that a child suffered while being educated and cared for by the service, and the time and date of the notifications/attempted notifications
- the name and signature of the person making an entry in the record, and the time and date that the entry was made
- signature of a parent/guardian to verify that they have been informed of the occurrence.

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.

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*.

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: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

4. DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of the PolicyWorks manual provided in each foyer.

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

First aid: The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website:

<https://www.acecqa.gov.au/qualifications/requirements/first-aid-qualifications-training>

Hazard: A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

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

Incident, Injury, Trauma and Illness Record: The Approved Provider must ensure an *Incident, Injury, Trauma and Illness Record* is kept in accordance with Regulation 87 of the *Education and Care Services National Regulations 2011*. A sample is available on the ACECQA website at:

<https://www.acecqa.gov.au/resources/applications/sample-forms-and-templates>

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

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

Medical management plan: A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCIA) action plan for anaphylaxis.

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.

Notifiable incident: An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website. This website also contains online reporting forms: www.worksafe.vic.gov.au

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be

accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DET) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

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.

5. SOURCES AND RELATED POLICIES

Sources

- ACECQA sample forms and templates: <https://www.cecqa.gov.au/resources/applications/sample-forms-and-templates>
- Building Code of Australia: <https://www.abcb.gov.au/Connect/Categories/National-Construction-Code>
- *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>
- VMIA Insurance Guide, Community Service Organisations program: www.vmia.vic.gov.au
- WorkSafe Victoria: *Guide to Incident Notification*: <http://www.worksafe.vic.gov.au/forms-and-publications/forms-and-publications/guide-to-incident-notification>
- WorkSafe Victoria: Online notification forms: <http://www.worksafe.vic.gov.au/safety-and-prevention/health-and-safety-topics/incident-notification>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Dealing with Infectious Diseases Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Emergency and Evacuation Policy*
- *Epilepsy Policy*
- *Excursions and Service Events Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Road Safety and Safe Transport Policy*

PROCEDURES

The Approved Provider and Persons with Management and Control is responsible for:

- ensuring that the premises are kept clean and in good repair
- ensuring that staff have access to medication, Incident, Injury, Trauma and Illness forms (available from ACECQA – refer to *Sources*) and WorkSafe Victoria incident report forms (refer to *Sources*)
- ensuring that the service has an occupational health and safety 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 (refer to *Occupational Health and Safety Policy*)

- ensuring that completed medication records are kept until the end of 3 years after the child's last attendance (Regulation 92, 183)
- 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 (Regulation 86)
- ensuring that Incident, Injury, Trauma and Illness Records are kept and stored securely until the child is 25 years old (Regulations 87, 183)
- ensuring that there is a minimum of one educator with a current approved first aid qualification on the premises at all times (refer to *Administration of First Aid Policy*)
- ensuring that there are an appropriate number of up-to-date, fully equipped first aid kits that are accessible at all times (refer to *Administration of First Aid Policy*)
- ensuring 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
- ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service
- ensuring that an incident report (SI01) is completed and a copy forwarded to the regional DET office as soon as is practicable but not later than 24 hours after the occurrence.

The Nominated Supervisor, Persons in Day to Day Charge, other educators and staff are responsible for:

- ensuring that volunteers and parents on duty are aware of children's medical management plans (refer to *Definitions*) and their responsibilities in the event of an incident, injury or medical emergency
- responding immediately to any incident, injury or medical emergency
- implementing individual children's medical management plans, where relevant
- notifying parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable
- 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
- notifying other person/s as authorised on the child's enrolment form when the parents/guardians are not contactable
- recording details of any incident, injury or illness in the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*) as soon as is practicable but not later than 24 hours after the occurrence
- ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency
- maintaining all enrolment and other medical records in a confidential manner (refer to *Privacy and Confidentiality Policy*)
- 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
- assisting the Approved Provider with completing weekly external and internal safety checklists (refer to Attachment 1 – Weekly Internal Safety Checklist and Weekly External Safety Checklist)
- reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required, for example, removing a nail found protruding from climbing equipment or retraining staff to adhere more closely to the service's *Hygiene Policy*
- notifying DET in writing within 24 hours of an incident involving the death of a child, or any incident, illness or trauma that requires treatment by a registered medical practitioner or admission to a hospital
- ensuring that the following contact numbers are displayed in close proximity of each telephone:
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- DET regional office
- Approved Provider
- Asthma Victoria: (03) 9326 7055 or toll free 1800 645 130
- Victorian Poisons Information Centre: 13 11 26
- local council or shire.

When there is a medical emergency, educators 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 Approved Provider of the medical emergency, incident or injury as soon as is practicable
- complete and submit an incident report to DET, the Approved Provider and the service's public liability insurer following a serious incident.

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

- ensure that the Nominated Supervisor, or person in day-to-day care of the service, contacts the parents/guardians 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 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 (refer to definition of *medical emergency*) 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.

Parents/guardians are responsible for:

- providing authorisation in their child's enrolment record for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (Regulation 161(1))
- payment of all costs incurred when an ambulance service is called to attend to their child at the service
- 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 (Regulation 162)

- ensuring that they provide the service with a current medical management plan, if applicable (Regulation 162(d))
- collecting their child as soon as possible when notified of an incident, injury or medical emergency involving their child
- 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
- being contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical attention
- signing the *Incident, Injury, Trauma and Illness Record*, thereby acknowledging that they have been made aware of the incident
- notifying the service by telephone when their child will be absent from their regular program
- 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.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider of Thornbury Kindergarten Inc. 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 parents/guardians at least 14 days before making any changes to this policy or its procedures.

ATTACHMENTS

- Attachment 1: Weekly Internal and External Safety Checklists

AUTHORISATION

This policy was adopted by the Approved Provider of Thornbury Kindergarten Inc. on 19th September 2017.

REVIEW DATE: 18TH SEPTEMBER 2020

ATTACHMENT 1

Weekly Internal and External Checklist

CHECKLIST FOR WEEKLY INSPECTION – INTERNAL MONTH: _____

Floors, aisles and exits	Date	Date	Date	Date	COMMENTS
Entrances and steps in good order					
Entrances, doorways, stairs and steps kept free of obstructions					
Handrails installed where appropriate at entrance/exit steps and ramps					
Mats provided at entrances for wiping feet					
Floor coverings in good order					
Floors level, without cracks, dips or holes					
Floors clean and not slippery					
Signs available and always placed to indicate wet floors after cleaning					
Computer and other electrical leads kept clear of aisles and walkways					
Aisles and walkways free of obstructions (boxes, rubbish bins etc.)					
Security					
Adequate locks on all external doors					
Adequate locks on all external windows					
All keys are registered and records are kept to identify people holding them at any given time					
Alarm systems installed and functional					
Emergency communication (e.g. alarm or intercom) provided where appropriate					
Security screens fitted on windows and doors					
Signs and physical barriers indicate boundaries between public and restricted areas					
Signs clearly visible to indicate security measures are in place					
Secure cupboards, lockers or drawers provided for staff and volunteers to keep personal items					
Visual access to outside of external doors (i.e. view hole, glass panel or closed-circuit camera)					
Bathrooms and toilets					
Adequate toilet facilities for men and women					
Toilets provided for people with disabilities					
Nappy change facilities available					
Bathrooms and toilet areas cleaned regularly					
Bathrooms and toilet areas well ventilated					
Liquid soap and single-use hand towels or dryers provided					
Sanitary bins provided					

Children's hands washed after going to the toilet					
Housekeeping					
All work areas kept clean and tidy					
Parents and guardians do not leave bags where children could have access to them.					
Chairs and tables are not placed near windows if possible					
Toys put away after use					
Materials and equipment stored safely					
Rubbish bins and recycled paper bins emptied regularly					
Staff are provided with protective equipment (e.g. disposable gloves) for cleaning tasks					
Procedures in place to ensure spills and breakages are cleaned up immediately					
Fish tanks and other pet enclosures are cleaned out regularly					
Toys and surfaces in play area washed regularly					
Stairs and landings					
Lighting adequate.					
Good visual contact between steps					
Slip-resistant strips on step edges					
Handrails installed and at appropriate height					
Adequate foot space on each step					
Lighting and indoor climate					
Adjustable blinds provided to stop glare and shadows across work surfaces					
Lighting in all indoor work areas is sufficient and suitable for work performed					
Light switches are accessible					
Task lighting (e.g. desk lamps) provided for close or detailed work					
Kitchens and lunchrooms					
Suitable kitchen and lunchroom facilities provided					
Food stored appropriately and refrigerated where required					
Cooking facilities are kept clean and in good working order					
Work benches and appliances are kept clean, and the fridge is cleaned out regularly					
Knives and other sharp implements are kept out of children's reach					
Staff and visitors don't have hot drinks around children					
Staff trained in infection control procedures (including food hygiene and hand washing)					

Heavy items and appliances (e.g. toaster, kettle) can't be knocked off the bench or pulled down by children					
Children aren't allowed in the kitchen without supervision					
Exhaust fans above cooking units functional and clean					
Electrical equipment in good condition and leads checked regularly					
Floors kept free of water and grease, and anti-slip floor surfaces provided					
Children's hands washed before and after eating					

CHECKLIST FOR WEEKLY INSPECTION – EXTERNAL

Part 1 – External	Yes	No	Comments
Vehicle parking area and building perimeter			
Entrances and exits are clearly marked			
Adequate lighting throughout parking areas is installed and functioning			
Surface of parking area and driveways is free from pot-holes, cracks and other tripping hazards			
Drainage grates are not blocked			
Traffic and speed restriction signs are clearly visible			
There are signs indicating intersections and pedestrian areas (e.g. crossings)			
Adequate disabled and emergency services parking spaces provided and appropriately designated			
Assembly area for emergency evacuations is accessible and clearly marked			

Part 2 – External	Yes	No	Comments
Boundaries and access points			
Walls, gates and fences in good order without gaps or protrusions and do not have footholds for climbing			
Signs clearly displaying to indicate security arrangements in place			
Pathways are free of raised curbs, pot-holes, tree branches and other hazards			
Anti-slip surfaces provided where necessary, and moss, fallen leaves etc. cleared regularly			
Steps and changes of level are clearly defined and indicated			

Childproof locks fitted to gates where needed			
Part 3 – External	Yes	No	Comments
Children’s play equipment			
Impact-absorbing material under all equipment where fall height could exceed 50cm			
Fall zone free from objects and extends at least 2.5m beyond perimeter of equipment			
Equipment has no protruding bolts, nails or splinters			
All equipment is checked regularly to ensure it is safe and in good repair			

Sandpits are clean, and any rubbish and dangerous objects, such as glass, has been removed and are raked prior to being re-covered			
Sun protection			
Adequate sun protection provided			
Sunscreen provided for children and staff			
Hats are worn by children and staff when outside in the sun			

Part 4 – External	Yes	No	Comments
Storage			
Adequate storage provided			
Storage areas kept tidy			
Shelving in good order			
Storage areas locked and kept free of obstructions and rubbish			
In the shed, equipment is stored between shoulder and knee level if possible			
All chemicals are locked away and a Safety Data Sheet (SDS) has been supplied for each hazardous substance			
Maintenance			
Gardens maintained – debris and dead, loose or overhanging branches are removed and grass is cut			
Gardens and grounds are free of sharp objects (glass, metal, wood, needles etc.)			
Trolley or wheelbarrow available to move heavy or unstable loads (e.g. play equipment or bags of mulch or fertiliser)			
If any building, renovation or demolition is being carried out, qualified professionals have been consulted to determine there is no asbestos present			