

Incident, Injury, Trauma and Illness Policy and Appendix

Southern Montessori Early Learning Centre

Version	Last Amendment	Approved By	Date	Maintained By	Next Review
2	2017	Board of Governors	Sept 2020	Governance	Sep 2023

Links Education and Care Services National Regulations 2011, National Quality Standard 2018

Regs	12	Meaning of a 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
	89	First Aid kits
	147	Medical conditions policy
	136	First Aid qualifications
	161	Authorisations to be kept in enrolment record
	162	Health information to be kept in enrolment record
	176	Time to notify certain information to a Regulatory Authority
	177	Prescribed enrolment and other documents to be kept by approved provider
	183	Storage of records and other documents

QA	2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
	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, practised and implemented.
	2.3.3	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
	3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
	7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

Incident, Injury, Trauma and Illness Policy and Appendix	Version 2
Maintained By: Governance	Page 1

Policy Statement

The Centre recognises the importance of competent First Aid knowledge in the management of injuries and illness, especially among young children. The staff are qualified in First Aid and CPR, and trained to deal with asthma and anaphylaxis. Information about children's known medical conditions is readily accessible, as is any medication required to manage those conditions. The Centre is committed to providing a safe and supportive environment in which all children, including those with known medical conditions, can participate in all activities, as far as practicable.

In the event of a serious injury or death of a child this policy is intended to: encourage staff to respond in a calm, professional and planned manner which prioritises the needs and dignity of the child and the family; minimise possible distress to other children, staff and bystanders; ensure all relevant people and authorities are advised in a timely manner and in accordance with the law; and, ensure all required documentation is completed and stored confidentially.

Strategies and Practices

- On enrolment parent/carer will be asked to complete a Preschool Student Needs Profile detailing any medical/ health issues, such as allergies, asthma, diabetes, epilepsy.
- On enrolment parent/carer will be asked to provide a Medical Management Plan from the child's doctor for any known medical conditions.
- The Centre maintains an up-to-date record of the First Aid and CPR status of all educators, together with their anaphylaxis and asthma management training, in its Staff Folder. All educators are required to have completed and have up to date qualifications in First Aid, emergency asthma and anaphylaxis management. The required number of educators with these qualifications working with children meets regulatory requirements at all times, including on excursions.
- New and relief educators will be given information about children's medical needs during the induction process.
- A First Aid cupboard is located in the room so that educators can readily access it in an emergency. It is clearly labelled, and kept out of the reach of children. A portable First Aid kit is available for excursions. The Centre maintains a First Aid – List of Items as recommended by an approved First Aid training provider. The contents of all First Aid kits are cleaned, expiry dates checked, and replenished at least once per term. The list is initialed and dated each time the First Aid contents are checked.
- CPR posters from recognised authorities are displayed in the kitchen and office area.
- Emergency telephone numbers are displayed by both telephones.
- The Centre maintains records of the name, address and telephone number of each child's parents, persons authorised by the parents to consent to medical treatment or ambulance transportation for the child, and the family doctor. Records are reviewed annually and parents are required to inform the Centre of any changes to these contact details.
- The Centre maintains Medical Management Plans for children with identified medical conditions. Each child's plan and medication is stored in their own quickly and easily accessible first aid box. Plans are updated annually or sooner if a change occurs and are strictly adhered to in any emergency. Refer to the Centre's Medical Conditions Policy.
- With parental consent, photos of children with medical conditions are displayed so that they are easily viewed by educators, whilst in order to protect the child's privacy, they are not accessible to visitors or other families.
- Completed medication records are kept until the end of 3 years after the child's last attendance. Incident, injury, trauma and illness records are kept and stored securely until the child is 25 years old.
- In the event that medication has been administered to a child in an emergency without authorisation from the parent/carer, the parent/carer and emergency services will be notified as soon as practicable.
- In the event of a child displaying early symptoms of a childhood illness, the child will be separated from other children, First Aid administered as appropriate, the child made comfortable and their condition closely monitored. Parents will be notified and asked to collect their child as soon as possible to obtain medical attention.
- In the event of an injury to a child, educators are to follow the Centre's Injured Child – Management Procedure. The educator is to complete an Incident, Injury, Illness and Trauma Record. Parents are informed and asked to sign the Record (as proof of disclosure of information).
- In the event of an incident with a child relating to that child's identified medical condition, that child's Medical Management Plan must be followed explicitly. An Incident, Injury, Illness and Trauma Record is to be completed and signed by the parents.
- If a child with known allergies or anaphylaxis is in attendance, every precaution will be taken to minimise the risk of exposure, including adapting cooking experiences, inspecting for insect nests and restricting food brought into the Centre.

Incident, Injury, Trauma and Illness Policy and Appendix	Version 2
Maintained By: Governance	Page 2

- Staff are to inform the Nominated Supervisor/Principal as soon as possible if they have an accident or are injured at work. The staff member will be asked to complete a staff incident report form for the Centre’s records. If the staff member seeks medical advice, this information should be added to the records. The staff member is also required to notify the Principal of any application for Work Cover, and to keep the Principal informed of any progress.

In the Event of a Serious Incident

A serious incident is defined as:

- The death of a child while being educated and cared for at the Centre.
- Any incident involving serious injury or trauma to a child while at the Centre which required urgent medical attention from a registered medical practitioner.
- Any serious illness which developed while at the Centre for which the child attended, or ought reasonably to have attended a hospital e.g. whooping cough, broken limb, anaphylaxis reaction.
- Any incident where the attendance of emergency services at the Centre was sought, or ought reasonably to have been sought.
- Any circumstance where a child being educated and cared for at the Centre appears to be missing or cannot be accounted for, or appears to have been taken, or removed from the premises in a manner that contravenes Delivery and Collection Policy and or is mistakenly locked in or locked out of the premises or any part of the premises.

Strategies and Practices

In the event of a serious incident occurring such as child who is not breathing being found in the Centre:

- The educator finding the child will strictly follow the Non-Responsive Child/Person - Procedure.
- The Nominated Supervisor/Principal/Administration Officer will call the parents of the child, calmly advise that the child has been taken to hospital by ambulance, and arrange to meet them at the hospital.
- The Nominated Supervisor/Principal – or an educator delegated – will accompany the child in the ambulance and remain with the child until the parent(s) arrive.
- Medical staff will advise parents of the child’s condition. In the event of a death, educators may not give this information to parents because only a medical professional can pronounce a death.
- If the child has been transported via ambulance to hospital, the immediate Centre environment is not to be cleaned or otherwise disturbed until the Principal or Nominated Supervisor gives the clearance. The police and other relevant authorities may need to undertake a detailed investigation.
- The Principal will notify the Approved Provider of any death or serious injury. Either the Approved Provider, Principal or ELC Director will notify the Regulatory Authority as soon as practicable but within 24 hours of the serious incident and submit the Reporting of Serious Injury or Death Form.
- If death has been pronounced, the Principal will notify the police of a death in the Centre, and follow police instructions. The Principal will also notify Workplace Health and Safety, as well as the Centre’s insurance company.
- The Approved Provider or, if delegated, the Principal are the only persons to comment on the incident. No other educator is to provide information about the incident to the family concerned, to other families, or to the media. In addition, no educator is to make public comment or admit liability for the incident.
- The Centre’s Incident, Injury, Trauma and Illness Record will be completed as soon as practicable after the event. All staff directly involved will prepare and sign statements listing the sequence of events and actions taken. All documentation including copies of forms will be filed in accordance with the Centre’s Privacy and Confidentiality Policy.
- In the event of a death at the Centre, the Centre will provide educators with immediate debriefing and counselling from a suitably qualified professional and offer support to families in every reasonable way.

Responsibilities of Parents

- To ensure their own contact details and those of any persons authorised by the parents to consent to medical treatment or ambulance transportation details are accurate, complete and up-to-date.
- To advise the Centre of any existing medical conditions that apply to their child and to immediately inform the Centre of any changes to their child’s Medical Management Plan.
- To supply any necessary medication and ensure it is within the expiry date.

Incident, Injury, Trauma and Illness Policy and Appendix	Version 2
Maintained By: Governance	Page 3

Links to Other Policies

- Enrolment and Orientation Policy
- Excursion Policy
- Management of Infectious Diseases Policy
- Medical Conditions Policy
- Privacy and Confidentiality Policy

Sources, Further Reading and Useful Websites

Sources

- Education and Care Services National Regulations 2011
- National Quality Standard 2018
- Early Years Learning Framework 2009
- SA Health Food Safety Program (2012).
<http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/food+safety> accessed 20 February 2017
- National Health and Medical Research Council. (2012). Staying healthy in child care: Preventing infectious diseases in child care. 5th Ed. accessed 20 February 2017
http://www.nhmrc.gov.au/_files_nhmrc/publications/attachments/ch55_staying_healthy_childcare_5th_edition_0.pdf

Further reading

- St John. Factsheets. <http://stjohn.org.au/first-aid-facts> accessed 21st August 2020

Useful websites

- Women's and Children's Hospital. Adelaide www.wch.gov.au
- Department for Education and Child Development (DECD)– www.decd.sa.gov.au/
- Workplace Health and Safety South Australia – <https://www.safework.sa.gov.au/>
- South Australian Work Cover Corporation – <http://www.rtwsa.com>

Policy Review

The Centre encourages staff and parents to be actively involved in the annual review of each of its policies and procedures. In addition, the Centre will accommodate any new legislative changes as they occur and any issues identified as part the Centre's commitment to quality improvement. The Centre consults with relevant recognised authorities as part of the annual review to ensure the policy contents are consistent with current research and contemporary views on best practice.

Document History and Version Control Table			
Version	Date Approved	Approved By	Brief Description
1	2017	Board of Governors	Creation of original document
2	Sept 2020	Board of Governors	Review ratified at Board

Incident, Injury, Trauma and Illness Policy and Appendix	Version 2
Maintained By: Governance	Page 4

Non-Responsive or Seriously Injured Child Management Procedure

In the event of an injury to a child (and similarly for an adult), educators should attend to the child at all times in a calm, reassuring manner.

- Check for DANGER to ensure your own safety and the safety of others.
- Check for RESPONSE.
- Identify injuries and assess the severity and degree of urgency.
- CALL FOR ASSISTANCE from other staff to:
 - Ensure that remaining children are safe, correctly supervised and removed from the immediate vicinity
 - Call 000 for an ambulance
 - Alert the Nominated Supervisor/Principal or Administration Officer that an ambulance has been called or to request assistance to call 000 for an ambulance
 - Contact the parents of the child. (Times of attempted and successful phone calls to parents are documented).
- Administer First Aid, or immediately commence CPR (see below) if appropriate, and continue until an ambulance arrives.
- If child is unresponsive, CHECK AIRWAYS
 - Breathing – place child in recovery position
 - Not Breathing – check airways. Place in recovery position to remove any foreign object. If child starts breathing after object is removed, maintain recovery position until professional help arrives. If no breathing commence CPR.

When calling an ambulance, be prepared to provide the 000 operator with the following information:

- Ambulance required, and level of urgency
- Centre name, address and telephone number (posted beside the Centre telephones)
- Name and age of the patient
- Brief details about the patient's condition (conscious or unconscious, bleeding severely, breathing or not, pulse, 'blue' colour)
- Details of the actions being taken (i.e. First Aid steps or CPR).

The Educator/Nominated Supervisor/Principal/Administration Officer will act in accordance with the 000 operator's advice and also:

- Inform the parents that an ambulance has been called, and give them the name and address of the hospital the child is being taken to.
- Nominate a familiar educator to travel with the child in the ambulance to the hospital and stay with the child until the child's family arrives.
- Notify the Authorised Provider.
- Coordinate the documentation of the incident.
- Notify the Regulatory Authority and submit the Critical Incident Report Form within 24 hours.

NOTE: An Incident, Injury, Illness and Trauma Report is to be completed once the situation is under control. If time permits, a copy of the Report is to accompany the child to the hospital to assist the medical team treating the child. The original copy of this Incident, Injury, Illness and Trauma Report is to be kept until the child is 25 years of age.

In the case of death of a child, all documentation is to be kept until the end of 7 years after the death.

Incident, Injury, Trauma and Illness Policy and Appendix	Version 2
Maintained By: Governance	Page 5