



Incident, Injury, Trauma and Illness Procedures

Procedure Number: G-1-6-2008-2

Version: 5

Responsible Person: EO

Approved by EO on: 25 October 2021

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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 and other educators 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 regular hazard inspections (refer to Attachment 1 – Sample hazard identification 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:





- 000
- DET regional office
- Approved Provider Kate Madden PMC- M: 0407482315
- Asthma Victoria: (03) 9326 7055 or toll free 1800 645 130
- Victorian Poisons Information Centre: 13 11 26
- The City of Casey 03 9705 5200

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/ PMC 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 HPCH Children's Service 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: Sample hazard identification checklist

Attachment 1

Hazard identification checklist (to be completed every 3 months by a Nominated Supervisor)

Service: _____

Date: _____

Inspected by: _____

Hazard Yes No Comments

1. Floors

Surface is even and in good repair

Surface is free from tripping and slipping hazards (e.g. water & sand)



Your place



Surface is safe (e.g. not likely to become excessively slippery when wet)

2. Kitchen and work benches

Work bench space is adequate and at comfortable working height

Kitchen and work bench space is clean and free of clutter

Equipment not in use is properly stored

Lighting is satisfactory

A door or gate restricts child access to the kitchen

Ventilation fan is in good working order

Kitchen appliances are clean and in good working order

3. Emergency evacuation

Staff have knowledge of fire drills and emergency evacuation procedures

Fire drill instructions are displayed prominently in the service

Regular fire drills are conducted

Extinguishers are in place, recently serviced and clearly marked for type of fire

Exit signs are posted and clear of obstructions

Exit doors are easily opened from inside

4. Security and lighting

Security lighting is installed in the building and car park

There is good natural lighting

There is no direct or reflected glare

Light fittings are clean and in good repair

Emergency lighting is readily available and operable (e.g. torch)





5. Windows

Windows are clean, admitting plenty of daylight

Windows have no broken panes

6. Steps and landings

All surfaces are safe

There is adequate protective railing which is in good condition

7. Ladders and steps

Ladders and steps are stored in a proper place

Ladders and steps are free of defects (e.g. broken or missing rungs etc.)

They conform to Australian Standards

They are used appropriately to access equipment stored above shoulder height

8. Chemicals and hazardous substances

All chemicals are clearly labelled

All chemicals are stored in locked cupboard

Material Safety Data Sheets (MSDS) are provided for all hazardous substances

9. Storage (internal and external)

Storage is designed to minimise lifting problems

Materials are stored securely

Shelves are free of dust and rubbish

Floors are clear of rubbish or obstacles

Dangerous material or equipment is stored out of reach of children

10. Manual handling and ergonomics



Your place



Trolleys or other devices are used to move heavy objects

Heavy equipment (such as planks and trestles) is stored in a way that enables it to be lifted safely

Adult-sized chairs are provided and used for staff (to avoid sitting on children's chairs)

Workstations are set up with the chair at the correct height

Workstations are set up with phone, mouse and documents within easy reach and screen adjusted properly

Work practices avoid the need to sit or stand for long periods at a time

11. Electrical

There are guards around heaters

Equipment not in use is properly stored

Electrical equipment has been checked and tagged

Use of extension leads, double adaptors and power boards are kept to a minimum

Plugs, sockets or switches are in good repair

Leads are free of defects and fraying

Floors are free from temporary leads

There are power outlet covers in place

12. Internal environment

Hand-washing facilities and toilets are clean and in good repair

There is adequate ventilation around photocopiers and printers

13. First aid and infection control

Staff have current approved first aid qualifications and training

First aid cabinet is clearly marked and accessible only to staff

Cabinet is fully stocked and meets Australian



Your place



Standards (refer to Administration of First Aid Policy)

Disposable gloves are provided

Infection control procedures are in place

Current emergency telephone numbers are displayed

14. External areas

Fencing is secure, unscalable and of a height prescribed by the Building Code of Australia (no breaches in the fence or materials left adjacent that would assist children to scale the fence)

Child-proof locks are fitted to gates

Paving and paths have an even surface and are in good repair

Paving and path surfaces are free of slipping hazards, such as sand

Soft-fall and grass areas are free of hazards

Equipment and materials used are in good repair and free of hazards

15. Equipment

Furniture and play equipment are in good repair (no protruding bolts, nails, splinters)

Impact-absorbing material is placed under all equipment where fall height could exceed 0.5 metres

Guardrails are provided for play equipment over 1 metre

16. Sun protection

There is an adequate supply of SPF 30+ broad spectrum, water-resistant sunscreen provided for use by children and staff

Sunhats are provided for all staff required to work in the sun

There is a Sun Protection Policy in place, which requires staff and children, and others who work in the sun to use sunscreen and an appropriate sunhat

If any box is marked with a “No”, it is deemed to be unsatisfactory and must be followed up using an appropriate risk assessment and control checklist.



Your place



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Your place



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