



Australian Children's
Education & Care
Quality Authority

These guidelines are part of a series intended to assist in the development of your service's policies and procedures required under regulations 168 and 169. They set out the main components to be included in your policies and procedures, and considerations for each component.

They should guide how you develop your policies and procedures, and are not an exact format to be followed.

INCIDENT, INJURY, TRAUMA AND ILLNESS

POLICY GUIDELINES

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place for incident, injury, trauma and illness (regulation 168) and take reasonable steps to ensure policies and procedures are followed (regulation 170).

Your policy and procedures should address these requirements, as well as quality practices relating to dealing with incidents, injury, trauma and illness that align with the National Quality Standard.

Every service is different so it is not sufficient to apply generic policies and procedures to multiple services. You will need to contextualise your policies and procedures to your service's operations and its unique context.

1. Title

Incident, injury, trauma and illness policy

2. Policy statement

The policy statement will reflect your service's philosophy about how the service will work to minimise and manage incidents, injury, trauma and illness that affect children being educated and cared for at your service.

For example:

This policy has been established to ensure clear lines of action are identified to effectively manage an event involving a child becoming injured, ill, or involved in an incident.

3. Background

Your policy needs to include a statement of why this policy is in place.

For example:

The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place in the event that a child is injured, becomes ill, or an incident occurs while attending the service.

4. Legislative requirements

Your policy should be consistent with, and refer to, legislative requirements for managing incidents, injury, trauma and illness.

Examples include, but are not limited to:

Section/regulation	Description
Section 165	Offence to inadequately supervise children
Section 174	Offence to fail to notify certain information to Regulatory Authority
Section 174A	Family day care educator to notify certain information to approved provider
Section 167	Offence relating to protection of children from harm and hazards
Regulation 85	Incident, injury, trauma and illness policies and procedures
Regulation 86	Notification to parents of incident, injury, trauma and illness
Regulation 87	Incident, injury, trauma and illness record
Regulation 89	First aid kits
Regulation 95	Procedure for administration of medication
Regulation 97	Emergency and evacuation procedures
Regulation 103	Premises, furniture and equipment to be safe, clean and in good repair
Regulation 104	Fencing
Regulation 117	Glass
Regulation 161	Authorisations to be kept in enrolment record
Regulation 168	Education and care service must have policies and procedures
Regulation 169	Additional policies and procedures – family day care service
Regulation 170	Policies and procedures to be followed
Regulation 171	Policies and procedures to be kept available
Regulation 172	Notification of change to policies or procedures
Regulation 177	Prescribed enrolment and other documents to be kept by approved provider
Regulation 183	Storage of records and other documents

When writing your policy, you will need to break down what is required under each regulation and how your service will meet these requirements. How these work in practice will be contained in your procedures.

As you reflect on your **Incident, injury, trauma and illness policy**, it might highlight the need to split its various areas into different policies and procedures that can be readily accessed by all staff members to follow. For example, you may wish to have separate policies for *Dealing with significant incidents* and *Ongoing management of illness*.

5. Principles to inform your policy

All decision-making should be carried out in accordance with the principles of your service's **Incident, injury, trauma and illness policy**.

Examples of principles could include, but are not limited to:

- The safety, health and wellbeing of children is a paramount consideration for our service.
- Educators and staff members will receive relevant and up-to-date training to ensure they can effectively respond to incidents, injuries, trauma and illness.
- Care will be taken when assessing the seriousness of an incident and if there is a need for emergency services to be contacted.
- Keeping families informed is paramount: families will be notified of any serious incident involving their child at our service as soon as possible.

- In the event of an incident, injury, trauma or illness, we will undertake a review (including a risk assessment) and take any appropriate action to remove or rectify the cause if required.
- High levels of supervision will be maintained and ratios will be met at all times and supervision plans will be regularly reviewed.
- Educators and staff will be provided with access to appropriate and up-to-date information and regular professional development on the management of incidents.
- All educators and staff will be provided with the necessary resources to respond to incidents and injuries.
- Confidentiality is important and will be maintained at all times.

6. Key terms

To make it easier for your audience, provide definitions of key terms that may not be used every day. For example:

Term	Meaning	Source
ACECQA – Australian Children’s Education and Care Quality Authority	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.	acecqa.gov.au
Approved anaphylaxis management training	Anaphylaxis management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website.	National Regulations (Regulation 136)
Approved emergency asthma management training	Emergency asthma management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website.	National Regulations (Regulation 136)
Approved first aid qualification	A qualification that includes training in the matters set out below, that relates to and is appropriate to children and has been approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Matters are likely to include: Emergency life support and cardio-pulmonary resuscitation; convulsions; poisoning; respiratory difficulties; management of severe bleeding; injury and basic wound care; and administration of an auto-immune adrenalin device.	National Regulations (Regulation 136)
Emergency	An incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the service. For example, a flood, fire or a situation that requires the service premises to be locked down.	Guide to the NQF
Emergency services	Includes ambulance, fire brigade, police and state emergency services.	info.australia.gov.au/information-and-services/public-safety-and-law/emergency-services
First aid	Is the immediate treatment or care given to a person suffering from an injury or illness until more advanced care is provided or the person recovers. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website: acecqa.gov.au/qualifications/requirements/first-aid-qualifications-training	safeworkaustralia.gov.au/system/files/documents/1705/mcop-first-aid-in-workplace-v1.pdf
Hazard	A source of potential harm or a situation that could cause or lead to harm to people or property. Work hazards can be physical, chemical, biological, mechanical or psychological.	acecqa.gov.au/media/31336
Injury	Any physical damage to the body caused by violence or an incident.	
Medication	Medicine within the meaning of the <i>Therapeutic Goods Act 1989</i> of the Commonwealth. Medicine includes prescription, over-the-counter and complementary medicines. All therapeutic goods in Australia are listed on the Australian Register of Therapeutic Goods, available on the Therapeutic Goods Administration website (tga.gov.au).	National Regulations (Definitions)

Term	Meaning	Source
Medical attention	Includes a visit to a registered medical practitioner or attendance at a hospital.	acecqa.gov.au
Medical emergency	An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.	
Medical management plan (MMP)	A document that has been written and signed by a doctor. A MMP includes the child's name and photograph. It also describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition.	National Regulations (Regulation 90)
Minor incident	An incident that results in an injury that is small and does not require medical attention.	
Notifiable incident	Any incidents that seriously compromise the safety, health or wellbeing of children. The notification needs to be provided to the regulatory authority and also to parents within 24 hours of a serious incident. The regulatory authority can be notified online through the NQA IT System.	acecqa.gov.au/newsletters/acecqa-newsletter-issue-11-2015 National Law (section 174) National Regulations (Regulation 86)
Serious incident	For the purposes of the definition of serious incident in section 5(1) of the Law, each of the following is prescribed as a serious incident: (a) the death of a child— (i) while that child is being educated and cared for by an education and care service; or (ii) following an incident occurring while that child was being educated and cared for by an education and care service; (b) any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service— (i) which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or (ii) for which the child attended, or ought reasonably to have attended, a hospital; Example: A broken limb. (c) any incident involving serious illness of a child occurring while that child is being educated and cared for by an education and care service for which the child attended, or ought reasonably to have attended, a hospital; Example: Severe asthma attack, seizure or anaphylaxis reaction. (d) any emergency for which emergency services attended; (e) any circumstance where a child being educated and cared for by an education and care service— (i) appears to be missing or cannot be accounted for; or (ii) appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or (iii) is mistakenly locked in or locked out of the education and care service premises or any part of the premises.	National Regulations (Regulation 12)
Trauma	Is when a child feels intensely threatened by an event he or she is involved in or witnesses.	nctsn.org/what-is-child-trauma/trauma-types/early-childhood-trauma

7. Links to other policies

Refer to related policies and procedures, for example:

- The administration of first aid
- Enrolment and orientation
- Excursions
- Emergency and evacuation
- Dealing with medical conditions in children
- Providing a safe environment for children
- Acceptance and refusal of authorisations

8. Induction and ongoing training

State information about induction training and frequency of ongoing training and information sharing to assist managers, co-ordinators, educators and other staff to fulfil their roles effectively.

9. Policy created/reviewed

Include the date the policy was created, reviewed or changes were made.

10. Monitoring, evaluation and review

State when the policy will be reviewed and who will be responsible for this.

11. Checklist

- Have you referenced the relevant regulations and are these reflected in the policy?
- Does the title provide a clear and concise statement identifying the intent of the policy?
- Have you checked the policy requirements and referenced related legislation that applies to your service type?
- Does your policy statement provide a framework for decision-making and ensure consistent practice?
- Does your policy statement reflect your service philosophy?
- Is it clear why this policy exists?

PROCEDURES GUIDELINES

Under the *Education and Care Services National Regulations*, an approved provider must ensure policies and procedures are in place in the event that a child is injured, becomes ill, or an incident occurs while attending the service. These guidelines are part of a series intended to assist in the development of your policies and procedures required under regulations 168 and 169. They are to guide you to develop your policies and procedures, and are not an exact format to be followed.

Your procedures should be written in clear and concise language, making them easy to read and understand.

The steps and guidelines you document will not only guide your practice, but also inform regulatory authorities and families of educator and staff expectations and responsibilities at the service.

When thinking about your procedures for incidents, injury, trauma and illness, they need to be practical and achievable. For example, if your procedures state that you notify families for all head injuries, you will need to have steps in place to ensure that all staff follow the procedure.

1. Title

Incident, injury, trauma and illness procedures

2. Reference to policy and philosophy

Here you refer to your ***Incident, injury, trauma and illness policy*** as seen in your policy documents. You can reference where you will find the policy to help those looking for it.

Your procedure will also reflect your overall philosophy and evidence-based health and safety best practices.

3. Procedure

This is where you detail the way you will implement the ***Incident, injury, trauma and illness policy***.

It is the 'How to' in your service and includes specific step-by-step procedures for managing incidents, injury, trauma and illness.

Some areas that will be outlined here will include:

- where the procedure will be kept
- when it was last reviewed
- templates that may be required and/or used as a part of the procedure (e.g. incident reports, safety checks, NQA IT System instructions for entering data, and risk assessments)
- systems to monitor the implementation of the procedures.

When developing your procedures you will need to consider any risks associated with children of differing ages, physical capabilities and developmental stages. This is particularly relevant in family day care and outside school hours care services where there are commonly a mixed age group.

As you reflect on the ***Incident, injury, trauma and illness policy***, it might highlight the need to split its various areas into different procedures, which will be displayed or accessed by all staff to follow in relation to their required actions. For example, you may wish to have separate procedures for *Filling out a medication form*, *Child with a fever*, and *Death of a child*.

4. Roles and responsibilities

This is where you will designate specific roles and responsibilities for the people who hold different positions within the service. This needs to align with the *Education and Care Services National Regulations* (see pp. 9–10 below).

It is important to note that it is the legal responsibility of approved providers to ensure systems are in place to minimise risk and ensure health and safety procedures are implemented by the responsible people in services including in family day care (FDC) environments (if applicable). Ultimate responsibility lies with the approved provider to ensure their service/s are meeting the requirements under the *Education and Care Services National Law*.

When developing this section consider:

- What are the roles and responsibilities of the approved provider, responsible person, nominated supervisor, educators, other staff, volunteers, students and families in your service in relation to managing incidents, injury, trauma and illness?
- How will you clearly define these roles and expectations and where will it be documented?
- Why are clear and robust procedures for incidents, injury, trauma and illness important for children’s safety, health and wellbeing?
- How will you learn from the administration of these procedures to improve your practices?
- What information will you need from families to ensure their child’s medical history and current needs are identified and regularly updated? Whose responsibility is it to act on the information received and maintain the records kept at the service, e.g. enrolment form, doctors’ letters, medication plans, communication books? (Some of these actions will cross over with other procedures.)
- How will you ensure that the necessary tools are available so the approved provider, nominated supervisor, educators and other staff can follow the procedure in relation to managing incidents, injury, trauma and illness? How will they be made aware of the procedure?
- Do the roles and responsibilities reflect your service type?

An example of roles and responsibilities could include, but is not limited to:

Roles	Responsibilities
Approved provider	<ul style="list-style-type: none"> • ensure that obligations under the <i>Education and Care Services National Law and National Regulations</i> are met • ensure that an enrolment record is kept for each child which contains all the prescribed information • confidentially storing an incident, injury, trauma and illness record until the child is 25 years old • record information as soon as possible, and within 24 hours, after the incident, injury, trauma or illness • ensure that a parent/guardian of the child is notified as soon as is practicable, but no later than 24 hours after the incident, injury, trauma or illness • notify the regulatory authority of a serious incident online using the NQAITs - SI01 Notification of Serious Incident record • ensure that at least one educator, staff member or nominated supervisor who holds a current approved first aid qualification and has undertaken current approved anaphylaxis management and emergency asthma management training is in attendance at all times and immediately available in an emergency • take reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the policy and procedures • ensure copies of the policy and procedures are readily accessible to nominated supervisors, educators, staff and volunteers, and available for inspection • notify families at least 14 days before changing the policy or procedures if the changes will: <ul style="list-style-type: none"> • affect the fees charged or the way they are collected or • significantly impact the service’s education and care of children or • significantly impact the family’s ability to utilise the service.
Nominated supervisor/ Responsible person	<ul style="list-style-type: none"> • implement the <i>Incident, injury, trauma and illness policy</i> and <i>procedures</i> • investigate the cause of any incident, injury or illness and take appropriate action to remove the cause if required • contact emergency services in the first instance then notify parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable • ensure each child’s enrolment record includes authorisation by a parent or person named in the record, for the approved provider, nominated supervisor or educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service and, if required, transportation by an ambulance service.

Roles	Responsibilities
Educators	<ul style="list-style-type: none"> • record information as soon as possible, and within 24 hours after the incident, injury, trauma or illness • seek further medical attention if required after the incident, injury, trauma or illness • ensure that two people are present any time medication is administered to children (except FDC or permitted services under regulation 95(c)) • be aware of children with allergies and their attendance days, and apply this knowledge when attending to any incidents, injury, trauma or illness • complete an Incident, Injury, Trauma and Illness Record • keep Incident, Injury, Trauma and Illness Records confidential and store until the child is 25 years old.
Families	<ul style="list-style-type: none"> • provide authorisation in the child's enrolment form 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, if required, transportation by an ambulance service • notify the service upon enrolment of any specific health care needs of the child, including any medical conditions and allergies and any medical management plans that need to be followed • ensure any medical management plans at the service are kept up-to-date • collect the child as soon as possible when notified of an incident, injury, trauma or illness • notify the service of any infectious disease or illness that has been identified when the child has been absent from the service, that may impact the health and wellbeing of other children, educators, staff or others attending the service • be contactable, either directly or through emergency contacts listed on the enrolment form, in the event of an incident requiring medical attention • notify educators or staff if there has been a change in the condition of the child's health, or of recent accidents or incidents that may impact the child's care • notify educators or staff when the child is ill and will be absent from their regular program.

The following table will assist you in developing procedures specific to your service's needs and context. Referring to the *Education and Care Services National Regulations* when you are writing your procedures will assist you to ensure that you are meeting your obligations.

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Organising the procedures</p> <p>Regs: 77, 85, 86, 87, 89, 95, 97, 103, 104, 117, 168, 170, 171, 172</p> <p>QA2</p> <p>QA3: 3.1</p> <p>QA7: 7.1.2, 7.1.3</p>	<ul style="list-style-type: none"> • How you will separate the different parts of the policy into easy to follow procedures to make it easier for educators and staff to understand and implement them. • How you will ensure that all types of scenarios and steps to be taken are considered. For example, missing children as a serious incident would need to include details of monitoring numbers, an action plan for the missing child, supervision for the other children, and who is contacted and when. 	<ul style="list-style-type: none"> • Make sure your policy and procedures are available for all to access. • Create checklists with clear expectations around implementing procedures. • Provide educator and staff induction training, standalone training, and regular updates and reviews of the policy and procedures at meetings. • Role play scenarios with educators and staff to encourage and develop knowledge around serious incidents and correct procedures. • Design templates or documents needed for the individual procedures. • Develop communication systems, e.g. for educators and staff to communicate with families, for notifications/reporting. 	<p>Providing a child safe environment</p> <p>Enrolment and orientation</p> <p>Dealing with infectious diseases</p> <p>The administration of first aid</p> <p>Dealing with medical conditions in children</p> <p>Emergency and evacuation</p> <p>Governance and management</p> <p>Safe transportation of children</p>
<p>Preventing incidents, injury, trauma and illness</p> <p>Act: 165, 167</p> <p>Regs: 77, 85, 86, 87, 89, 97, 103, 104, 117, 168</p> <p>QA2: 2.2</p> <p>QA3: 3.1</p> <p>QA7: 7.1.2, 7.1.3</p>	<ul style="list-style-type: none"> • How you intend to meet the regulations related to preventing incidents, injury, trauma and illness, including for excursions and transport. • Undertaking risk assessments that identify potential risks while not inhibiting children's risky play and experiences. • What systems will promote reflection on supervision plans/ratio checks. • The grouping of children and supervision plans. • How you reflect on your infection control procedures to inform practice. • What systems you have in place to ensure immunisation records for each child are up to date. 	<ul style="list-style-type: none"> • 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. 	<p>Providing a child safe environment</p> <p>Enrolment and orientation</p> <p>Dealing with infectious diseases</p> <p>The administration of first aid</p> <p>Dealing with medical conditions in children</p> <p>Delivery of children to, and collection from, education and care service premises</p>

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementing procedures	Related policy and/or procedures
<p>Managing incidents, injury, trauma and illness</p> <p>Regs: 77, 85, 86, 87, 89, 95, 97</p> <p>QA2</p> <p>QA3: 3.1</p> <p>QA7: 7.1.2, 7.1.3</p>	<ul style="list-style-type: none"> • How you intend to meet the regulations related to managing incidents, injury, trauma and illness. • How you will identify the seriousness of the incident, injury, trauma and/or illness to inform the steps you will take. • What steps need to be taken in a trauma or incident, such as: <ul style="list-style-type: none"> • contacting emergency services • evacuation, lockout and lockdown procedures • administering first aid • removing or controlling hazards. • What steps need to be taken for managing illness, such as: <ul style="list-style-type: none"> • protective measures for educators and staff, e.g. gloves, disinfectant, masks • how and where will the child be isolated, but adequately supervised, until the family can pick up the child • who will administer first aid. 	<ul style="list-style-type: none"> • Refer to emergency and evacuation procedures. • Clearly defined roles and responsibility statements, which will assign certain staff to: <ul style="list-style-type: none"> • check first aid kits • check protective equipment. • Have clear steps and processes in place to ensure educators and staff understand and clearly communicate with each other in the event of an incident injury, trauma and illness. 	<p>The administration of first aid</p> <p>Emergency and evacuation</p> <p>Interactions with children</p> <p>Providing a child safe environment</p> <p>Dealing with infectious diseases</p> <p>Dealing with medical conditions in children</p>
<p>Documenting and reporting incidents, injury, trauma and illness</p> <p>Act: 174, 174A</p> <p>Regs: 77, 85, 86, 87, 89, 97, 183</p> <p>QA2</p> <p>QA3: 3.1</p> <p>QA7: 7.1.2, 7.1.3</p>	<ul style="list-style-type: none"> • How you will record an incident, injury, trauma and illness, e.g. which templates you will use. • Clearly identify which copies of the incident reports will go to families and which will be kept at the service. • Identify steps to be taken when families need to be notified of a contagious illness. • Identify steps to be taken for vaccine-preventable diseases, and include in documentation, e.g. processes for checking against immunisation records for each child to see if any may need to be excluded. • Identify which illnesses are notifiable and to whom (e.g. regulatory authority, public health agency, etc.) and the notification procedures to be followed. 	<ul style="list-style-type: none"> • Develop clearly defined roles and responsibility statements or shift descriptions. • Develop reporting templates as outlined in your policy. • Develop systems to ensure families understand their responsibilities regarding the prevention, management and reporting of an incident, injury, trauma and illness, e.g. not sending their child if they are unwell. • Consider creating an Incident Review template that reflects on the effectiveness of the management and systems, as well as health and safety issues that need to be noted for the future. 	<p>Enrolment and orientation</p> <p>Dealing with medical conditions in children</p> <p>Governance and management</p>

5. Procedures created/reviewed

Include the date the procedure was created or reviewed.

6. Monitoring, evaluation and review

Your service, in consultation with educators and other key staff, families and other stakeholders, should review the effectiveness of this procedure within a set timeframe or earlier if there is a change in relevant legislation.

State when the procedure will be reviewed and who will be responsible for this.

7. Checklist

- Do the **Incidents, injury, trauma and illness procedures** align with your **Incident, injury, trauma, and illness policy**?
- Have your procedures been written in plain English and can they be easily implemented by an educator or staff new to your service?
- Is it clear who is responsible for the implementation of the procedure?
- Are all educators and staff aware of the procedures and can they implement them if required?
- Do you need to develop any resources to monitor and record the procedure?

USEFUL RESOURCES

Include links to useful resources that have helped inform the development of your policy. Be mindful of the existence of any state or territory specific content.

Some examples include, but are not limited to:

- ACECQA – Guide to the National Quality Framework acecqa.gov.au/nqf/about/guide
- ACECQA – Incident, injury, trauma and illness record acecqa.gov.au/resources/applications/sample-forms-and-templates
- ACECQA – Medication record acecqa.gov.au/resources/applications/sample-forms-and-templates
- ACECQA – Notification types and timeframes acecqa.gov.au/resources/applications/notification-types-and-timeframes
- ACECQA – Opening a new service acecqa.gov.au/resources/opening-a-new-service
- ACECQA – Risk assessment and management acecqa.gov.au/media/29421
- ACECQA – What to do if a serious incident happens at your service acecqa.gov.au/newsletters/acecqa-newsletter-issue-11-2015
- Australian Government – Staying healthy: Preventing infectious diseases in early childhood education and care services nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services

- Notify the regulatory authority:
 - ACT – education.act.gov.au/early-childhood/information-for-existing-and-prospective-providers
 - NSW – education.nsw.gov.au/early-childhood-education/operating-an-early-childhood-education-service/regulation-assessment-and-rating/notifications-and-reporting
 - NT – education.nt.gov.au/committees,-regulators-and-advisory-groups/quality-education-and-care-nt/notify-regulatory-authority
 - Queensland – earlychildhood.qld.gov.au/legislation-and-guidelines/health-and-safety/incident-and-emergency-management/notify-the-regulatory-authority
 - South Australia – esb.sa.gov.au/node/270
 - Tasmania – educationandcare.tas.gov.au/education-and-care-services/education-and-care-forms/
 - Victoria – education.vic.gov.au/childhood/providers/regulation/Pages/incidents_complaints.aspx
 - WA – [dlgc.communities.wa.gov.au/Publications/Pages/Notification-of-Incidents-\(serious-and-other\).aspx](http://dlgc.communities.wa.gov.au/Publications/Pages/Notification-of-Incidents-(serious-and-other).aspx)