

# NQS2 Children's health and safety Procedure

# **Child/Centre Incident Reporting**

#### **Incident documentation**

The following child and centre incidents must be documented via a <u>Child/Centre Incident Record</u>:

- o injury an instance of being injured
- o **illness** disease or period of sickness affecting the body or mind)
- trauma harm/potential harm to emotional or physical wellbeing after experiencing an event or circumstance
- near miss an incident that almost occurred which may have caused serious injury or trauma
- lockdown
- evacuation
- security breach
- o environmental/property damage

For adult incidents, complete online Adult Incident
Record and follow Workplace Health and Safety Incident
Reporting Procedure.

o environmental/p	property damage	
	Director/Responsible Person in Charge	Teacher/Educator
Recording Keeping	<ul> <li>Ensure the above child and centre incidents are documented via a Child/Centre Incident Record as soon as practical, but no later than 24hrs of any incident occurring (Reg. 87).</li> <li>Review, sign, and date all completed Child/Centre Incident Records. When needed, provide feedback, and ask teachers/educators to amend or re-do records if completed incorrectly.</li> <li>Confidentially archive completed Child/Centre Incident Records until child has reached the age of 25 (Reg.183). Completed Child/Centre Incident Records can be scanned, uploaded, and archived to a child's Kidsoft record. Once completed, confidentiality destroy hard copy records.</li> </ul>	<ul> <li>Document the above child and centre incidents via a Child/Centre Incident Record as soon as practical, but no later than 24hrs of any incident occurring (Reg. 87).</li> <li>Record factual information. Do not include emotive language.</li> <li>When multiple children are involved in an incident, complete a separate record for each child, without identifying other children involved.</li> <li>Promptly inform the Director/Responsible Person in Charge (RPIC) of an incident as soon as practically possible.</li> <li>Never take a photograph or recording of a child's injury.</li> </ul>
Child is injured at centre and parents/guardians wish to make a claim under C&K's Child Accident Insurance policy	Provide parents/guardians a copy of the <u>Child Accident Insurance Procedure</u> and <u>Child Accident Claim Form</u> . Instruct parent/guardian to complete and return form to the Director/RPIC.  Director/RPIC to complete to relevant <u>Child Accident Claim Form</u> section to confirm child was enrolled/attended the centre.  Director/RPIC returns completed form to child's parents/guardians. Parent/guardian submits completed form to C&K's insurers.  When speaking to parents/guardians, do not make any promises or create any expectations. State that the insurers will handle the claim and the merits thereof.	
Child arrives at centre with an injury	<ul> <li>Determine (at your discretion) if the injury (including if applicable the parent/guardian's account of how their child was injured) should be documented via a Child/Centre Incident Record. If a record is made, classify the injury as a 'injury on intake' on the Child/Centre Incident Record.</li> <li>When a parent/guardian or child has not advised how the injury occurred upon arrival, assess the seriousness of the injury, and determine if parents/guardians should be telephoned to ascertain further details. Ask parent/guardian to review, sign and date the record upon their arrival to collect their child.</li> </ul>	Where applicable, follow Responding to and Reporting a Child Protection Concern Procedure when there is a reasonable suspicion that a child has suffered, is suffering, or is at unacceptable risk of suffering, significant harm caused by physical or sexual abuse, and there is not a parent/guardian willing and able to protect the child from harm.



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### Notifying parents/guardians of incidents involving their child

### Teachers/educators will:

- Notify parents/guardians as soon as practical but no later than 24hrs of any incident involving their child. (Reg. 86)
- Assess the seriousness of an incident and determine if a child's parents/guardians should be notified immediately by telephone and/or informed face to face upon collecting their child on the same day of the incident occurring.
- Immediately notify parents/guardians by telephone if their child:
  - Has injured their head or face.
  - o Is displaying <u>signs or symptoms of concussion</u>. Direct parents/guardians to collect their child as soon as possible and seek urgent medical treatment.
  - Has been bitten by another child.
- Ask parents/guardians to review, sign and date their child's *Child/Centre Incident Record*. Provide a copy to parents/guardians when requested.

#### Notifiable incidents and circumstances

The Education and Care Services National Law, requires centres to notify the regulatory authority when the following

incidents and circumstances occur. Strict reporting timeframes apply.

Incidents and circumstances  Incidents and circumstances	Reporting timeframe
<ul> <li>Any incident involving a serious injury or trauma to a child while attending a centre, which:         <ul> <li>a reasonable person would consider required urgent medical attention from a registered medical practitioner; or</li> <li>the child attended or ought to have reasonably attended a hospital e.g., broken limb). In some rural and remote locations, a GP completes consultations in a hospital.</li> </ul> </li> <li>Any incident involving serious illness of a child while attending a centre and the child attended or ought to have reasonably attended a hospital e.g., acute asthma, seizure, or anaphylaxis.</li> <li>Any emergency for which emergency services attended. Not all instances that required the attendance of emergency services need to be reported. An emergency is defined as an incident or event where there is an imminent or severe risk to a person's health, safety and wellbeing.</li> <li>A child is missing or cannot be accounted for.</li> <li>A child appears to have been removed from the premises by a person not authorised by a parent/guardian.</li> <li>A child is mistakenly locked in or out of the premises or any part of the premises.</li> <li>Any incident requiring the centre to close or reduce the number of children attending the centre for any period.</li> <li>The centre is educating and caring for an extra child(ren) due to an emergency.</li> </ul>	24hrs
<ul> <li>The death of a child while at a centre or following an incident while attending a centre.</li> <li>Any incident of physical and/or sexual abuse of a child(ren) has occurred or is occurring while the</li> </ul>	7 days
child is being educated and cared for by the centre.	
<ul> <li>Any circumstance that poses a significant risk to the health, safety and wellbeing of a child attending the centre.</li> </ul>	

Notifiable incident and circumstance reporting steps		
Teachers/ Educators will:	<ol> <li>Immediately notify Director/RPIC.</li> <li>Complete <u>Child/Centre Incident Record</u>.</li> </ol>	
Director/ RPIC will:	<ol> <li>As soon as practical, within 24hrs of the incident occurring, notify parent/guardian. Ask parent to review, sign and date completed <u>Child/Centre Incident Record</u>.</li> <li>Within 12hrs → Notify C&amp;K Early Childhood Education Manager (ECEM).</li> <li>Within 24hrs → Notify local regulatory authority via phone.</li> <li>Within 12hrs → Complete relevant C&amp;K <u>online intranet notification form</u>.</li> <li>Within 7 days → Complete C&amp;K online <u>Incident Review</u>.</li> </ol>	
Q&R Team will:	Submit notification via NQAITS within reporting timeframes.	
Chief Operations Officer will:	10. Sight notification.	



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### Notifiable complaints and allegations

Centres are required to notify the regulatory authority when certain complaints and allegations are received. Strict reporting timeframes apply.

Complaints and allegations		Reporting timeframe
•	Any complaint alleging that a serious incident has occurred or is occurring at an education and care centre.  Any complaint alleging that the Education and Care Services Law/Regulations has been breached.	24 hours
•	An allegation that physical or sexual abuse of a child(ren) has occurred or is occurring while the child is being educated and cared for by the centre.	7 days

Notifiable complaint/allegation reporting steps		
Teachers/ Educator will:	<ol> <li>Listen and thank person for raising their concern/allegation. Provide reassurance their complaint will be addressed. Refer to <i>Information Sheet - Complaint Handling Tips</i>.</li> <li>Immediately notify Director/RPIC.</li> </ol>	
Director/ RPIC will:	<ol> <li>Implement <u>Complaint Management Procedure</u> responsibilities.</li> <li>Within 12hrs → Notify ECEM.</li> <li>Within 24hrs → Notify local regulatory authority via phone.</li> <li>Within 12hrs → Complete relevant C&amp;K <u>online intranet notification form</u>.</li> </ol>	
Q&R Team will:	<ul><li>7. Add complaint to the online feedback register and assign a Case Manager.</li><li>8. Submit notification via NQAITS within reporting timeframes.</li></ul>	
Chief Operations Officer will:	9. Sight notification.	

### A complex and escalating child behaviour incident reporting

A complex and escalating child behaviour is a single incident or behaviour patter that posed a **significant** risk to a person's (child or adult) health, safety and/or well-being.



Except for the purpose of protecting the immediate safety of a child, do not apply any physical force that holds or restricts a child against their will to force compliance. e.g. restraining, pulling, pushing or grabbing.

Complex and escalating child behaviour incident reporting steps		
Teachers/	Immediately notify Director/RPIC.	
Educator will:	2. Complete <u>Child Behaviour Record</u> . When physical force/intervention was required, complete a <u>Child/Centre Incident Record</u> instead of a <u>Child Behaviour Record</u> .	
	3. If an adult injury occurred as result of a child's behaviour, complete via online <u>Adult Incident Record</u> and follow <u>Workplace Health and Safety Incident Reporting Procedure</u> .	
Director/RPIC will:	4. As soon as practical, within 24hrs of the incident occurring, notify parent/guardian. Ask parent/guardian to review, sign and date	



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and Risk Assessment - Complex Behaviours.

10. Upload documents to Kidsoft under the child's document tab.

### Identifying, reflecting upon and responding to incident trends

As per National ACECQA NQAITS Data (March 2023):

Most common types of injury, trauma or illness	Common causes	Incidents are more likely to happen
<ul> <li>Cuts/open wounds or bleeding</li> <li>Broken bones/fractures or dislocations</li> <li>Head injuries or concussions</li> </ul>	<ul> <li>A fall or trip</li> <li>Child to child interaction</li> <li>Equipment/furniture or toys</li> </ul>	<ul> <li>Outdoors</li> <li>Mid-morning (10 to 11am) and mid-afternoon (3 to 4pm)</li> <li>During the middle of the week (Tuesday to Thursday)</li> <li>To children aged 3 to 4 years old</li> <li>To make children</li> </ul>

Teachers/educators have responsibility for supporting the health, safety and wellbeing of all children. In exercising their responsibilities, they must take reasonable care to protect children from foreseeable risk of harm, injury and infection.

- Identifying and reflecting on incident trends (via optional tool <u>Identifying and Reflecting on Incident Trends</u>) is an important element of continuous improvement and ensuring a safe environment for children.
- When a trend is identified, implement preventative actions to improve practice and minimise the risk of incidents re-occurring. Strategies include:
  - Modifying the centre environment e.g. removing equipment, rearranging layout and/or installing safety equipment.
  - Regular audit, quality and risk assessments to identify hazards and rectify issues.
  - o Reviewing best practice guidance from recognised authorities e.g. <u>Staying Healthy: Preventing infectious diseases in early childhood education and care services, Kidsafe.</u>
  - Discussions, reminders and regular communication with children and families about health and safety practices.
  - o Staff training and development in relation to children's health and safety.
  - o Establishing dedicated roles/teams responsible for health, safety and wellbeing.

#### **Acknowledgements and references**

- ACECQA Reporting requirements about children
- ACECQA Managing and reponing to injury, trauma and illness incidents