

# Intereach Children's Services Incident, Injury, Trauma and Illness Procedure



Including Administration of First Aid

<b>Applies to</b>	Intereach Family Day Care (FDC) and Intereach Out of School Hours (OOSH)				
<b>Policy</b>	NQS Two: Children's Health and Safety Policy				
<b>Version</b>	2.0	<b>Date approved</b>	30/8/2021	<b>Next review date</b>	30/8/2024

## 1. Objective

Intereach as the Approved Provider considers the health, safety, and wellbeing of all children as paramount and recognises that most incidents of injury, trauma and illnesses are preventable with implementation of simple preventative strategies to reduce the likelihood of such incidents. The service staff and educators will plan for and respond effectively to illness, medical and dental emergencies. The service will make every attempt to ensure sound management of the injury to prevent any worsening of the situation.

## 2. Responsibilities

It is the responsibility of the Nominated Supervisor to ensure:

- the incident, injury, trauma and illness procedure is implemented;
- relevant educators have a current approved First Aid (including CPR), Anaphylaxis and Emergency Asthma Management training and qualifications as described by the National Regulations;
- emergency evacuation scenarios are regularly rehearsed as per Emergency and Evacuation Procedure and notifications are made in accordance with this procedure;
- support the educators and staff at the scene of an incident/injury/trauma/illness; and,
- regular reviews of incidents, injury, trauma, and illnesses will be undertaken to inform ongoing review of procedures.

It is the responsibility of Intereach educators and staff to:

- take all precautions to always reduce the incidence of accidents and injuries;
- be aware of Children with allergies and their attendance days and apply that knowledge when attending to incidents, injury, trauma and illness;
- complete and record daily environment checks to ensure all hazards are eliminated or minimised both indoors and outdoors;
- administer first aid and respond to incidents/injury/trauma and illness in accordance with this procedure and qualification;
- ensure easy access to first aid kits; and current contact numbers of parents/guardians and emergency contacts at all times;
- ensure emergency procedures (including CPR guides) and current relevant emergency telephone numbers – 000 (ambulance, police, fire brigade), hospital, Poison Information Centre and Service after-hours contact details are displayed and available;
- maintain confidentiality in handling all records relating incident, injury, trauma and illness and securely store the records until the child is 25 years old; and,
- participate in trainings related to this procedure.

### **3. Procedure**

#### **3.1. In the event of an Injury/Trauma/Illness of a Child**

Intereach educators and staff will:

- follow emergency guidelines DRSABCD as per first aid training;
- use Personal Protection Equipment (PPE) when dealing with blood and bodily fluids;
- attend to the affected child, where no injury is visible a thorough check of the child will be conducted and first aid applied as required;
- assess the injury/trauma/illness, seek further medical attention if required;
- inform the Nominated Supervisor of a serious incident and their decision;
- ensure the parent/guardian of the affected child is notified;
- remain with the affected child while maintaining supervision of all children in care;
- make the child comfortable and reassure them;
- if an ambulance is called and the child is taken to hospital, a staff member or educator may accompany the child if staff to child ratio can be maintained. The child's records are to be taken to the hospital with the child;
- under no circumstances, transport a child to seek emergency treatment for an incident or illness. This includes an incident involving their own child while working as an educator;
- unlock the front door to enable access by ambulance, staff or medical personnel in the event of a medical emergency where CPR is required, thus enabling the educator to continue first aid uninterrupted;
- if necessary, organise collection by parents of other children at the service; and,
- complete an Incident, Injury, Trauma, and Illness form each time a child is administered with an emergency medication (eg, Epi Pen, Ventolin) during care by clearly identifying.
  - details of medication administered;
  - details on how the medication was administered (e.g., how many puffs); and,
  - the date and time the medication was administered.

#### **3.2. Notifications**

Intereach educators and staff will:

- notify a parent/guardian or emergency contact of the child of the incident/injury/trauma/illness and the treatment or services arranged for the care of the child, including any medication required;
- notify parent/guardian of any head and neck injuries as soon as it is practical; and,
- complete an Incident Report Form as soon as practicable, but no later than 24 hours after the incident, injury, trauma, or onset of illness obtaining parent signature. FDC educators will forward a copy of all reports to the Nominated Supervisor.

The Nominated Supervisor will:

- report any incident/injury/trauma/illness that constitutes a 'serious incident' (refer to Notification of Serious Incidents Procedure) to the:
  - General Manager and CEO immediately; and,
  - Regulatory Authority via the National Quality Agenda (NQA) IT System within 24-hours.

### **3.3. Requirements of Parents/Guardians**

Parents/guardians are required to:

- provide authorisation in the child's enrolment for appropriate medical treatment, dental or hospital or ambulance and, if required transportation by an ambulance service. Enrolment will be denied if consent is not provided;
- notify the service on enrolment of any specific health care needs, including medical conditions and allergies and any medical management plans that need to be followed;
- ensure up to date medical management plans are maintained at the service;
- complete the Medical Risk Minimisation Plan in collaboration with educators or staff when their child has a diagnosed medical condition that requires the administration of medication to the child;
- supply the contact number of their preferred doctor and dentist and Medicare number if available with the expiry date;
- supply contact information for those authorised to act in the event that a parent/guardian cannot be contacted;
- be contactable, either directly or through emergency contacts listed on the child's enrolment, in the event of an incident requiring immediate notification;
- pay for any costs associated with an ambulance call-out; and,
- notify educators or staff if there had been a change in the health condition of the child or any recent accidents or incidents that may impact the child's care.

### **3.4. First Aid**

#### **3.4.1. Kits**

- A First Aid kit is suitably equipped and maintained in accordance with Appendix A, easily recognizable and readily assessable at the service and on each outing.

#### **3.4.2. Training**

- Intereach educators and staff to:
  - complete approved First Aid, Anaphylaxis and Emergency Asthma Management training and qualifications as described by the National Regulations; and,
  - renew and update qualifications as required.
- FDC educators are required to complete first aid, asthma, and anaphylaxis training at their own cost.
- OOSH Responsible Person and Nominated Supervisors as part of their conditions of employment are paid to undertake and maintain first aid, asthma, and anaphylaxis qualifications. OOSH does not pay for casual educators to complete First Aid, asthma, and anaphylaxis training as it is not a requirement for casual educators to undertake this training to acquire this qualification.

#### **3.4.3. Review of procedure**

In consultation with educators and other key staff, families, and other stakeholders the effectiveness of this procedure will be reviewed every three years or earlier if there is a change in relevant legislation

4. Context	
<b>4.1. Standards or other external requirements</b>	<p>Australian Children's Education and Care Quality Authority (2017), <i>National Quality Standards</i></p> <p>Australian Children's Education and Care Quality Authority (2017), <i>Guide to the National Quality Framework</i></p> <p>Department of Education, Employment and Workplace Relations, <i>Childcare Service Handbook 2017-2018</i></p> <p>Early Childhood Australia (2016). <i>Code of Ethics</i></p> <p>Australian Children's Education and Care Quality Authority (ACECQA) – <a href="http://www.acecqa.gov.au/first-aid-qualifications-and-training">www.acecqa.gov.au/first-aid-qualifications-and-training</a></p> <p>Community Early Learning Australia, Accessed January 2018, Sample policy 'Administration of First Aid'</p>
<b>4.2. Legislation or other requirements</b>	<p>Education and Care Services National Regulations consolidated 2017</p> <p>Education and Care Services National Law Act 2010</p>
<b>4.3. Internal Documentation</b>	<p>Emergency and Evacuation Procedure</p> <p>Dealing with Medical Condition Procedure</p> <p>Notification of Serious Incidents Procedure</p> <p>Incident, Injury, Trauma, and Illness Form (Hardcopy Book)</p> <p>Medical Management Plan</p> <p>Medical Risk Minimisation Plan</p> <p>Medication Form (FDC)</p> <p>Medication Administration Form (OOSH)</p> <p>Benefit Risk Assessment Plan – Transport, Excursion and Regular Outings</p> <p>Excursion and Transportation Authorisation</p> <p>Authorisation for Transport and Regular Outings</p> <p>Annual Home Safety Assessment (FDC)</p> <p>Daily Hazard Identification Checklist (OOSH)</p> <p>Daily Internal and External Environment Audit (OOSH)</p>

5. Document control			
Version	Date approved	Approved by	Next review date
1.0	02/12/2019	R.Phillips - Acting Senior Manager, Children and Family Services	02/12/2022
2.0	30/08/2021	Michelle Tai – General Manager Operations	30/8/202

## Appendix A – First Aid Checklist

(FDC educators do not necessarily conduct a check, however, use the checklist as a reference for the content)

Item	Quantity
Instructions for providing first aid – including Cardio-Pulmonary Resuscitation (CPR) flow chart	1
Notebook and pen	1
Resuscitation face mask or face shield	1
Disposable gloves	5 pairs
Gauze pieces 7.5 x 7.5 cm, sterile (3 per pack)	4 packs
Saline (15 ml)	6
Wound cleaning wipe	10
Adhesive dressing strips – plastic or fabric (packet of 50 – eg. bandaids)	1
Tweezers/forceps	1
Wound dressing/pad	2
Crepe bandage 10 cm (for serious bleeding and pressure application)	2
Scissors	1
Non-stretch, hypoallergenic adhesive tape – 2.5 cm wide roll	1
Safety pins (packet of 6)	1
Plastic bags - clip seal	1
Triangular bandage (calico or cotton minimum width 90 cm)	1
Emergency rescue blanket (for shock or hypothermia)	1
Eye pad (single use)	1
Instant hot/cold pack (e.g. for treatment of soft tissue injuries and some stings)	1
Asthma first aid kit – FDC ( if child with asthma is enrolled)	1

In addition, OOSH First Aid Kit will include the following	Quantity
Purse Tissues	1 pack
Non adhesive dressing (e.g Melolin) 05 x 05 cm	2
Non adhesive dressing (e.g Melolin) 10 x 10 cm	2
Splinter Probes – disposable x 2 (per pack)	2 packs
Steri Strips	3 packs
Evacuation walking rope	1
Blue or blue/grey reliever medication such as Airomir, Asmol, or Ventolin	1
Small volume plastic spacer	1
Water and disposable cups – (excursion pack)	20
Combine dressing 10 cm x 22 cm	2
Amputated body parts bag (Virtex)	1
Epi-Pen (If a child enrolled has a need to use this)	1