

NQS

QA 2	2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
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National Regulations

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Aim

The Centre and all educators can effectively respond to and manage accidents, illness and emergencies which occur at the Centre to ensure the safety and wellbeing of children, educators and visitors.

Related Policies

- Death of a Child Policy
- Emergency Service Contact Policy
- Emergency Management and Evacuation Policy
- Enrolment and Orientation Policy
- Food, Nutrition, Beverage and Dietary Requirements Policy
- Health and Hygiene Policy
- Dealing with Infectious Diseases Policy
- Dealing with Medical Conditions Policy

Procedures

The First Aid Policy, procedures and practices are designed to support educators/staff to:

- Preserve life.
- Ensure that ill or injured persons are stabilised and comforted until medical help intervenes.
- Monitor ill or injured persons in the recovery stage.
- Apply further first aid strategies if the condition does not improve.
- Ensure that the environment is safe and that other persons are not in danger of becoming ill or injured.

The following incidents are examples of when first aid is required:

- Life threatening injury or illness, such as loss of consciousness leading to respiratory or cardiac arrest.
- Sudden Infant Death Syndrome (SIDS).
- Choking and / or blocked airway.
- Allergic reaction, such as anaphylactic shock to nuts or seafood.
- Injury to the head, back or eye.
- Bleeding or bone fracture.
- High temperatures and febrile convulsions.
- Asthma attack.
- Burns (including sunburn).
- Excessive vomiting leading to dehydration.
- Poisoning from either hazardous chemicals, substances, plants or snake or spider bites.

The Centre recognises that First Aid responses to people suffering from an emotional or psychological condition are also important. The conditions can include:

- Severe stress resulting from a workplace or personal situation.
- Anxiety attack.
- Emotional breakdown and loss of reasoning.
- It is understood that there is a shared legal responsibility and accountability between, and a commitment by, all persons to implement the Centre's Administration of First Aid Policy, procedures and practices.
- The Centre also complies with OHS National Standards, codes of practice, Australian Standards and best practice recommendations from recognised authorities.

Parents Records / Administration

It is imperative that the Centre impresses upon parents the necessity to ensure that, at all times, the Centre has up-to-date contact information for families. This includes business addresses, phone numbers or emergency contacts. Therefore, it is essential that the Centre ensure that its administrative records are well maintained at all times. Parents are asked to complete a 'Change of Detail' form when they update Enrolment Information.

Staff First Aid Training

- Each staff member is required to have their First Aid Certificate current at all times.
- Each staff member will complete CPR Training Annually.
- Each staff member is required to be trained in Anaphylaxis Management.
- Each educator is required to be trained in Asthma Management.

First Aid Kits

- The Centre holds a main First Aid Kit which is located in the _____.
- The Centre holds a base First Aid Kit in each Emergency bag located in the Kitchen and each children's room in the Centre.
- Each kit contains compliance products.
- Each term first aid kits are reviewed and replenished ('First Aid Stock Checklist').

Excursion First Aid Kit – The Centre maintains a portable first aid kit which can be removed from the Centre when required.

General First Aid Measures

Should the Nominated Supervisor / Certified Supervisor or educator see a difference in a child's appearance or behaviour they should immediately call 000 for medical assistance.

- Allergy and special requirement charts are located in each room and kitchen (special plans, e.g. convulsions also in rooms). There is a main action plan file in the office / reception including each child's action plan that attends the Centre.
- Anaphylaxis – each child has their individual plan displayed in the appropriate room and at office / reception and family grouping room.
- Asthma – each child has their individual plan displayed in the appropriate room and at office / reception and family grouping room.
- Ice packs are kept in the freezer in the kitchen.
- Stings and bites / accidents – follow first aid procedures – seek medical attention if child shows signs of illness, parents to be notified.
- Inhalation of fumes – follow first aid procedures – seek medical attention if child shows signs of illness, parents to be notified.
- Skin burns – follow first aid procedures – seek medical attention immediately, parents to be notified.
- Swallowing Poisonous substances – call the Poisons hotline, follow first aid procedures – seek medical attention if child shows signs of illness, parents to be notified.

(Please refer to the emergency contact numbers located next to each phone).

Contamination Buckets

Contamination buckets are kept in the laundry. The Blood and Vomit buckets contain gloves, paper towels, face washer, plastic bag, tissues and a disposable drinking cup.

- **Blood Bucket (RED)** – Blood to be wiped with face washer or paper towel, put into plastic bag and placed into the kitchen bin. Always wear gloves.
- **Vomit Bucket (YELLOW)** – Vomit to be wiped with face washer or paper towel, put into plastic bag and placed into the kitchen bin. Always wear gloves.
- **Mouthing Bucket (GREEN)** – Equipment that has been mouthed needs to be placed into the mouthing bucket and disinfected. Always wear gloves.
- **General Soaking Bucket (BLUE)** – Soiled items that require soaking can be placed into the bucket with disinfectant or nappy soaker. Always wear gloves. This bucket requires a lid.

Resuscitation

At all times resuscitation must be attempted and maintained until Ambulance Officers arrive and take charge of the situation.

- **If Resuscitation Fails**
Request that the Ambulance Officers wait with the baby / child until the parents arrive. This will allow them the opportunity to see their child and talk to the Ambulance Officers, as well as the child's care worker who had care of their child.
- **If Resuscitation Fails and it is a case of Suspected SIDS**
Telephone Red Nose on 1300 308 307. They will arrange for a counsellor to contact the family and also come directly to the Centre to assist all concerned.

Resuscitation Protocol

Staff hereafter to be referred to as Staff 1, 2, 3, 4.

Staff No. 1 – Trained in First Aid

- a) Checks that there is indeed a need for resuscitation and then proceeds appropriately with C.P.R or E.A.R as the situation demands.
- b) Continue with resuscitation efforts until ambulance officers arrive.

Staff No. 2

Your role is to support and assist Staff No. 1 at all times.

Staff No.3 – Rings ambulance calmly and gives the following details:

- a) Name of Centre
- b) Address of Centre
- c) Melways Reference Number
- d) Phone Number
- e) Resuscitation of infant / child in progress
- f) Ambulance required

Please refer to the Emergency Procedure instructions located next to the phone

Staff No. 3

- a) Reports to Staff No.1 and 2 that assistance is on the way.
- b) Then go to the front of the Centre in order to direct Emergency Services directly to the Resuscitation area.
- c) On arrival of the Ambulance Officers, you are to immediately join Staff No.4 and assist in the care and wellbeing of remaining children.

Staff No. 1 and 2

- a) On arrival of Ambulance Officers, the direct care of the infant / child is handed over. Your role is now to give information as required and to support one another.
- b) On arrival of the parents give all details and support remembering that the parents, just as yourselves, are shocked, frightened and traumatised and may not behave as normal.

Staff No.4

- a) Your role is to keep remaining children in the Centre safe and calm until you are joined by Staff No. 3.
- b) If the children have been outside – bring them to an inside area. It is your role to keep the emergency area clear of anyone but emergency staff at all times.

Death of a Child

In the event where there is a death of a child in the Centre the nominated supervisor or certified supervisor will follow and implement this procedure:

- Attempt CPR pursuant to current guidelines until medical assistance arrives.
- Call an ambulance immediately on 000.
- The Nominated Supervisor will call the parents / guardians of the child and arrange to meet at the hospital.
- Medical staff will advise parents.
- Notify Victorian Police Department.
- Notify the Approved Provider.
- Notify Regulatory Authority (initially by phone call).

Notification of a Serious Incident

- The death of a child being educated and cared for at the Centre, or following an incident while being educated and cared for at the Centre, is a 'serious incident' under the National Law. The Approved Provider will notify the regulatory authority as soon as practicable and within 24 hours of the death.
- Collate statements of events from all educators and staff directly caring for and educating the child at the time of death.
- Under the Education and Care National Regulations 2011, the documentation will be kept until the end of 7 years after the death.

Please note:

When police are contacted, if they are unable to personally collect parents from their place of work / home, then they must be asked to arrange for somebody to drive the parents to the Centre or hospital. Under no circumstances should the distressed and traumatised parents be left to drive themselves to the Centre. Police will come and question staff and take a statement, as by law they must investigate all deaths where the cause of death is not known, including SIDS. The Coronial Services Centre procedures are designed to protect the rights and interests of all who are concerned in the investigation. It is advisable for the carer and a senior member of staff to see the child after death for identification and to help with the acceptance of loss.

Work Health and Safety (OHS) requirements

Centres should contact Work Cover to determine requirements under current legislation. *Under the new laws:*

- The death of a person is a 'notifiable incident'.
- The Approved Provider or Nominated Supervisor must notify Work Cover by telephone or in writing (including by facsimile or email) as soon as possible after the death.
- Records of the incident must be kept for at least 7 years from the date that the incident is notified.
- The Approved Provider / Nominated Supervisor must ensure the site where the death occurred is left undisturbed as much as possible until an inspector arrives or as directed by Work Cover.

Communication (Other Parents and Children)

The Approved Provider will prepare a statement to communicate the death of the child to educators, families, children and the media.

This statement will be released once the investigations by authorities have been completed.

Until such time, all educators and knowing parties will be bound by the Centre's Privacy and Confidentiality Policy.

When the immediate emergency situation has finished, the long lasting trauma will continue and all staff, parents of attending children and probably some of the children themselves will need to be given the opportunity to come to terms with and handle their grief.

The Approved Provider will appoint a counselling and grief service for all educators, children and families.

Review

The policy will be reviewed annually. The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Last reviewed: 19.07.2023

Date for next review: July 2024