



# Incident, Injury, Trauma and Illness

## Policy PP08V01

*Effective date of Policy: December 2020*

*Date of next review: December 2021*

### Be Heard Philosophy

We strive to protect every child in our service, while providing them with care. In the event of incidents, injuries, traumas and illnesses, we have strategies and plans in place.

**AIM:** To manage incidents, injuries, trauma to reduce the impact to the child, family and staff, and to prevent the spread of infectious illnesses and diseases. Be Heard is committed to reducing the physical and/or emotional harm to children during service delivery and care.

### 1. Responsibility

- Management
- Staff
- Families
- Students and Volunteers

### 2. Implementation

#### PRINCIPLES

Be Heard has a duty of care to ensure that all persons are provided with a high level of protection during the service's operation. Be Heard acknowledges that when groups of children play and learn together, illness and disease can spread from one child to another even when staff and management implement recommended hygiene and infection control practices.

Be Heard acknowledges staff often contract the same illnesses as children due to the close human contact that is required when caring for and educating children. Illness can place additional pressure on staff and children when staff are unable to work. Consistent and clear communication between stakeholders and an effective induction procedure can assist Be Heard to strengthen the implementation of recommended practices and reduce illness and stress levels.

Be Heard has a policy on Incident, Injury, Trauma and Illness to enable:

- A shared expectation of how symptoms of an illness are assessed and the exclusion guidelines
- A strategy in infection control, which encompasses the Be Heard's guidelines for excluding children and adults with an infectious illness or disease.
- Procedures required when a child experiences an incident, injury or trauma.

The policy assists Be Heard to:

- identify symptoms of illness,
- notify families /emergency contact when a symptom of an excludable infectious illness or disease has been observed,
- explain guidelines for who is responsible for all required steps and actions,
- assess when an illness is an emergency,
- assess when an illness requires immediate medical attention,
- assess when an illness requires medical advice, and
- provides guidelines for responding to all incidents, injuries, traumas and illness.

Be Heard believes it is equipped to provide adequate care in the case of a minor ailment. However, the activities and atmosphere that we provide for the children throughout the day may not appropriate for children who are unwell. When children are ill they require more attention and comfort. It is a balancing act to meet the needs of the individual child and family while acknowledging that other children, families and staff need to be protected from infectious illnesses.

In meeting Be Heard's duty of care, it is a requirement under the Occupational Health & Safety Act that management and staff implement and support the Be Heard Incident, Injury, Trauma and Illness Policy and procedures.

#### **IDENTIFYING SIGNS AND SYMPTOMS OF ILLNESS**

All common infectious diseases commence with an incubation period during which the child/adult becomes vaguely unwell and irritable before characteristic signs appear. This is when the disease is highly infectious and other children and STAFF are at a greater risk of catching it. It is important that all families and staff are aware of all types of diseases present in our community and can recognise early within Be Heard symptoms to prevent cross infection and minor epidemics. Be Heard is aware illness in infants and young children can progress very quickly. If staff are in doubt, they will seek medical advice immediately. Be Heard staff are aware of the following symptoms which may indicate a possible infection or serious medical illness or condition:

#### ***High Fever***

The normal temperature for a child is between 36.5°C and 38°C.

- Fevers are common in children.
- If the child seems well and is happy with no other symptoms, staff will continue to monitor the child. Be Heard reserves the right to determine at what point in time the child may require treatment and or collection.
- If the child is less than 3 months old and has a fever below 36.5°C or above 38 °C, contact the child's family and ask them to take the child to a doctor.
- If the child is unhappy, treatment is needed to comfort them. Give clear fluids and, if the parents give permission, paracetamol only where the child will be collected within 1 hour of administering medication
- Watch the child and monitor how they are feeling.

In some cases, a child may have febrile convulsions, which are physical seizures caused by the fever. They usually last only a few seconds or minutes. Staff will call an ambulance if this is the first time the child has had convulsions. Staff should follow the Medical Management Plan if the child has had convulsions before.

- **Drowsiness** —the child is less alert than normal, making less eye contact or less interested in their surroundings
- **Lethargy and decreased activity** —the child wants to lie down or be held rather than participate in any activity, even those activities that would normally be of interest.
- **Breathing difficulty** —this is an important sign. The child may be breathing very quickly or noisily or be pale or blue around the mouth. The child may be working hard at breathing, with the muscles between the ribs being drawn in with each breath.
- **Poor circulation** —the child looks very pale, and their hands and feet feel cold or look blue.
- **Poor feeding** —the child has reduced appetite and drinks much less than usual. This is especially relevant for infants.
- **Poor urine output** —there are fewer wet nappies than usual. This is especially relevant for infants.
- **Red or purple rash** —non-specific rashes are common in viral infections, however, red or purple spots that do not turn white if pressed with a finger require urgent medical referral because the child could have meningococcal disease.
- **A stiff neck or sensitivity to light** —this may indicate meningitis, although it is possible for infants to have meningitis without these signs.
- **Pain** —a child may or may not tell you they are in pain. Facial expression is a good indicator of pain in small infants or children who do not talk. General irritability or reduced physical activity may also indicate pain in young children.

Be Heard Staff listen to children when they verbalise their symptoms and are observant of non-verbal cues, gestures and expressions.

## EXCLUSION GUIDELINES

The aim of exclusion is to reduce the spread of an infectious disease. By excluding one ill person you may prevent many from becoming ill.

The need for exclusion depends upon:

- the ease with which the infection can be spread,
- the ability of the infected person to follow hygiene precautions, and
- the severity of the disease.

Staff will contact families if a child needs to be excluded from the session. Families will be asked to collect the child as soon as practicable (preferably within an hour of being notified). If a child has been sent collected from the session and has been medically diagnosed with an excludable infectious disease the child cannot schedule another session or attend another session for the minimum exclusion period. If asked for by staff, the families must provide Be Heard with a letter from a medical professional stating that their child is non-infectious and is fit to return to Be Heard sessions.

## SEEKING ASSISTANCE

### *The Need for an Ambulance*

Any child experiencing any of the following symptoms who has no prior history will be regarded as an emergency:

- Allergic reaction requiring immediate medical attention.
- Breathing difficulties.
- Choking.
- Febrile convulsions and seizures.
- Serious injuries requiring immediate medical attention.
- Poisoning.
- Is Unconscious.

If a child experiences any of these symptoms the Staff at Be Heard will take the following action:

**Step 1** – Ensure a staff member remains with the child, providing first aid while calls “000”.

**Step 2** – Answer questions and follow instructions given by the “000” operator.

**Step 3** – Inform the family or emergency contacts of child’s condition and that “000” has been called.

**Step 4** – Staff member to accompany child in ambulance with any medical documentation and a mobile phone.

**Step 5** – Staff to complete Incident, Injury, Trauma and Illness form and ask family to sign it.

In the event of Be Heard being required to seek emergency medical treatment including an ambulance for a child, the family will be responsible for any incurred expenses. Intake forms must include emergency contacts who are authorised by the Lawful Parent to consent to medical treatment of the child from a registered medical practitioner, hospital or ambulance service and transportation of the child by an ambulance, or to authorize administration of medication to the child and to collect and care for the child.

## SEEKING MEDICAL ADVICE

Be Heard staff are not health care professionals and are unable to diagnose an illness. This is primarily the responsibility of registered medical practitioners. Be Heard is not a suitable environment for children who are unwell. When a child displays signs of being unwell and/or symptoms of infectious diseases whilst in a session, staff will take the required steps to comfort the child until they can be collected by their family or emergency contact. To ensure that a child is not infectious and minimise the spread of an infection, staff should ask the collecting person to seek medical advice for the child and to call Be Heard to advise the medical diagnosis and provide medical clearance. Be Heard will advise when the child can return and whether further medical diagnosis and clearance is required for that specific diagnosis. A medical clearance stating that a child is fit for childcare, is required at all times when a rash is or has been present.

## **FAMILY OBLIGATIONS**

- are required to adhere to the Be Heard policies and procedures at all times.
- are required to fully complete the intake form before commencement at Be Heard
- are required to update any changes as they occur.
- must also nominate a minimum of two authorised person/emergency contacts that they authorise Be Heard to contact in the event the family cannot be contacted.

### **If asked to collect unwell or injured children parents and families are required to:**

- collect or make arrangements for the collection of the child as soon as possible (within 1 Hr of notification),
- sign required documentation,
- seek a medical diagnosis,
- Contact Be Heard as soon as practicable advising of the medical diagnosis,

## **BE HEARD PROCEDURES**

- ensure families are provided with information which explains Be Heard's policies and procedures.
- ensure they received a fully completed enrolment form before a child's commencement at Be Heard.
- will ensure enrolment update forms are provided annually.
- will provide staff meetings, or training to update skills and knowledge about incidents, injuries, trauma and child illness if required.
- will ensure all staff have a full understanding of the Be Heard policies and procedures.

## **STAFF PROCEDURES**

- are encouraged to attend staff meetings and training to update their skills and knowledge about incidents, injuries, trauma and child illness if required
- must ensure effective supervision is maintained at all times to reduce the number of preventable injuries occurring
- will ensure appropriate first aid response to any injury with the aim being to reduce any worsening of the injury
- must notify Rhyannon immediately following an incident, injury, trauma or illness
- are required to notify the family to advise of the symptoms observed and advise the family when they need to collect the child
- are required to advise the family that they will need to get a medical diagnosis and advise the office before the child returns
- will keep records of anything a child may tell them that a reasonable person deems may cause trauma to the child
- will show respect towards the child whilst ensuring they protect themselves from infection
- will ensure they speak to the children in a calm reassuring tone

### 3. Sources and References

- Raising Children Network
- Staying Healthy in Care

### 4. Review

Date Reviewed	Modifications	Next Policy Review Date
December 2020	Creation of Policy	December 2021

### IMPORTANT NOTICE AND DISCLAIMER

This is an important notice to all Families, staff, contractors, and other users of this Policy.

1. This Policy has been prepared by Be Heard based on the information available as at the issue date. Be Heard reserves the right to vary this Policy at any time, including to take into account any changes to the legislation and legislative instruments that may apply from time to time.
  
2. While all reasonable care is taken in preparing this Policy, Be Heard does not make any warranty about or accept any responsibility for whether the Policy complies with, accurately interprets or adequately implements all legislation and legislative instruments that may apply from time to time.
  
3. To the greatest extent permitted by law, Be Heard disclaims all liability to any person in respect of anything, and of the consequences of anything, done or omitted to be done by any such person in reliance, whether wholly or partially, upon any information presented in this Policy.