



Incident, Injury, Trauma and Illness Procedures

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Responsibility of:	Director	Effective Date:	01/02/2022
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1. BUSINESS NEED

Leanyer Outside School Hours Care (OSHC) is responsible for the health and safety of children in its care. Under the Education and Care Services National Regulations, policies and procedures must be in place to effectively manage any incident, injury, trauma or illness that occurs while a child is attending the service.

The purpose of these procedures is to ensure clear lines of action to minimise the likelihood of, or effectively manage, an event involving a child becoming injured, ill, or involved in an incident.

2. SCOPE

This policy applies to all children, families, carers and staff of the OSHC community.

3. PROCEDURES

3.1 Preventing incidents, trauma, injury and the spread of illness

Leanyer OSHC aims to reduce the likelihood of incidents, illness, accidents and trauma by implementing risk management, effective hygiene practices and ongoing professional development of staff to enable them to respond quickly and effectively to any incident at the service.

- Risk assessments will be carried out routinely by staff to identify and correct potential risks with the physical environment, furniture and resources.
- Supervision plans and ratios will be checked regularly by the Director to ensure compliance with legislation.

Effective hygiene practices help to minimise the risk of cross infection within our service.

- Educators will model good hygiene practices and remind children 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.
- All surfaces including bedding (pillows, mat, cushion) used by any child who is unwell must be cleaned with soap and water and then disinfected.
- Staff and children must wash their hands:
 - before handling and preparing food;
 - before eating;
 - before going inside after playing outside;

- after going to the toilet;
- after handling any animal.
- Gloves must be worn when in contact with open sores, blood or other bodily substances, such as vomit or faeces. Staff members must also wear gloves when they have a cut or break in their skin.
- Surfaces must be cleaned after each activity and all surfaces must be cleaned thoroughly each day.
- Signs and posters about infection control will be displayed to reduce the spread of infection.
- Toys, dolls, dress-up clothes, cushion covers and quilts will be washed regularly.

First Aid Kits and First Aid Training

- First aid kits will be easily recognisable and readily available at the service and during excursions.
- First Aid Kits will be appropriately equipped for the size of the service.
- Staff first aid, anaphylaxis management training and asthma management training will be current and updated as required.
- First aid qualified educators will be present at all times on the roster.
- As part of induction for new staff we will advise which educators have first aid qualifications and asthma and anaphylaxis management training, and the location of First Aid Kits.

3.2 Managing incidents, injury, trauma and illness

- In the event of any child, educator, staff member, volunteer or contractor having an accident at the service, an educator who has a First Aid Certificate will attend to the person immediately.
- If the incident involves asthma or anaphylaxis, an educator with approved asthma or anaphylaxis training will attend to the person.
- The nominated supervisor and other educators will supervise and care for children in the vicinity of the incident, illness or injury.
- If required, the first aid qualified educator or nominated supervisor will notify or request another staff member to call an ambulance.
- If required, the first aid qualified educator or nominated supervisor will notify the parent or authorised nominee that a child requires emergency medical attention.
- If required, the educator or nominated supervisor will contact the child's parent or authorised nominee to collect the child from service.
- The nominated supervisor will ensure that an Illness, Accident & Trauma Record is completed in full and that the parent or authorised nominee is notified as soon as possible and within 24 hours of the incident, injury, illness or trauma.

Infectious Diseases

- Children who appear to be 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 contacted to collect the child immediately.
- A child who is displaying symptoms of a contagious illness (vomiting, diarrhoea, fever) will be moved away from the rest of the group and supervised until he/she is collected by a parent or emergency contact person. Children are required to be picked up within 30 minutes.
- Symptoms indicating illness may include:
 - behaviour that is unusual for the child;

- temperature of 38°C or higher;
 - loose bowels;
 - vomiting;
 - discharge from the eye or ear;
 - skin rashes, blisters, crusty or weeping sores;
 - loss of appetite;
 - headaches;
 - stiff muscles or joint pain;
 - difficulty in swallowing or complaining of a sore throat;
 - persistent, prolonged or severe coughing;
 - stiff neck or sensitivity to light.
- Parents will be notified of any outbreak of an infectious illness (eg: Gastroenteritis) within the service via our notice board or email.
 - Exclusion periods for illness and infectious diseases are provided to parents and families and are included in our Sick Children Policy.

Fevers

- Most fevers and the illness that causes them last only a few days. However, some fevers might be the sign of an underlying serious illness. If a child has a fever of 38°C or higher, their parent/carer must be called to collect the child immediately.
- Educators will complete an Illness, Accident & Trauma Record and note down any other symptoms that may have developed along with the fever (for example, a rash, vomiting, etc.)

Diarrhoea and Vomiting

- If a child is vomiting or has diarrhoea, their parent/carer must be called to collect the child immediately. Children are required to be picked up within 30 minutes.

Exclusion period

- The spread of certain infectious diseases can be reduced by excluding an infectious person from contact with others who are at risk of catching the infection. The Centre for Disease Control (CDC) has a list of infectious diseases that may require children or adults to stay at home and not attend Leanyer OSHC.
- The CDC specifies the minimum periods of exclusion from childcare for children or staff with, or exposed to, infectious diseases. It also specifies whether the service must notify the CDC that the illness is at the service.
- A link to the information provided by the CDC can be found at <https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/1011>.
- Information about childcare exclusions and COVID-19 can be found at <https://www.healthdirect.gov.au/coronavirus-covid-19-childcare-school-exclusions-faqs#restrictions>.

3.3 Incident, Injury, Illness Management Flowchart

	Serious Incident	Minor Incident	Illness
Assess the incident	<p>Serious incidents include:</p> <ul style="list-style-type: none"> • the death of a child • head injuries • serious injury or trauma to the child, requiring urgent medical attention; for example, a broken limb, amputation of any part of the body, a serious eye injury • severe asthma attack, seizure or anaphylaxis reaction • sexual assault • witnessing violence or a frightening event • an incident for which emergency services attended • child appears to be missing or cannot be accounted for at the service • child appears to have been taken from the service in a way that contravenes National Regulations • child is accidentally locked in or out of the premises or part of the premises. 	<p>An incident that results in an injury that is small and does not require medical attention.</p>	<p>Symptoms that may indicate illness include:</p> <ul style="list-style-type: none"> • Behaviour that is unusual for the child • A temperature of 38°C or higher • Loose bowels • Faeces that contain blood • Vomiting • Discharge from the eye or ear • Skin rashes, blisters, or crusty or weeping sores • Loss of appetite • Headaches • Stiff muscles or joint pain • Difficulty in swallowing or complaining of a sore throat • Persistent, prolonged or severe coughing • A stiff neck or sensitivity to light.
Respond to the incident	<ul style="list-style-type: none"> • Stay calm, reassure, assess the situation. • For injuries or medical incidents, an educator with current qualifications, immediately administer care and assistance to the child. • Immediately obtain emergency or medical assistance. • Immediately notify the child's parent/carer. • Ensure other children are safe and supervised according to National Regulations. 	<ul style="list-style-type: none"> • Stay calm, reassure, assess the situation • Administer first Aid, if required • Monitor the child • As soon as practical notify the nominated supervisor • As soon as practical notify the child's parent/carer • Ensure other children are safe and supervised. 	<ul style="list-style-type: none"> • Stay calm, reassure, assess the situation. • For symptoms of a contagious illness (vomiting, diarrhoea), move the child away from the rest of the group and supervise until collected by a parent or emergency contact. • <u>Note</u>: parental permission is required to administer paracetamol. • Closely monitor the child. • Contact emergency services if the child has difficulty breathing or becomes drowsy or unresponsive. • Ensure other children are safe and supervised.
Report the incident	<ul style="list-style-type: none"> • Notify QECNT through the NQA IT System within 24 hours of becoming aware of the incident. • Complete an incident, injury, trauma and illness record. • Parents must also be notified within 24 hours. 	<ul style="list-style-type: none"> • Record details of the incident in the Minor Incident Book. 	<ul style="list-style-type: none"> • Contact the child's parents or an emergency contact to collect the child immediately. • Educator to complete an Illness, Accident & Trauma record, noting all symptoms (for example, fever, a rash, vomiting, etc.). • Notify the Centre for Disease Control when a notifiable illness is at the service. • Notify parents about outbreaks of infectious illnesses.
Debrief about the incident	<ul style="list-style-type: none"> • Debrief immediately after the incident with those involved. • Debrief with the OSHC team as soon as possible. 	<ul style="list-style-type: none"> • Debrief and discuss with the OSHC team as necessary. 	<ul style="list-style-type: none"> • Debrief and discuss with the OSHC team as necessary.
Review, improve, replenish	<ul style="list-style-type: none"> • Review how the incident was handled and determine whether improvements to procedures are needed. • Replenish consumables e.g. first aid kits, asthma spray, EpiPen, etc. 	<ul style="list-style-type: none"> • Review handling of the incident and whether improvements are needed. • Replenish consumables e.g. first aid kits. 	<ul style="list-style-type: none"> • Review the handling of the incident and whether improvements are needed. • Replenish consumables e.g. first aid kits.



4. ROLES AND RESPONSIBILITIES

Approved Provider	<ul style="list-style-type: none"> • Ensure that obligations under the <i>Education and Care Services National Law</i> and <i>National Regulations</i> are met.
Director	<ul style="list-style-type: none"> • Implement the Incident, injury, trauma and illness policy and procedures. • Investigate the cause of any incident, injury or illness and take appropriate action to remove the cause if necessary. • Contact emergency services <u>first</u>, then notify parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is possible. • Notify the regulatory authority of a serious incident, online using the NQAITS - SI01 Notification of Serious Incident record. • Ensure that an enrolment record is kept, and stored in accordance with regulations, for each child which contains all the prescribed information. • Ensure each child's enrolment record includes authorisation by a parent or person named in the record, for the approved provider, nominated supervisor or educator to seek medical treatment for the child from a doctor, hospital or ambulance service and, if required, transportation by a staff member or an ambulance service. • Ensure that at least one educator, staff member or nominated supervisor who holds a current approved first aid qualification and has undertaken current approved anaphylaxis management and emergency asthma management training is in attendance at all times and immediately available in an emergency. • Ensure copies of this policy and procedures are readily accessible at the service.
Staff	<ul style="list-style-type: none"> • Record information as soon as possible, and within 24 hours after the incident, injury, trauma or illness. • Be aware of children with allergies and their attendance days, and apply this knowledge when attending to any incidents, injury, trauma or illness. • Complete an Illness, Accident & Trauma Record for incidents at the service. • Keep Illness, Accident & Trauma Records confidential and store until the child is 25 years old.
Families	<ul style="list-style-type: none"> • Provide authorisation in your child's enrolment form for the approved provider, nominated supervisor or an educator to seek medical treatment for your child from a registered medical practitioner, hospital or ambulance service and, if required, transportation by an ambulance service. • Notify the service upon enrolment of any specific health care needs of your child, including any medical conditions and allergies and any medical management plans that need to be followed. • Ensure any medical management plans at the service are kept up-to-date. • Collect your child when notified of an incident, injury, trauma or illness. • Notify the service of any infectious disease or illness that has been identified when your child has been absent from the service, that may impact the health and wellbeing of other children, educators, staff or others attending the service. • Be contactable, either directly or through emergency contacts listed on the enrolment form, in the event of an incident requiring medical attention. • Notify educators or staff if there has been a change in the condition of your child's health, or of recent accidents or incidents that may impact the child's care. • Notify educators or staff when the child is ill and will be absent from OSHC.