CatholicCare
DIOCESE OF BROKEN BAY

Children's Services

Incident, Injury, Illness and Trauma

Policy

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What do we believe?

At CatholicCare Diocese of Broken Bay, we are committed to the safety and wellbeing of children and hold this at the centre of our decision making and practice. We believe in the principle of paramountcy of the safety of children. This means that the safety, wellbeing, and best interests of the child are the primary consideration in all decisions, actions, and practices. Where there is a conflict between the interests of a child and those of adults or the organisation, the child's safety and wellbeing will always come first.

We believe every child has the right to learn and grow in a safe, healthy and supportive environment, and we place the highest priority on protecting their health, safety and wellbeing. We are committed to responding promptly, professionally and compassionately to all incidents, injuries, illnesses and traumatic events, while using effective risk management, proactive supervision, timely first aid and clear communication with families to support positive outcomes. We recognise that each incident is an opportunity for reflection and continuous improvement, and we are committed to maintaining accurate records, meeting all legislative requirements, and providing care that is calm, respectful and trauma informed to support the recovery and wellbeing of children, families and educators.

What are we going to do?

To support the safety and wellbeing of children, CatholicCare Diocese of Broken Bay will take immediate and appropriate action in response to any incident, injury, illness or trauma, including administering first aid and seeking emergency medical assistance where required. We will ensure qualified educators are always available, maintain accessible first aid equipment and current emergency information, and notify parents or authorised nominees as soon as practicable.

We will accurately record and report incidents in line with legislative requirements, provide a calm and trauma informed response to support children's wellbeing, and review incidents to improve practices and reduce future risks. Educators will be supported through ongoing training, and we will work collaboratively with families and professionals to promote the health, safety and wellbeing of every child.

How will it be done?

Incident, injury, trauma and illness report

Details entered in the Incident, Injury, Trauma and Illness Record include the following:

- The name and date of birth of the child
- The circumstances leading to the incident, injury or trauma, or relevant circumstances surrounding the child becoming ill (including any symptoms);
- The time and date the incident occurred, the injury was received, the child was subjected to the trauma, or the apparent onset of the illness;
- The action taken by the service, including any medication administered, first aid provided or medical personnel contacted;
- Details of any person who witnessed the incident, injury or trauma, or the apparent onset of illness;

- The name of any person the service notified, or attempted to notify, of any incident, injury, trauma or illness that a child suffered while being educated and cared for by the service, and the time and date of the notifications/attempted notifications;
- The name and signature of the person making an entry in the record, and the time and date that the entry was made;
- Under Regulation 87(3)(e)(iii) in NSW, incident, injury, trauma and illness records must now also include **the name and signature of the person who gave or attempted to give notice of the incident** to the parent / guardian.
- Signature of a parent or guardian to verify that they have been informed of the occurrence.

All information will be included in the incident, injury, trauma and illness record as soon as is practicable, but not later than 24 hours after the incident, injury or trauma, or the onset of the illness.

Preventative strategies

- Consider the planning of the physical environment and experiences, ensuring that the spaces are safe.
- Respond to children in a timely manner. Providing reassurance and ensuring children's emotional and physical wellbeing is paramount at all times.
- Daily checklists are completed to check equipment in both indoor and outdoor areas for hazards and take appropriate action/s to ensure the safety of the children when a hazard is identified.
- Provide staff with access to appropriate up to date information, or professional development on the management of incidents, injury, trauma or illness.
- Maintain high levels of supervision at all times.
- Review supervision plans regularly.
- Review the cause of any incident, injury or illness, and take appropriate action to remove or mitigate the cause if required.
- Following an incident, supervision arrangements will be reviewed and adjusted where required to reduce the likelihood of recurrence. The service will monitor incident records to identify patterns, environmental risks, or repeated occurrences to inform improvements to practice, supervision and environment design.
- For any unusual activities, excursion or workshops a risk assessment must be completed to identify any possible risks to ensure appropriate action to mitigate any possible risks.

Minor incidents

In the case of minor incidents Educators will:

- Assess the injury.
- If there is any risk of contact with bodily fluids, i.e. blood or saliva, *Educators must use appropriate personal protection equipment (PPE) e.g. gloves.*
- Attend to the injured child and apply necessary first aid.
- If applicable, wash any contaminated areas with clean water.
- Dispose of all contaminated items used (cotton wool, gloves etc.) in a sealed plastic bag.
- Contact the parent/carer as soon as practicable, either by telephoning or speaking to them when child is collected in the afternoon, depending on the nature of the injury. Parents must be notified on the day of the incident happening. (*Note: the parent must be contacted immediately if it is a head injury, regardless of the severity*).

- Record details of the incident in the *Children's Services Incident, Injury, Trauma and Illness Record* as soon as possible, and within 24 hours of it occurring. Recording of the incident must be accurate. Provide a copy of the report to the child's parents and keep the original copy on the child's file in the office.

All original copies of records are stored confidentially and will remain with CatholicCare until the child is 25 years of age.

A *Minor Incident Register* will be kept at the Centre and contain a summary of minor incidents and injuries. This will be maintained by the Coordinator.

Major incidents

All Major Incidents must be reported within 24 hours to the NSW Early Learning Commission.

Major incidents, as specified in the regulations, are:

- The death of a child while being educated and cared for at CatholicCare Children's Services or directly as a result of an incident while being cared for at CatholicCare Children's Services (Reg 12)
- Any incident resulting in injury, illness or trauma to the child that would require urgent medical attention while being cared for at CatholicCare Children's Services, (e.g. seizure or anaphylaxis, broken limb) (Reg 12)
- Incidents where the presence of emergency services were required or requested (Reg 12)
- Incidents where the child is missing or cannot be accounted for. (Reg 12)
- Incidents where a child has been taken or removed from the centre in an unlawful manner. (Reg 12)
- Incidents where a child has accidentally been locked in or out of the premises. (Reg 12)
- Any incident where it is reasonably believed that physical and/or sexual abuse of a child has occurred or is occurring while the child is being educated and cared for by the service. (Reg 175)
- Any allegation that sexual or physical abuse of a child has occurred or is occurring while the child is being educated and cared for by the service. (Reg 175)
- Any incidents of inappropriate conduct to a child as defined in S5AA of the Children (Education and Care Services) National Law (NSW)

If any of the above happens at the service, we will:

- Refer to the *Children's Services - Administration of First Aid Policy* along with other relevant staff, attend to the child and call the relevant emergency or medical service (e.g. ambulance, fire brigade, a registered medical practitioner for first aid issues only).
- Follow the *Children's Services Illness, Injury, Trauma & Incident Flow Chart*.
- Notify and speak with the child's parent at the soonest possible opportunity, and if possible, on the day of the incident occurring. Notification must occur within 24 hours of the incident. The coordinator is to make a professional judgment as to the best way in which to do this.
- Record details of the incident in the *Children's Services Incident, Injury, Trauma and Illness Record* and complete section two of this form as soon as possible, and within 24 hours of the incident occurring. *All original copies of records are stored confidentially in the child's file and will remain with Catholic Care until the child is 25 years of age*. *Apart from records relating to child sexual abuse that has, or is alleged to have occurred, these records will be kept for at least 45 years*. A copy of the report will be provided to the child's parents.
- The Nominated supervisor / Coordinator / Director will email the Practice Manager, Practice Manager – Quality, Compliance and Business Development, the General Manager and the CCBB Safeguarding & Investigations Officer. *CS WI Escalating and Reporting Serious Incidents*

- Alternatively, the Practice Manager will inform the Children's Services General Manager, the CCBB Safeguarding & Investigations Officer and Practice Manager – Quality, Compliance and Business Development.
- The General Manager Children's Service will notify the Executive Director.
- The Nominated Supervisor with the assistance of the Practice Manager will notify the NSW Early Learning Commission within 24 hours of the incident occurring.

Note: If the incident has resulted in death, the Children's Services General Manager or their delegate will also notify the NSW Police Service immediately.

- The Children's Services General Manager or their delegate will provide a copy of the *Children's Services Incident, Injury, Trauma and Illness Record* The incident will be placed onto the incident register, to then be reviewed by the CatholicCare's Incident Coordination Committee (ICC) for incident review if determined to be 'high risk'. Please refer to the *Incident Coordination Committee (ICC) Terms of Reference*.
- The service will maintain open communication with the child's family following an incident requiring medical treatment or resulting in the child's absence from the service. Communication may occur by phone, email, or in person, depending on the circumstances. The Coordinator, Director, or Nominated Supervisor will make initial contact as soon as practicable, with ongoing follow up occurring as appropriate to monitor the child's wellbeing, provide support, and discuss their return to the service.
- The Coordinator/Director/Nominated Supervisor will follow up as soon as practicable, and no later than the day after the incident. Subsequent follow ups will be done within 48 hours if the child is to be away from the service for an extended period for example three (3) consecutive absences.

Trauma

Trauma is the emotional, psychological, and physiological impact of heightened stress that accompanies significant and life-challenging experiences and events. Trauma makes children feel helpless, overwhelmed and pushed beyond their ability to cope. It is important to be aware that even after the stressful or traumatic situation has passed, children's brains and bodies may continue to react as if the stress is continuing.

"*Trauma changes the way children understand their world, the people in it and where they belong*." [Australian Childhood Foundation 2010] *Making space for learning: Trauma informed practice in schools*).

Different events might be traumatic for a child, including accidents, injuries, serious illness, house fires, natural disasters, war, terrorist attacks, assault, and threats of violence, domestic violence, neglect or abuse. Each child will respond to events differently.

If an incident or event occurs at the service (or to one of our families), depending on the event:

- Educators are to follow the first aid action plan or the emergency evacuation/lockdown procedures.
- Details are to be recorded on the *Children's Services Incident, Injury Trauma and Illness Record*.
- The Coordinator/Director/Nominated Supervisor will inform the Practice Manager who will inform the General Manager - Children's Services.
- The Coordinator/Director/Nominated Supervisor will contact parents/families if appropriate to do so.
- Educators will provide care and comfort to children. They will identify, reduce, or eliminate any risk factors contributing to the trauma. Children will be closely observed and monitored and responded to in a compassionate, caring and calm manner.
- Children and families may access support through CatholicCare family services or other support services.

- The Australian Childhood Foundation can be accessed to provide resources for both families and Educators.
- Educators and staff may access the Employee Assistance Program (EAP).

Who is responsible?

Roles	Responsibilities
Approved Provider	• Ensuring that the premises are kept clean and in good repair. • 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 there is a minimum of one staff member or one Nominated Supervisor at the service with a current approved first aid, asthma and anaphylaxis management qualification on the premises at all times. • Ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service and transportation of the child by an ambulance service. • Where an incident meets the definition of a serious incident under the Education and Care Services National Regulations, the Approved Provider or Nominated Supervisor will notify the Regulatory Authority within the required timeframe.
Practice Manager	• Ensuring that the premises are kept clean and in good repair. • 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 there is a minimum of one staff member or one Nominated Supervisor at the service with a current approved first aid, asthma and anaphylaxis management qualification on the premises at all times. • Ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service and transportation of the child by an ambulance service. • Where an incident meets the definition of a serious incident under the Education and Care Services National Regulations, the Approved Provider or Nominated Supervisor will notify the Regulatory Authority within the required timeframe.
Nominated Supervisor	• Ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury, trauma or illness. • Maintaining all enrolment and other medical records in a confidential manner. • Regularly checking equipment in both indoor and outdoor areas for hazards, and taking appropriate action to ensure the safety of the children when a hazard is identified. • Reviewing the cause of any incident, injury, trauma or illness and taking appropriate action to remove the cause if required. • Notifying families of the existence of this policy and providing them with access to it. • Providing access to information on children's development, the service program, and relevant health and wellbeing resources from the service.

Roles	Responsibilities
	• Allowing input from parents or guardians upon the review of this policy. • Notifying parents or guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable. • Requesting the parents or 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. • Incident records may be maintained electronically, ensuring confidentiality, secure storage and accessibility for authorised persons only.
Educators	• Ensuring immediate safety of all children • Providing first aid or emergency response as required. • Comfort and reassure the child, supporting their emotional wellbeing. • 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, injury or trauma. • Being aware of individual children's allergies and immunisation status and use this knowledge when attending or 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 notify the Nominated Supervisor or Person in Day to Day Charge and contact will be made with the child's parents/guardians as soon as practicable. • In response to a child registering a high temperature, follow the procedure for high temperatures, and complete the Incident, Injury, Trauma and Illness Record as required. • Educators are expected to exercise professional judgement and respond in accordance with service policies, procedures, training and duty of care obligations.
Parents / Guardians	• 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 particular requirements, and provide any relevant paperwork to the service, such as immunisation status, health plans, allergies etc.

National Quality Standards (NQS)

Quality Area 2: Children's Health and Safety		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Safety and Protection	Management, educators and staff are aware of their roles and responsibilities regarding child safety, including the need to identify and respond to every child at risk of abuse or neglect

Education and Care Services National Law and National Regulations	
S. 2A	Paramount consideration - safety, rights and best interests of children
S. 3A	Paramount consideration
S. 165	Offence to inadequately supervise children
S. 174	Offence to fail to notify the regulatory authority
S. 167	Offence relating to protection of children from harm and hazards
12	Meaning of serious incident
77	Health, hygiene and safe food practices
84	Awareness of child protection law
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
93	Administration of medication
95	Procedure for administration of medication
97	Emergency and evacuation procedures
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care Service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures
175	Prescribed information to be notified to regulatory authority
176	Time to notify certain circumstances to regulatory authority
177	Prescribed enrolment and other documents to be kept by approved provider
183	Storage of records and other documents

Related documents

Children's Services policies

- *Administration of First Aid Policy*
- *Feedback and Complaints Policy*
- *Medical Conditions Policy*

Forms

- *Flowchart: Children's Services - Illness, Injury, Trauma and Incident*

- *Incident, Injury, Trauma and Illness Record*
- *Minor Incident Register (Maintained locally)*
- *Practice Manager Major Incident Checklist*

Resources

External

- *Australian Children's Education & Care Quality Authority National Quality Framework - Guide*
- *Australian Childhood Foundation: Centre for Trauma Aware and Responsive Education*
- *Children (Education and Care Services National Law Application) Act 2010*
- *Education and Care Services National Regulations*
- *Education and Care Services National Law Act 2010*
- *St John Ambulance Australia*

Glossary

ACECQA – Australian Children's Education and Care Quality Authorities

The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.

Child Paramountcy

Child paramountcy refers to the obligation to ensure that the best interests, safety, and wellbeing of children are paramount above all other considerations. All decisions, practices, and actions must prioritise the protection and wellbeing of children, particularly where competing interests exist.

ELC

All centre-based services for children aged 0-5 years including Long Day Care and Preschool services.

Minor Incident

An incident that does not require the involvement of medical or emergency services.

Major Incident

An incident that a reasonable person would determine as requiring the involvement of medical or emergency services (please refer to pages 4 & 5 of this policy for further details as per Education and Care Services National Regulations).

OSHC

Out of School Hours Care

Practice Manager

A practice manager oversees and supports a cluster of services within a local area. They work with the Nominated supervisor to ensure services operate safely, meet legal and quality requirements, and follow organisational policies. They do not work directly with children day to day.

Risk Assessment

A systematic process of evaluating the potential likelihood and consequences of risks that may be involved in a projected activity or undertaking.

Trauma

Trauma is the emotional, psychological and physiological impact of heightened stress that accompanies significant and life-challenging experiences and events.

Sign off and review

This document remains valid until it is either superseded by a new version or officially revoked.

CatholicCare values your input and welcomes feedback on this policy. Your suggestions help us improve and better support your work. Please send any feedback to policy.updates@catholiccaredbb.org.au.

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