

Incident, Injury, Trauma and Illness Procedures

Policy/Procedure Number: **QA2 - 5**

Policy/Procedure Requirement: National Quality Standards 2 & 7; Regulations 85, 86, 87 & 168

Policy Statement

The health and wellbeing of children must be safeguarded by managing health and safety risks and seeking appropriate medical treatment in the event of an illness, accident or emergency. This and other related policies and procedures are put in place by the Service to comply with Regulation 85.

Rationale

In the event of an accident or an emergency, the Educator has a 'duty of care' to take immediate and appropriate action for the health, safety and wellbeing of children. This policy describes the requirements and procedures to ensure Educators, Coordinators, Nominated Supervisor and volunteers can act effectively to prevent, manage and report incidents, injury, trauma or illness affecting children.

Strategies and Practices

Key Requirements (Actions/ Documents)

- Educators, Coordinators, Nominated Supervisor and volunteers must follow this policy when a child is injured, becomes ill or suffers trauma
- Educator promptly notify the Coordinator and family in the event of a medical emergency, serious incident, injury, illness or trauma relating to their child as soon as possible (must be on the day of the occurrence)
- All incidents, injuries, trauma, and illnesses must be recorded on the **Incident, Injury, Trauma and Illness Record** at the time of occurrence. The Record is prepared and signed by Educator and signed by parents/ guardians and any witnesses. The record is kept and stored confidentially by the Service until the child is 25 years old (Regulation 183(2)) and in accordance with the Privacy policy and the Records management policy for:
 - an incident in relation to a child
 - an injury received by a child
 - a trauma to which a child has been subjected
- Nominated Supervisor follows up with the family to check on the wellbeing of the child
- Where medication, medical or dental treatment is obtained, the parents/ guardians are notified as soon as practicable and within 24 hours, and are provided with details of the illness and subsequent treatment administered to the child
- All serious incidents and medical emergencies are notified to the Regulatory Authority through the NQAITS **within 24 hours**

Medical Emergencies

Medical emergencies may include **asthma, anaphylaxis or diabetes** related emergencies, as well as **fractures, choking and seizures**.

In a **medical emergency**, Educators and/or any staff present (e.g. Nominated Supervisor, Coordinator at playgroup, excursions) must:

- Call an ambulance on 000 if a child **appears very unwell** or has a **serious injury** that needs urgent medical attention. This includes if the child has **sustained a knock or injury to the head**
- Administer first aid as needed, and provide care and comfort to the child before their family or ambulance arrives
- Observe the symptoms of the child's illness or injury and systematically record and share this information with families (and medical professionals where required)
- Implement the child's current Medical Management Plan
- Notify families as soon as possible of any serious medical emergency, incident or injury involving their child (and requesting that the family arranges for the child to be collected and/or informing the family that an ambulance has been called)
- Ensure that the unwell child is **separated from other children**. The Educator must setup quiet play (e.g. drawing, colouring) for the other children in care, and remain with the unwell child to provide comfort until the child recovers or is collected by their family or other emergency contact person. Educator must have line of sight for the other children and provide supervision while remaining with the unwell child

Coordinator and/or the Nominated Supervisor is notified of the medical emergency, incident or injury as soon as possible. The Nominated Supervisor must contact the child's family or authorised emergency contact

Other Emergencies

Where there is an emergency due to fire, flooding, storm, structural damage, chemical spill, internal gas leak, aggressive people, intruders, bushfire, bomb threat, or explosions, the incidents are handled according to the [QA2-12 Emergency and Evacuation Policy](#).

Managing illness

Educators must not accept a child into care if the child:

- has a **contagious** illness or infectious disease
- is **unwell** and **unable** to participate in normal activities or requires additional attention
- had a **temperature** and/or has been **vomiting** in the past **24 hours**, as reported by their family:
 - notify families when a child registers a temperature **over 38°C** and request that they collect their child as soon as possible
 - complete an Incident, Injury, Trauma and Illness Record, and recording any other symptoms (for example, a rash or vomiting)
 - contact **emergency services** if the Educator has any major concerns for the health and safety of the child or if the child:
 - has trouble breathing
 - becomes drowsy or unresponsive
 - suffers a convulsion for longer than 5 minutes
- has had **diarrhoea** in the past 48 hours
- has started a course of **antibiotics** in the past 24 hours
- has been given medication for a temperature before arriving at FDC residence (e.g. Panadol)

If a child becomes unwell while in care, Educators must:

- Inform the Coordinator and Nominated Supervisor.
- Request parents/guardians to collect the child if the child is **not well enough to participate** in the program, or if the child has **diarrhoea** or **vomits** while in care
- Ensure that the Incident, Injury, Trauma and Illness Record is completed as soon as practical (on the same day)

Managing an Incident

- Depending on the nature of the incident, the Educator will refer to the Service policies on Dealing with *Medical Conditions Policy*, *Infectious Diseases*, *Immunisation and Hygiene Policy*, and *Emergency and Evacuation Policy*
- On occurrence of an incident, Educators must:
 - Ensure immediate safety of all children
 - Remove or control hazards (e.g., isolate equipment, cordon off unsafe area).
 - Provide first aid as trained and appropriate
 - Contact **000 emergency services** if the incident is serious or life-threatening
 - Notify the Coordinator as soon as practicable
 - Follow Service emergency and evacuation procedures (e.g. evacuation, lockout, lockdown) if required
 - Refer to the child's **Medical Management Plan** where relevant (e.g., ASCIA anaphylaxis plan)

Managing an Injury

- Educators must:
 - Administer first aid promptly
 - Monitor and record the child's condition
 - Call the ambulance services (000) if urgent medical attention is required
 - Notify family immediately after ensuring the child's safety
 - Complete an Incident, Injury, Trauma and Illness Record at the time of the incident
 - Ensure hazards that caused or contributed to the injury are removed or controlled

Responding to Trauma

- Trauma may be caused by accidents, injury, abuse, neglect, or witnessing distressing events
- Broader events such as bush fires, flood, drought, pandemics as well as specific events in the lives of individual children could result in short and/or long-term trauma
- Signs for trauma in children may include:
 - Changes in behaviour, such as increased clinginess, aggression, nightmares, or regression in basic skills like toilet training
 - Emotional shifts like withdrawal, constant worry, or unusual fearfulness
 - Physical reactions such as headaches or upset stomachs
 - Re-enacting the trauma in their play or drawings, or have difficulty concentrating

- If trauma is identified, Educators must support children by:
 - Remaining calm and positive
 - Providing immediate reassurance and emotional support
 - Maintaining supportive routines
 - Listening to them sharing their feelings
 - Talking with them about the event, if appropriate
 - Informing Coordinators and families promptly
 - Documenting the event and the child's response
 - Referring families to professional trauma support services if required

Identifying Seriousness of Incident, Injury, Trauma or Illness

Educators will use the following to assess the seriousness of the incident, injury, trauma or illness:

- A **serious incident**:
 - Death of a child
 - A serious **injury** or **trauma** - urgent medical attention is required from a medical practitioner, or a hospital (e.g. broken limb, concussion)
 - A serious **illness** - a child has breathing difficulties, persistent pain, uncontrolled bleeding, seizures, or high fever ($>38^{\circ}\text{C}$) or become unconscious, that requires urgent medical attention in a hospital (e.g. severe asthma attack, seizure or anaphylaxis reaction)
 - An **emergency** for which emergency services attended
 - A **circumstance** where a child appears to be **missing** or **cannot be accounted for**; or is taken or removed from the FDC residence without authorisation, or is mistakenly locked in or locked out of the FDC residence
- Where uncertain, err on the side of caution and seek emergency medical assistance (**000**)
- In the event of a **serious incident**, Educators must **immediately call an ambulance**, and notify the child's **family** and the **Coordinator** without delay
- Service must **notify all serious incidents** to the ACT Regulatory Authority via NQAITS **within 24 hours** of the incident or of becoming aware of the incident

Reference to Medical Management Plans

- Educators must always refer to the child's Medical Management Plan (e.g., ASCIA plan for anaphylaxis or asthma, seizure management plan, allergy management plan) when responding to **illnesses** or **trauma**
- Coordinators will ensure these plans are updated annually and accessible

Training and Capacity Building

- All Educators must hold current **First Aid with Asthma and Anaphylaxis qualifications** (HLTAID012)
- Service will provide training and learning opportunities for Educators, including:
 - Quarterly Educator meetings have debriefing and reflective practice sessions on real incidents to learn and strengthen practice
 - Through induction, orientation and ongoing training in preventing, managing, recording and reporting incidents, injury, trauma and illness. This includes developing and implementing **medical action plans** and **risk management strategies**, conducting daily environmental

risk assessments, and following reporting procedures for incidents and illnesses

- Identifying appropriate professional advice/ training for Educators to support children affected by trauma, if the Nominated Supervisor, in discussion with the Educators identifies the need
- Provision of information and resources:
 - National Allergy Council's Best Practice Guidelines for the Prevention and Management of Anaphylaxis in Children's Education and Care

Responsibilities of the Service:

The Service will:

- Ensure that Educators receive relevant and up-to-date training to ensure they can effectively respond to incidents, injuries, trauma and illness
- Ensure that educators take care when assessing the seriousness of an incident and if there is a need for emergency services to be contacted
- Ensure that families are to be notified of any serious incident involving their child as soon as possible
- Ensure that in the event of an incident, injury, trauma or illness, undertake a review (including a risk assessment) and take any appropriate action to remove or rectify the cause as required
- Ensure that Educators are provided with access to appropriate and up-to-date information
- Have clear steps and processes in place to ensure educators and coordinators understand and clearly communicate with each other in the event of an incident injury, trauma and illness
- Ensure that confidentiality is maintained at all times

Responsibilities of the Coordinators:

The Coordinators will:

- Support Educators with relevant forms for collecting authority and information
- Ensure risk assessments are carried out and reviewed as required
- Regularly reflect on supervision plans and ratio checks
- Periodic WHS checks of the physical environment, furniture and resources
- Be familiar with regulatory requirements in dealing with emergency situations with children
- Notify the family or emergency contacts as soon as it is possible to do so
- Have current First Aid, Asthma and Anaphylaxis qualifications (HLTAID012)
- On enrolment of a child, ensure the family has given written authorisation for an Educator or Coordinator of the Service, to seek and/or carry out emergency ambulance, medical, hospital advice or treatment if required
- Upon receiving notification of a **serious incident** involving a child attending FDC where the incident results in the child receiving medical, dental or hospital treatment, immediately notify the family and the ACT Regulatory Authority (within 24 hours)
- Upon receiving notice of a **death of a child** while being provided with care, the nominated supervisor will immediately notify the child's family, the local police, and the ACT Regulatory Authority (within 24 hours)
- Educators will call an ambulance then inform families in the case of an emergency or life-threatening situation (Ambulance coverage is beneficial to avoid full charge liability)

- **Keep accurate incident, injury, trauma and illness records** and store confidentially **until the child is 25 years old**
- Provide debriefing sessions and support to Educators who have supported a child through a **trauma**

Responsibilities of the Educators:

The Educators will:

- Have current First Aid, Asthma and Anaphylaxis qualifications (HLTAID012)
- Regularly practice emergency procedures
- Take all necessary precautions to reduce the incidence of accidents and injuries that can occur
- Respond effectively by administering first aid or seeking medical attention, should any accidents or injuries occur - e.g. burns, convulsions, fractures, cuts
- Display contact numbers of emergency services, Coordinators and families near a telephone
- Maintain an **Incident, Injury, Trauma and Illness Record** in the system or in hard copy and forward an electronic copy to the Service
- **Contact the parent or the emergency contact as listed in the enrolment documentation if the child presents with or develops any of the following signs:**
 - Ear and/or eye discharge
 - Undiagnosed rash
 - Body temperature of 38 degree Celsius or higher
 - Persistent coughing episodes with difficulty in breathing
 - Open sore with discharge
 - Vomiting and/or continuous loose bowel episodes
- **In the event of an accident, injury, trauma or illness, inform the family or emergency contact** as soon as possible so that they can take over the responsibility of their child and decide on further action if necessary
- In the event of a chipped or knocked out tooth
 - Inform the parents
 - Do not reinsert the tooth
 - Gently rinse the tooth or tooth fragments in milk to remove blood and place in clean container or wrap in cling wrap to give to the parents or dentist
 - Seek dental advice as soon as possible and ensure that the tooth or tooth fragments are taken to the dentist with the child
 - Complete an accident/injury form
- **In the event of high fever**, implement the following procedures to lower the child's fever and discomfort:
 - Remove excess clothing to cool the child down
 - Offer fluids to the child
 - Encourage the child to rest
 - Provide a cool, damp cloth for the child's forehead
 - Monitor the child for any additional symptoms
- Remains with the child who is unwell, and minimises contact with other children
- **Inform Parents/guardians of any medical attention given**, medication administered to the child and any other matter concerning the child's health that comes to the notice of the Educator

- Complete a notice of incident, injury and trauma report immediately, obtain parent signatures and forward to the Coordinators as soon as possible
- **Inform the Coordinators of any injury to a child** that requires First Aid or medical treatment
- **Inform the Coordinators of any serious incident.** In the event of such an emergency occurring outside office hours, the Educator must contact the Coordinators to inform of the incident
- **Notify the insurance company of any injury** to a child that requires medical treatment

Responsibilities of the Parents:

The Parents will:

- Ensure that they understand the responsibilities regarding the prevention, management and reporting of an incident, injury, trauma and illness, e.g. not sending their child if they are unwell
- Provide up to date medical and contact information in case of an emergency
- Provide up to date medical management plans if applicable to their child's health
- Review and update medical management plans annually
- Take responsibility of their child as a matter of urgency if contacted by the Educator to do so
- Be responsible for ambulance cover

Resources and Further Readings

- ACECQA (2023) Guide to the National Quality Framework
- ACECQA (2023) Policies and procedures guidelines: *Incident, injury, trauma and illness policy and procedure guidelines*
- ACECQA (2023) Information Sheets
- Education and Care Services National Law Act 2010 (Amended 2023)
- Education and Care Services National Regulations (Amended 2023)

Related FDC Policies, Procedures & Documents

- Administration of First Aid Policy
- Emergency & Evacuation Policy
- Medication Policy
- Enrolment and Orientation policy
- Infection Control and Immunisation Policy
- Privacy Policy
- Records Management Policy
- Parent Agreement Form
- Excursions and Regular Outings
- Acceptance & Refusal of Authorisations
- Home Safety Checklist

Last Reviewed: October 2025

Next Review: October 2026