

Policy title	2.6 Incident, Injury, Trauma and Illness
Policy type	Management
Group	Family and Children

Rationale

The *Education and Care Services National Regulations 2011* and the *Victorian Children's Services Regulations 2009* require an approved provider of an education and care service to have Policies and Procedures in the event that a child is injured, becomes ill or suffers a trauma.

It is vital that our early childhood services have sound emergency and evacuation procedures as well as accident prevention strategies that are designed to provide a safe and healthy environment for children, families and staff. Moonee Valley City Council also acknowledges that when groups of children play and learn together, illness and disease can spread from one child to another even when a service's stakeholders implement recommended health and safety practices.

The purpose of this Policy is to outline precautionary steps to be taken to prevent an accident, illness, injury or trauma occurring in all approved services.

Policy statement

Moonee Valley City Council is committed to:

- all children's services' educators/contractors holding current first aid qualifications as required by the *Education and Care Services National Regulations 2011* and the *Victorian Children's Services Regulations 2009*
- preventing the spread of illness through hygiene practices, and complying with recommended exclusion guidelines and timeframes
- rehearsing emergency and evacuation procedures every three (3) months in all council-managed early childhood services
- taking prompt action when an incident, illness, injury or trauma occurs
- documenting all incidents, illnesses, injuries and traumas and informing parents/guardians, and regulatory authorities in accordance with the

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Education and Care Services National Regulations 2011 and the Victorian Children's Services Regulations 2009.

The wellbeing and safety of all people in our education and care services is important. While unforeseen incidents do occur, preventative and responsive practices must be in place to maximise the health and safety of all children in our care. The procedures on the following pages must be followed in the event that a child is injured, becomes ill or suffers a trauma.

The *Education and Care Services National Law Act 2010* and *Education and Care, Services National Regulations 2011* and the *Victorian Children's Services Regulations 2009* require that an incident, injury, trauma and illness record be kept and that the record be accurate and remain confidentially stored until the child is 25 years old. In the event of any serious incident at an approved service, the *Education and Care Services National Law Act 2010* requires the regulatory authority to be notified.

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Procedure	2.6 Incident, Injury, Trauma and Illness Procedure
Policy type	Management
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Action	Approved Provider	Responsible Person or Primary Nominee	Educator/contractor	Families	Education and Care Services National Regulations 2011	Education and Care Services National Law Act 2010	Children's Services Regulations 2009 & Children's Services Act 1996
Children's services' educators/contractors hold current first aid qualifications.	✓	✓	✓		r.136	s.167 s.169	r.63-67 r.87 s.26 s26A
Updates on Anaphylaxis and Asthma Management training are undertaken on a three-yearly basis.	✓	✓	✓		r.136	s.167 s.169	r.63-67 r.87 s.26 s.26A
Training in the administration of the adrenaline auto-injection device and cardio-pulmonary resuscitation is undertaken every 12 months; auto-injection device training is undertaken on a three-monthly basis.	✓	✓	✓		r.136	s.167 s.169	r.63-67 r.87 s.26 s.26A
Ensure there are fully stocked first aid kits that are accessible at all times (refer to Administration of First Aid Policy).	✓	✓	✓		r.89	s.167	r.84 s.26
Ensure that the orientation and induction of new and relief staff includes an overview of their responsibilities in the event of an incident or medical emergency.	✓	✓	✓			s.167	r.63-67 r.84 r.87 s.26

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Action	Approved Provider	Responsible Person or Primary Nominee	Educator/contractor	Families	Education and Care Services National Regulations 2011	Education and Care Services National Law Act 2010	Children's Services Regulations 2009 & Children's Services Act 1996
Ensure that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency.	✓	✓	✓		r.85-87	s.167	r.63-67 r.75 r.86 r.87 s.26
All accidents and incidents are recorded in the service's Accident Book and parents/guardians are notified.	✓	✓	✓		r.85-87	s.167	r.37 r.32B
Ensure that staff have access to medication, accident, injury, trauma and illness forms and WorkSafe incident report forms.	✓	✓	✓		r.85-87	s.167	r.37 r.32B
Provide authorisation in the child's enrolment record for the service to seek emergency medical treatment by a registered medical practitioner, hospital or ambulance service.	✓	✓	✓	✓	r.161	s.167	r.33 s.26 32B
Ensure that no child is admitted to any Council education and care service unless the parent/guardian has signed the consent form to obtain medical attention for the child at the family's expense, at the time of enrolment.	✓	✓	✓	✓	r.158 r.161	s.167	r.31-34 s.26 s.26A
Maintain all enrolment and other medical records in a confidential manner (refer to Council's Information Privacy Policy).	✓	✓	✓		r.181-184	s.273	r.35
Maintain a duty of care and actively supervise children at all times.	✓	✓	✓		r.123	s.167 s.165 s.169	r.50 r.53 s.26 s.27

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

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Ensure that the premises are kept clean and in good repair.	✓	✓	✓		r.103	s.167	s.26 s.29
Consult with staff in relation to identification and risk assessment of any hazards that may cause injury. Ensure that regular inspections of the service equipment, indoor and outdoor areas using the hazard inspection checklist, are conducted in accordance with service requirements.	✓ ✓	✓ ✓	✓ ✓		r.103	s.167 s.169	s.26 s.29 s.29A
Ensure that recorded action(s) to minimise or eliminate a hazard are taken when a hazard is detected. Review the cause of any incident, injury, near miss or medical emergency and take appropriate action to remove the cause if required.	✓	✓	✓		r.103	s.167 s.169	s.26 s.29
The approved provider can delegate the completion and signing of the Serious Incident Notification Form to a Responsible Person, with the proviso that this person understands their responsibilities and knows when to notify authorities. Ultimately, a failure to notify will always be the approved provider's responsibility.	✓	✓	✓		r.176	s.174	r.90 s.29C
Ensure programs are suited to children's developmental stages, with safety as a priority.	✓	✓	✓		r.73	s.167	r.40-41 s.26 s.26B s.29

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Notify the service, upon enrolment or diagnosis, of any medical conditions and/or needs, and any management procedure to be followed with respect to that condition or need.	✓	✓	✓	✓	r.162	s.167	r.34 r.97 s.26
Ensure that families provide the service with a current Asthma or Anaphylaxis Action Plan, or medical management plan for other medical conditions, as applicable.	✓	✓	✓	✓	r.162	s.167	r.34 r.87 s.26 s.26A
Ensure that volunteers and parents/guardians on duty are aware of children's medical management plans and their responsibilities in the event of an incident or medical emergency.	✓	✓	✓		r.90	s.167 s.169	r.87 s.26
If an educator/contractor has reported that a child's temperature has reached 38°Celsius or higher, the child has diarrhoea or has been vomiting (or has a combination of these conditions), notify the child's parents/guardians immediately and request them to collect their child from the service as soon as possible. If the child's condition continues to deteriorate prior to parents'/guardians' arrival at the service call 000 for further guidance. If a child suffers a serious injury to the head, back or eye, bleeding or a bone fracture whilst at a service, a staff member/educator		✓	✓	✓	r.90 r.85-87 r.50 r.53 r.94 r.98 r.99 r.136 r.176	s.167 s.165 s.169 s.175	s.26 s.27 s.29A s.29B s.29C s.44 r.50 r.53 r.37 r.73 r.75 r.77 r.86 r.87 r.88 r.90-91

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is to call 000. The parent/guardian or emergency contact should then be called to inform them of the child's condition.							
Unexpired prescribed medication for ongoing medical conditions is available to the child each day the child attends a service.				✓	r.91-93	s.167	r.36 s.26 s.29B
Any changes to the child's condition, medication or dietary requirements as listed by the registered medical practitioner on an updated medical management plan, are to be communicated to staff as soon as practicable.				✓	r.90	s.167	r.34 s.26
If their child has a fever of more than 38.0°Celsius and/or has been prescribed antibiotics for an acute illness, they are to stay away from a service premises for at least 24 hours from the onset of the fever and/or taking the first dosage of the prescribed antibiotics, or greater than 24 hours as advised by a registered medical practitioner.				✓	r.90	s.167	r.36-37 r.88 s.26
If their child has had abdominal cramps, vomiting or diarrhoea, they are to stay away from a service premises for at least 24 hours after the last incident of vomiting and/or diarrhoea, or greater than 24 hours as advised by a registered medical practitioner.				✓	r.90	s.167	r.88 s.26

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Request the parents/guardians make arrangements for the child or children involved in an incident or medical emergency to be collected from the service, or inform parents/guardians if an ambulance has been called.		✓	✓	✓	r.90	s.167	r.88 s.26
Record details of any incident, injury or illness in the accident, Injury, Trauma and Illness Record Book as soon as practicable, but no later than 24 hours after: <ul style="list-style-type: none"> an incident in relation to a child or injury received by a child or trauma to which a child has been subjected; or an illness becomes apparent 	✓	✓	✓		r.85-87	s.167 s.175	r.36-37 s.26 s.32B
Details are to include the following: <ul style="list-style-type: none"> the name and age of the child the circumstances leading to the incident, injury or trauma; or relevant circumstances surrounding the child becoming ill and any apparent symptoms the time and date the incident occurred, the injury was received or the child was subjected to the trauma or the apparent onset of the illness 	✓	✓	✓		r.85-87	s.167	r.36-37 s.26 s.32B

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<ul style="list-style-type: none"> the action taken including any medication administered, first aid provided and any medical personnel contacted details of any person who witnessed the incident, injury or trauma the name of any person whom the service notified or attempted to notify, of any incident, injury, trauma or illness which a child has suffered while being educated and cared for by the education and care service or family day care educator/contractor the time and date of the notifications or 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 the signature of the parent/guardian to verify that they have been informed of the situation. 	✓	✓	✓				

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After completing the record, review the cause of any incident, injury or illness and take appropriate action to remove the cause if required. Remember to record what was done to mitigate the risk.	✓	✓	✓		r.103	s.167	r.37 s.26 s.26A s.29A
Ensure the child's parents/guardians complete and sign the Incident, Injury, Trauma and Illness Record.	✓	✓	✓		r.85-87	s.167	r.37 s.26
Parents/guardians must always advise the Responsible Person in writing of any temporary or permanent changes to their contact details or emergency person's contact details.	✓	✓	✓	✓	r.160	s.175	r.31 s.26
We encourage families to ring and notify the service when their child will not be attending and if the reason is due to illness.				✓	r.90	s.167	r.88 s.26
Meet the requirements of the Family Assistance Office in regards to providing a registered medical practitioner certificate when their child has been away ill (applicable for family day care and long day care for receipt of childcare benefits).		✓	✓	✓			
If a child is absent from the service as a result of an accident, fees are fully payable for those days.				✓		s.175	

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

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Inform service staff if their child contracts/has been diagnosed with an infectious illness that may impact on the health and wellbeing of children, staff and parents attending the service, even if their child has not attended the service premises or programs.				✓	r.90	s.167	r.88 s.26
Notify staff if there is a change in the condition of their child's health. Also, if there have been any recent accidents or incidents that may impact on the child's care such as any bruising or head injuries.				✓		s.167	r.31 s.26
If a child attends a registered medical practitioner or hospital the incident must be reported to the Victorian Department of Education and Training within 24 hours; and a full report made on the ACECQA Form S101 Notification of Serious Incident within 48 hours.	✓	✓	✓		r.176	s.174	r.90 s.29C
<p>In the event of a serious incident, it is the parents'/guardians' responsibility to:</p> <ul style="list-style-type: none"> • be accountable for all costs incurred in the event of an emergency • be contactable at all times, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical 				✓	r.160-161 r.90 r.85-87	s.167	r.31 r.37 s.26 s.26A

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

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attention <ul style="list-style-type: none"> • collect their child as soon as possible when notified of an incident or medical emergency involving their child • sign the Incident, Injury, Trauma and Illness Record, to acknowledge awareness of any incident involving their child 							
If the parent/guardian is not satisfied that the service responded to their child's accident correctly, direct them to follow the children's services' internal complaints process (refer Policy 7.2: Grievances and Complaints and Procedures).	✓	✓	✓	✓	r.176	s.174	r.105
Ensure that incident, injury, trauma and illness records are archived and stored securely until the child is 25 years old.	✓	✓	✓		r.87 r.183	s.175	
Ensure that completed medication records are kept until the end of three years after the child's last attendance (National Regulations 92, 183).	✓	✓	✓		r.92 r.183	s.175	
Oversee and guide staff to ensure adherence to this Policy and Procedures.	✓	✓			r.170	s.167	s.26 s.26 s.26A
Allocate appropriate funds for staff professional development.	✓	✓	✓		r.136	s.169	r.67 r.65 s.26 s.26A

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Definitions

1. **Infectious diseases:** Diseases that can be spread directly or indirectly from one living thing to another, such as meningitis, malaria, strep throat and influenza.
2. **Communicable diseases:** Diseases capable of being passed on from one person to another.
3. **Contagious diseases:** A condition of the mind or body easily diffused or spread from one person to another.
4. **Excludable infectious illness/disease:** Infectious diseases listed by the Victorian Department of Health and Human Services under 'Schedule 7 – Minimum period of exclusions from primary schools and children's services centres for infectious diseases cases and contacts' as required under the *Public Health and Wellbeing Regulations 2009*.
5. **Minor injury:** Any injury that enables a child or worker to return to normal activities after basic first aid has been administered for a small abrasion, cuts, scratches, bruising, cut lip; as well as any injury that does not require attention from a registered medical practitioner or hospital.

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Serious incident:

An approved provider must notify the regulatory authority of any serious incident meaning an incident or class of incidents prescribed by the National Regulations as a serious incident. For more information refer to the [Guide to the National Law and National Regulations](#).

Note: The definition of 'serious incidents' was amended on 1 September 2013 (31 December 2013 in Western Australia).

The definition of serious incidents that must be notified to the regulatory authority is:

(a) The death of a child:

- (i) while being educated and cared for by an education and care service or
- (ii) following an incident while being educated and cared for by an education and care service.

(b) 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:

- (i) 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.

e.g whooping cough, broken limb, anaphylaxis reaction

(c) any incident where the attendance of emergency services at the education and care service premises was sought, or ought reasonably to have been sought

(d) 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.

You must notify the regulatory authority within 24 hours of becoming aware of a serious incident.

For more information please contact your local [regulatory authority](#).

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Link to Council policies

This Policy and Procedures is linked to Council's Occupational Health and Safety Emergency and Response, Risk Management, Incident and Hazard Reporting, Analysis and Management, Issue and Resolution and Isolated Workers policies and procedures.

Resources and useful websites

This Policy and Procedures are aligned to the following National Quality Standard

www.acecqa.gov.au/national-quality-framework/the-national-quality-standard

ACECQA for Notification of Serious Incident Form SI01 – www.acecqa.gov.au

Staying Healthy in Childcare: Preventing Infectious Diseases, 5th edition. (2005). National Health and Medical Research Council
https://www.nhmrc.gov.au/files/nhmrc/publications/attachments/ch55_staying_healthy_childcare_5th_edition_0.pdf

Note: The fifth edition of this publication contains significant changes from earlier editions and it is important that services staff/educators/contractors refer to the most up-to-date version.

WorkSafe Victoria Guide notes – www.worksafe.vic.gov.au

Where to get help:

- in an emergency, call 000
- Poisons Information Centre: 131 126
- emergency department of the nearest hospital
- Nurse-on-Call: 1300 606 024 — for expert health information and advice (24 hours, 7 days)
- your registered medical practitioner

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Schedule 1: Incident, Injury, Trauma and Illness Record

Details of person completing this record

Name: Position/role:

Date and time record was made / / Signature:

Child details

Child's full name:

Date of birth: / / Age: Gender : Male Female

Incident details

Incident date: / / Time: am/pm Location:

Name of witness:

Witness signature: Date: / /

General activity at the time of **incident/injury/trauma/illness**:

Cause of **injury/trauma**:

Circumstances surrounding any **illness**, including apparent symptoms:

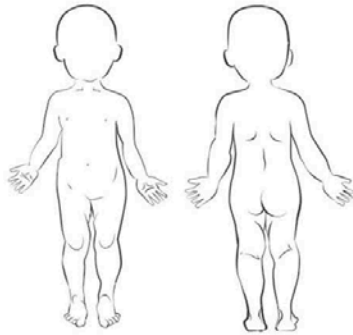
Circumstances if child appeared to be **missing** or otherwise unaccounted for (incl duration, who found child etc):

Circumstances if child appeared to have been **taken or removed** from service or was **locked in/out** of service (incl who took the child, duration):

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Nature of injury/trauma/illness:

Indicate on diagram the part of body affected



- Abrasion / Scrape
- Allergic reaction (not anaphylaxis)
- Amputation
- Anaphylaxis
- Asthma / respiratory
- Bite wound
- Bruise
- Broken bone / fracture / dislocation
- Burn / sunburn
- Choking
- Concussion
- Crush / jam
- Cut / open wound
- Drowning (non-fatal)
- Electric shock
- Eye injury
- Infectious disease (incl gastrointestinal)
- High temperature
- Ingestion / inhalation / insertion
- Internal injury / Infection
- Poisoning
- Rash
- Respiratory
- Seizure /unconscious/ convulsion
- Sprain / swelling
- Stabbing / piercing
- Tooth
- Venomous bite/sting
- Other (please specify)

Action Taken

Details of action taken (including first aid, administration of medication etc):

.....

.....

.....

Did emergency services attend?: Yes / No

Was medical attention sought from a registered practitioner / hospital?: Yes / No

If yes to either of the above, provide details:

.....

.....

Have any steps been taken to prevent or minimise this type of incident in the future?:.....

.....

.....

.....

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Schedule 2: Commonwealth Department of Education and Training serious event reporting requirements for service providers

Definition

'Serious event' means any circumstance in which a child, worker or any other person suffers an injury during or as a result of an activity for which treatment from a doctor or other medical practitioner was sought. As well, where it ought to have reasonably been sought, or an incident that draws the attention of the police, or where the child, worker or any other person dies during or as a result of the activity.

The responsibility for reporting all serious events rests with the approved provider

Under the terms and conditions of funding agreements, services are required to report all serious events to the Department of Education and Training (DET). The following definitions of serious events are a guide only. Service providers may contact DET if further clarification is required in the case of:

- the death of a child while the child is attending childcare
- any injury to a child attending childcare that requires emergency medical attention
- any injury to a worker or any other person at the childcare facility that requires emergency medical attention
- an unexpected illness of such seriousness that it requires a child, worker or other person at the premise to receive emergency care by a medical practitioner or transfer to a hospital
- an event where police assistance/intervention was required
- any significant event that may affect a carer's suitability to care for a child
- children leaving the care premise unattended and without carer's knowledge

Service providers must ensure that the matter is reported to DET within 48 hours of the event by calling DET on 133 397. Calls will be directed to the relevant state or territory childcare team. Alternatively, services may call their relevant DET State or Territory Office and speak with their funding agreement manager (as recorded on their funding agreement).

Following on from the telephone report an email containing all relevant details of the serious event and any follow up action is to be forwarded to the DET State Office. If a service provider fails to report a serious event they will be in breach of their funding agreement.

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019

Information to be provided when reporting a serious event:

- name of the service provider
- name of service manager
- name and date of birth of the child/ren or worker involved.
- date and time serious event occurred
- a detailed description of the serious event and any injury sustained, if applicable
- details of medical attention or police assistance/intervention required
- name of police station if applicable
- name of all workers/persons involved or that were present at the time of the serious event
- any other relevant information or comments

Minor injuries

Service providers are not required to report minor injuries. However, all minor injuries and first aid treatment must be recorded and kept in accordance with the service's record keeping requirements and be accessible to DET if required.

DET defines a minor injury as a child or worker being able to return to normal activities after basic first aid has been administered such as:

- small abrasion, cuts or scratches
- bruising
- cut lip
- any injury that does not require attention from a medical practitioner or hospital

In the event that medical attention is sought for a child/worker or they are admitted to hospital at a later stage as a consequence of the minor injury, the service provider must report this to DET.

Group	Responsible Manager	Document	Document No	Approval Date	Review Date
Family and Children's Services	Michele Leonard	2.6 Incident, Injury, Trauma and Illness Procedure	17/150865	August 2017	August 2019