

## D-11 Management of Incident, Injury and Trauma

### NQS

QA. 2.1.2	Health practices and procedures.
QA. 2.2.1	Supervision.
QA. 2.2.2	Incident and emergency management.
QA. 2.2.3	Child protection.
QA. 7.1.2	Management systems.

### National Regulations

Reg. 12	Meaning of serious incident
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma, and illness
Reg. 87	Incident, injury, trauma, and illness record
Reg. 89	First aid kits
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 174	Time to notify certain circumstances to Regulatory Authority
Reg. 177	Prescribed enrolment and other documents to be kept by approved provider
Reg. 183	Storage of records and other documents

### My Time, Our Place

LO. 1	Children and young people feel safe, secure, and supported
-------	--

### Policy Statement

We will ensure the safety and well-being of staff, children and visitors, within the Centre and on excursions, through proper care and attention in the event of an incident, injury or trauma. The Centre will make every attempt to ensure sound management of the incident, injury or trauma, to prevent any worsening of the situation. Parents or emergency contacts will be informed immediately where the incident, injury or trauma is deemed serious, and all serious incidents will be reported to the relevant authorities.

### Related Policies

- Concord OSHC Policy A-4: Enrolment
- Concord OSHC Policy A-10: Acceptance and Refusal of Authorisations
- Concord OSHC Policy A-11: Maintenance of Records
- Concord OSHC Policy A-15: Role of the Management Committee
- Concord OSHC Policy C-3: Staff Orientation and Induction
- Concord OSHC Policy D-2: Hygiene

- Concord OSHC Policy D-10: First Aid
- Concord OSHC Policy D-12: Death of a Child or Staff Member
- Concord OSHC Policy D-13: Illness and Infectious Diseases
- Concord OSHC Policy D-20: Medication

## Procedure

Under regulation 161, parents are required to provide written consent for the Approved Provider, Nominated Supervisor or an educator to seek:

- medical treatment for the child from a registered medical practitioner, hospital, or ambulance service; and
- transportation of the child by an ambulance service

The above Authorisations will be obtained on enrolment. Parents will be required to supply the name and contact details of their preferred doctor as well as the child's Medicare number. These will also be recorded as part of the enrolment process.

On Employment, educators will be required to supply a contact number in case they are involved in an emergency or accident.

If a child, staff member or visitor has an accident while at the Centre, they will be attended to immediately by an educator who holds a first aid certificate.

In the case of medication being required in an emergency without prior consent of the parents/guardians, the responsible person on duty is to secure that consent from a registered medical practitioner.

Anyone injured will be kept under adult supervision until they recover, or an authorised person takes charge of them.

To prevent a reoccurrence of a serious incident a root cause analysis will be undertaken. The outcome of the root cause analysis may require revision of policies and procedures and codes of conduct to reduce the opportunity of the incident happening again.

### **Meaning of *serious incident*:**

For the purposes of section 174(5) of the Law, the following are prescribed as serious incidents:

- the death of a child
  - while being educated and cared for by an education and care service; or
  - following an incident while being educated and cared for by an education and care service.
- any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an education and care service:

- which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
- for which the child attended, or ought reasonably to have attended, a hospital;  
**Examples** Whooping cough, broken limb, anaphylaxis reaction.
- any incident where the attendance of emergency services at the education and care service premises was sought, or ought reasonably to have been sought.
- any circumstance where a child being educated and cared for by an education and care service:
  - appears to be missing or cannot be accounted for; or
  - appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or
  - is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

**In the case of a minor incident, the first aid attendant will:**

- Assess the injury
- Attend to the injured person and apply first aid as required
- Ensure that disposable gloves are used with any contact with blood or bodily fluids as per the D-2: Hygiene Policy, and D-13: Illness and Infectious Diseases Policy
- Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner (see D-13: Illness and Infectious Diseases Policy)
- Ensure that anyone who has come in contact with any blood or fluids be attended to as per guidelines in the D-13: Illness and Infectious Diseases Policy
- Record the incident in the Minor Incident/Injury/Trauma folder, indicating name, date, time, nature of injury, how it occurred, treatment given and by whom, to be signed by educator reporting and witness.
- If the minor incident involves an injury to the head, parents should be contacted immediately to inform them of the incident. If a major head injury occurs, a concussion is suspected, or a child's demeanor or condition worsens shortly after a head injury an ambulance will be called and the parents informed.
- A parent must be informed within 24 hours of the incident, injury or trauma and must sign the appropriate form to confirm this has been communicated.

**In the case of a major incident requiring more than basic first aid, the first aid attendant will:**

- Assess the injury and decide whether the child needs to be attended to by local doctor or whether an ambulance should be called and advise the responsible person or Nominated Supervisor of their decision.
- If the child's injury is serious, the first priority is to get immediate medical attention. The ambulance service will be called immediately. Parents/guardians should be notified also, however there will be no delay in organising proper medical treatment. Another educator can keep trying to contact the parents/guardians in the meantime if available.
- Attend to the injured person and apply first aid as required.

- Educators will ensure that disposable gloves are used with any contact with blood or bodily fluids as per the D-2: hygiene policy, and Illness and D-13: Infectious Diseases Policy.
- An educator will stay with the child until suitable help arrives, or further treatment is taken.
- The educator will try to make the child comfortable and reassure them that they will be alright.
- If an ambulance is called and the child is taken to hospital, an educator will accompany the child and take the child's medical records with them if the parents / guardians have not yet arrived.
- Complete a Centre Major Incident/Injury/Trauma report and a report for the Regulatory Authority.

**The responsible person on duty will:**

- Notify the parents or emergency contact person immediately regarding what happened and advise them that action is being taken. Every effort will be made not to panic the parents.
- Ensure that all blood or bodily fluids are cleaned up in a safe manner.
- Ensure that anyone who has come in contact with any blood or fluids is treated as per the D-13: Illness and Infectious Diseases Policy.
- Try to reassure the other children and keep them calm, keeping them away from the injured child.

**Incidents which result in serious injury to a child (including death) must be reported to:**

- Parents/Guardian
- NSW ambulance service
- The police
- Regulatory Authority
- The Management Committee

The Centre will notify the parent/guardian that a serious incident has happened and advise them to contact the relevant medical agency.

Only a qualified medical practitioner can declare a person dead and therefore Centre staff should ensure the parents are only advised that the injury is serious and refer them to the medical agency (i.e., Hospital) where the child has been taken. This information should be provided in a calm and extremely sensitive manner.

The site of the incident should not be cleared, or any blood or fluids cleaned up until after approval from the Police.

All other children should be removed from the scene and, if necessary, parents contacted for early collection of children. The children should be reassured and notified only that a serious incident has occurred.

## **Reporting of Serious Incident, Injury and Trauma**

Any serious incident, injury or trauma (including death) will be recorded within 24 hours of the event occurring. The child's parent/guardian must be notified of any incident that has occurred to the child as soon as possible and no later than 24 hours after the event.

The Nominated Supervisor is responsible for ensuring that in the event of a serious incident, the Regulatory Authority is advised, as well as the Approved Provider (Management Committee).

The form for notifying the Regulatory Authority of a serious incident is to be found on the ACECQA website:

<https://www.acecqa.gov.au/resources/national-quality-agenda-it-system>

It may not become apparent that an incident was serious until sometime after the incident occurred. If this is the case, the Nominated Supervisor must notify the Regulatory Authority within 24 hours of becoming aware that the incident was serious.

Records of an incident must be kept in a safe and secure location and for the relevant period of time, in accordance with the National Regulations:

- If the record relates to an incident, illness, injury, or trauma suffered by a child while under the care of the service, it must be kept until the child is aged 25 years
- If the record relates to an incident, illness, injury, or trauma suffered by a child that may have occurred following an incident while under the care of the service, it must be kept until the child is aged 25 years
- If the record relates to the death of a child while under the care of the service, or that may have occurred as a result of an incident while being cared for, it must be kept until the end of 7 years after the death

## **Regulatory Authority for NSW**

Educators will ensure that the NSW Regulatory Authority (see below) is notified of the child's death or of a serious injury / incident / trauma as soon as practicable and within 24 hours, or as soon as the educator hears of the death. This is a requirement under the Education and Care Services Regulations (2011)

NSW Early Childhood Education and Care Directorate  
Department of Education and Communities

Locked Bag 5107  
PARRAMATTA NSW 2124  
Phone: 1800 619 113 (toll free)  
Fax: (02) 8633 1810

Website: <http://www.dec.nsw.gov.au/ecec>

E-mail: [ececd@det.nsw.edu.au](mailto:ececd@det.nsw.edu.au)

## Sources

- Education and Care Services National Regulations 2011
- National Quality Standard
- Work, Health and Safety Act 2011
- Privacy Act 1988
- Children (Education and Care Services National Law Application) Act 2010
- First Aid Manual
- NSW Office of the Children's Guardian

Endorsed: 24/09/2024

Review date: 24/09/2026