
		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 1 of 8

		EASTWOOD HEIGHTS OOSH POLICY		
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 1 of 7	
Written By Nominated Supervisor	Reviewed By EHOOSH Management committee	Approved By EHOOSH Management committee	Supersedes Version 1.1	Effective Date April 2021

Eastwood Heights OOSH

Incident, Injury and Trauma Policy



		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 2 of 8

Table of Contents

Table of Contents.....	2
1. POLICY STATEMENT.....	3
2. PROCEDURES.....	3
2.1 Managing a serious incident, injury or trauma.....	4
2.2 Reporting of serious incident, injury or trauma	4
2.3 Death at the Service	5
3. ROLES AND RESPONSIBILITIES	6
4. REFERENCES	7
4.1 Statutory authority.....	7
4.2 Service policies	7
4.3 National frameworks.....	7

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 3 of 8

1. POLICY STATEMENT

Eastwood Heights OOSH aims to ensure the safety and wellbeing of all staff, children and visitors attending the premises of the Service and during any excursions. In the event of an incident, injury or trauma we will make every attempt to ensure sound management of the event through clear guidelines, policies and procedures. Parents or emergency contacts will be informed immediately where the incident, injury or trauma is deemed serious.

An injury, trauma or illness will be regarded by the Service as a 'serious incident' if more than basic first aid was needed to manage the injury, trauma or illness and medical attention was sought for the child, or should have been sought, including attendance at a hospital or medical facility for further treatment. Any serious incident will be documented in accordance with the Education and Care Services National Law Act 2010 and associated Regulations.

2. PROCEDURES


- Consider the planning of the physical environment and experiences, ensuring that the spaces are safe
- Thoughtfully group children to effectively manage supervision and any potential risks to children's health and wellbeing
- Respond to children in a timely manner
- Provide reassurance and ensure children's emotional and physical wellbeing is paramount at all times
- Regularly check equipment in both indoor and outdoor areas for hazards and take the appropriate action to ensure the safety of the children when a hazard is identified
- Reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required
- Provide staff with access to appropriate up to date information, or professional development on the management of incidents
- Maintain high levels of supervision at all times
- Discuss supervision with Educators regularly

Parents are required to provide written consent for educators to seek medical attention for their child, if required, before the child starts attending the Service. This will be recorded on the Enrolment Form. Parents will be asked to supply the contact number of their preferred doctor and Medicare number if applicable. Educators and staff are also required to supply contact numbers in case of an emergency or accident involving themselves.

If a child, staff member or visitor has an accident while at the Service they will be attended to promptly by an educator who holds a first aid certificate. An injured person will be kept under adult supervision until they recover, or an authorised person takes charge of them.

Educators should always approach an injured person calmly yet remain alert for any dangers or potential hazards, calling for assistance from the RPIC. They should offer reassurance to the injured person or child and assess the situation. If deemed necessary another educator may need to ask other children or persons to move to another area, keeping in mind that the other children must always be supervised.

First aid will only be administered by qualified educators in the event of a minor incident, or to stabilise the patient until expert assistance arrives in the event of a serious incident.

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 4 of 8

If there is any doubt about the severity of the injury, it must be treated as serious. If the injury is to the child's head (even if minor) parents must be contacted and advised of the child's condition.

2.1 Managing a serious incident, injury or trauma

1. If the injury is serious, immediately seek medical attention. A qualified educator should attend the injured person and apply first aid as required while another educator calls 000.
2. If necessary The RPIC will ensure other children can be quickly organised and kept away from the injured person and in a safe, secure and supervised environment. If necessary, an emergency lockdown or stay in place procedure can be used.
3. Immediately contact the parent/guardian (or the emergency contact) regarding what has happened and the action that is being taken, including clear directions of where the child is being taken (eg hospital). There should be no delay in organising proper medical treatment if contact is not possible.
4. Stay with the injured child until suitable help arrives, or further treatment is given. Educators will try to make the child comfortable and not move them and continue talking to them. They will remain vigilant that the child's situation does not deteriorate.
5. Ensure that all blood or bodily fluids are cleaned up in a safe manner.
6. Ensure that anyone who has been in contact with any blood or bodily fluids washes their hands in warm soapy water.
7. If an ambulance is called and the child needs to be taken to hospital, and no family has arrived to accompany the child, an educator will go with the child, taking enrolment forms/medical plans with them. If there is no time to collect hard copies, soft copies will be sent to educator's phone.
8. If necessary, call for emergency relief staff or a Parent Management Committee member.
9. Complete an illness injury or trauma report form.
10. Contact the Parent Management Committee and School Principal to advise of the situation.
11. As a means of ensuring staff wellbeing , hold staff debrief after a major incident
12. Review and evaluate risk and revise risk assessments if necessary


2.2 Reporting of serious incident, injury or trauma

Accidents that result in serious injury or death to a child must be reported to:

- An ambulance service
- The police
- The parent/guardian
- The regulatory authority

All serious incidents, injury or trauma are to be reported within 24 hours of the event occurring. The child's parent or emergency contact must be notified of any accident or injury the child suffers as soon as possible, and no later than 24 hours after the event.


If it becomes apparent that an incident that was considered minor at the time was in fact serious, the Nominated Supervisor must notify the regulatory authority within 24 hours of becoming aware that the incident was serious.

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 5 of 8

2.3 Death at the Service


Staff at the Service must be prepared to handle all incidents in a professional and sensitive manner, no matter how tragic. In the event of the death of a child or a staff member, all educators and staff members will follow the guidelines set out below:

- The Service will notify the parent/guardian that a serious incident has happened and request that they attend the relevant hospital.
- Under no circumstances is an educator to advise the parent/guardian or emergency contact that a death has occurred. Only a qualified medical practitioner can declare a person dead and therefore staff should only advise parents that the injury is serious and refer them to the hospital where the child has been taken.
- The Information should be provided in a calm and extremely sensitive manner.
- All members of the EHOOSH Parent Management Committee should be informed.
- The Nominated Supervisor should contact the regulatory authority to seek advice as to the appropriate response from the Service. The school and Network of Community Activities should also be contacted to seek additional support, resources or advice.
- Wherever possible, other families at the Service should not be advised of a death until after the deceased child's parents/guardians have been informed. A 24 hour delay in releasing news of the tragedy should occur to allow educators and the Parent Management Committee to formulate a plan of action, be in a position to answer queries and engage counsellors. Educators will not discuss the incident with any person unless instructed to do so by the Committee.
- Counselling and follow-up support will be made available to all educators and families involved.

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 6 of 8

3. ROLES AND RESPONSIBILITIES

Roles	Authority/Responsibility For
Approved Provider	<ul style="list-style-type: none"> Ensuring that the premises are kept in good repair Ensuring that there is a minimum of one staff member or one Nominated Supervisor at the service with a current approved first aid qualification on the premises at all times
Nominated Supervisor	<ul style="list-style-type: none"> Ensuring that an accurate incident report is completed and a copy forwarded to the regulatory authority as soon as is practicable but not later than 24 hours after the occurrence 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 children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service Ensuring that any Incident, Injury Trauma or Illness report be stored confidentially until the child is 25 years old. 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 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. 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 Reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required Notifying families of this policies existence and providing them with access Providing access to information on children's development, the service program, and relevant health and wellbeing resources from the service
Responsible Person in charge	<ul style="list-style-type: none"> Notifying parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable 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.

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 7 of 8

	<ul style="list-style-type: none"> • Reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required • Recording details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record as soon as is practicable but not later than 24 hours after the occurrence
Educators and support staff	<ul style="list-style-type: none"> • Recording details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record as soon as is practicable but not later than 24 hours after the occurrence • Seeking further medical attention for a child if required • Being aware of the signs and symptoms of illness/trauma • Being aware of individual children’s allergies and immunisation status and use this knowledge when attending/responding to any incident, injury or illness • Responding to children showing signs of illness and begin monitoring the symptoms of the child and recording as appropriate. • Educators will contact the child’s authorised person to inform them of the illness signs, or to request the collection of the child • In response to a child registering a high temperature, follow procedures for temperatures, and complete the incident, injury, trauma and illness record as required
Families	<ul style="list-style-type: none"> • Being informed of policies and procedures upon enrolment with regards to first aid, illness whilst at the service, and exclusion practices, including immunisation status and illnesses at the service • Informing the service of their child’s requirements, and provide any relevant paperwork to the service, such as immunisation status, health plans, allergies etc.

4. REFERENCES

4.1 Statutory authority


- Education and Care Services National Law Act 2010 (Regulation 12, 85, 86, 87)
- National Quality Standard (Standard 2.1.4, 2.3.3)
- Work Health and Safety Act 2011

4.2 Service policies

- Providing a child safe environment
- Administration of First Aid Policy
- Administration and Storage of Medication Policy
- Hygiene and Infection Control Policy
- Illness and Infectious Diseases Policy

4.3 National frameworks

- ACECUA website: <http://www.acecqa.gov.au/national-quality-agenda-it-system>
- Framework for School Age Care in Australia, “My Time, Our Place” (Outcome 3), <http://files.acecqa.gov.au/files/National-Quality-Framework-Resources->

		EHPS OOSH POLICY	
POLICY NUMBER QA2/7	REVISION 1.2	TITLE Incident, Injury and Trauma Policy	PAGE Page 8 of 8

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