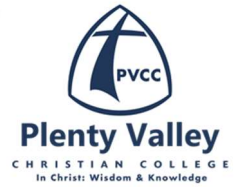


# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory - Quality area 2



Document classification: <b>Policy</b>	Version: <b>1.8</b>	Date: <b>11/04/2024</b>
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## PURPOSE

This policy will define the:

- procedures to be followed if a person is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma
- responsibilities of staff, parents/guardians and the Approved Provider when a person is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma
- practices to be followed to reduce the risk of an incident occurring at the service.

## POLICY STATEMENT

### Values

Plenty Kids Early Learning Centre is committed to:

- providing a safe and healthy environment for all children, staff, volunteers, students on placement and any other persons participating in or visiting the service
- responding to the needs of an injured, ill or traumatised person at the service
- preventing injuries and trauma
- preventing the spread of illness through simple hygiene practices, monitoring immunisation records and complying with recommended exclusion guidelines
- maintaining a duty of care to children and users of Plenty Kids Early Learning Centre.

### Scope

This policy applies to the Approved Provider, persons with management or control, Nominated Supervisor, persons in day-to-day charge, early childhood teachers, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities at Plenty Kids Early Learning Centre, including during offsite excursions and activities.

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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RESPONSIBILITIES	Approved provider and persons with management or	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring the <i>Incident, Injury, Trauma and Illness Policy</i> and procedures are in place ( <i>Regulations 168</i> ) and available to all stakeholders ( <i>Regulations 171</i> )	R	√			
Taking reasonable steps to ensure that nominated supervisors, early childhood teachers, educators, staff and volunteers follow the policy and procedures and are aware of their responsibilities ( <i>Regulations 170</i> )	R	√			
Ensuring that the premises are kept clean and in good repair	R	R	√		√
Maintaining effective supervision ( <i>refer to Supervision of Children Policy</i> ) for all enrolled children in all aspects of the service's program that is reflective of the children's needs, abilities, age and circumstances	R	R	√		
Regularly checking equipment in both indoor and outdoor areas for hazards ( <i>refer to Attachments 2, 3 and 4</i> ), and taking the appropriate action to ensure the safety of the children when a hazard is identified	R	R	√		
Being proactive, responsive and flexible in using professional judgments to prevent injury from occurring	R	R	√		√
Having ready access to an operating telephone or other similar means of communication to enable immediate communication to and from parents and emergency services	R	√	√		
Ensuring that staff have access to medication and Incident, Injury, Trauma and Illness Record forms ( <i>available from School Documentation in SEQTA, see Attachment 1</i> )	R	√			
Ensuring that the service has an <i>Occupational Health and Safety Policy</i> and procedures that outline the process for effectively identifying, managing and reviewing risks and hazards that are likely to cause injury, and reporting notifiable incidents to appropriate authorities ( <i>refer to Occupational Health and Safety Policy</i> )	R	√	√		

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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<p>Ensuring that there is a minimum of one educator with a current (within the previous 3 years) approved first aid qualification on the premises at all times (<i>refer to Administration of First Aid Policy</i>)</p> <p>As a demonstration of duty of care and evidence-based practice, ELAA recommends that all early childhood teachers and educators have current (within the previous 3 years) approved first aid qualifications, anaphylaxis management training and asthma management training.</p>	R	√			
<p>Ensuring that there are an appropriate number of up-to-date, fully equipped first aid kits that are accessible at all times (<i>refer to Administration of First Aid Policy</i>)</p>	R	√	√		
<p>Ensuring that children’s enrolment forms contain all the prescribed information, including authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (<i>Regulations 161</i>)</p>	R	√		√	
<p>Notifying 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 (<i>Regulation 162</i>)</p>				√	
<p>Informing the service of an infectious disease or illness that has been identified while the child has not attended the service, and that may impact on the health and wellbeing of other children, staff and parents/guardians attending the service</p>				√	
<p>Ensuring that the service is provided with a current medical management plan, if applicable (<i>Regulation 162(d)</i>)</p>				√	
<p>Notifying the service when their child will be absent from their regular program</p>				√	
<p>Notifying staff/educators if there is a change in the condition of a/their child’s health, or if there have been any recent accidents or incidents that may impact on the child’s care e.g. any bruising or head injuries.</p> <p>Part of the Child Safe Standards, it is important that if a child presents upon arrival to the service with any visible injury or trauma, this should be discussed and documented prior to the parent/guardian leaving the service (<i>refer to Child Safe Environment and Wellbeing policy</i>)</p>	R	√	√	√	√
<p>Responding immediately to any incident, injury or medical emergency (<i>refer to procedures and Administration of First Aid Policy</i>)</p>	R	R	R		
<p>Ensuring that a parent/guardian of the child is notified as soon as is practicable, but not later than 24 hours after the occurrence, if the child is involved in any incident, injury, trauma or illness while at the service (<i>Regulation 86</i>)</p>	R	√	√		

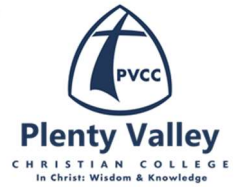
# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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Notifying other person/s as authorised on the child's enrolment form when the parents/guardians are not contactable	R	√	√		
Considering the emotional wellbeing of all children and educators during and following an accident, injury, trauma or illness events	√	√	√		
Ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency	R	√	√		
Ensuing notifications of serious incidents ( <i>refer to Definitions</i> ) are made to the regulatory authority (DE) ( <i>refer to Definition</i> ) through the NQA IT System ( <i>refer to Definitions</i> ) as soon as is practicable but not later than 24 hours after the occurrence	R	√			
Recording details of any incident, injury or illness in the Incident, Injury, Trauma and Illness Record ( <i>refer to Attachment 1</i> ) as soon as is practicable but not later than 24 hours after the occurrence	R	√			
Signing the Incident, Injury, Trauma and Illness Record, thereby acknowledging that they have been made aware of the incident				√	
Reviewing and evaluating procedures after an incident or illness as part of the quality improvement process and taking appropriate action to remove the cause if required. For example, removing a nail found protruding from climbing equipment or retraining staff to adhere more closely to the service's <i>Hygiene Policy</i>	R	√	√		
Ensuring that completed medication records are kept until the end of 3 years after the child's last attendance ( <i>Regulation 92, 183</i> )	R	√			
Ensuring that Incident, Injury, Trauma and Illness Records are maintained and stored securely until the child is 25 years old ( <i>Regulations 87, 183</i> ) ( <i>refer to Privacy and Confidentiality Policy</i> )	R	√			
Communicating with families about children's health requirements in culturally sensitive ways and implementing individual children's medical management plans, where relevant	R	√	√	√	
Being contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical attention				√	
Requesting the parents/guardians make arrangements for the child or children involved in an incident or medical emergency to be collected from the service, or informing parents/guardians if an ambulance has been called	R	√	√	√	
Collecting their child as soon as possible when notified of an incident, injury or medical emergency involving their child				√	
Arranging payment of all costs incurred when an ambulance service required for their child at the service				√	

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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## PROCEDURES

Ensuring that the following contact numbers are displayed in close proximity of each telephone:

- 000
- DE North Eastern Melbourne (Greensborough Office) – 1300 338 691
- Approved provider (Plenty Valley Education Limited)
- Asthma Australia: 1800 278 462
- Victorian Poisons Information Centre: 13 11 26
- Nillumbik Shire – 03) 9433 3111

### When there is a medical emergency, all staff will:

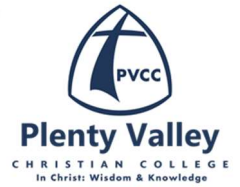
- call an ambulance, where necessary
- administer first aid, and provide care and comfort to the child prior to the parents/guardians or ambulance arriving
- implement the child's current medical management plan, where appropriate
- notify parents/guardians as soon as is practicable of any serious medical emergency, incident or injury concerning the child, and request the parents/guardians make arrangements for the child to be collected from the service and/or inform the parents/guardians that an ambulance has been called
- notify other person/s as authorised on the child's enrolment form, if the parents/guardians are not contactable
- ensure ongoing supervision of all children in attendance at the service
- accompany the child in the ambulance when the parents/guardians are not present, provided that staff-to-child ratios can be maintained at the service
- notify the approved provider of the medical emergency, incident or injury as soon as is practicable
- complete and submit an incident report to DET, the approved provider and the service's public liability insurer following a serious incident.

### When a child develops symptoms of illness while at the service, all staff will:

- observing the symptoms of children's illnesses and injuries and systematically recording and sharing this information with families (and medical professionals where required)
- ensure that the nominated supervisor, or person in day-to-day care of the service, contacts the parents/guardians or authorised emergency contact for the child
- request that the child is collected from the service if the child is not well enough to participate in the program
- ensure that they separate the child from the group and have a staff member remain with the child until the child recovers, a parent/guardian arrives or another responsible person takes charge
- call an ambulance (*refer to definition of medical emergency*) if a child appears very unwell or has a serious injury that needs urgent medical attention
- ensure that the child is returned to the care of the parent/guardian or authorised emergency contact person as soon as is practicable
- ensure that, where medication, medical or dental treatment is obtained, the parents/guardians are notified as soon as is practicable and within 24 hours, and are provided with details of the illness and subsequent treatment administered to the child
- ensure that the approved provider is notified of the incident
- ensure that the Incident, Injury, Trauma and Illness Record is completed as soon as is practicable and within 24 hours of the occurrence.

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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**Details that must be entered in the Incident, Injury, Trauma and Illness Record include the following:**

- the name and age of the child
- the circumstances leading to the incident, injury or trauma, or relevant circumstances surrounding the child becoming ill (including any 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
- the action taken by the service, including any medication administered, first aid provided or medical personnel contacted
- details of any person who witnessed the incident, injury or trauma, or the apparent onset of illness
- the name of any person the service notified, or attempted to notify, of any incident, injury, trauma or illness that a child suffered while being educated and cared for by the service, and the time and date of the notifications/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
- signature of a parent/guardian to verify that they have been informed of the occurrence.

**All information will be included in the Incident, Injury, Trauma and Illness Record as soon as practicable, but not later than 24 hours after the incident, injury, trauma, or the onset of the illness.**

## Background and legislation

### Background

People responsible for managing early childhood services and caring for children have a duty of care towards those children. All service staff have a responsibility and a duty of care to act to prevent accidents and emergencies at the service.

An approved service must have policies and procedures in place in the event that a child is injured, becomes ill or suffers trauma. These procedures should be followed and must include the requirement that a parent/guardian be notified in the event of an incident, injury, illness or trauma relating to their child as soon as possible and within 24 hours of the occurrence.

The [National Regulations](#) require an accurate *Incident, Injury, Trauma and Illness Record* to be kept and stored confidentially until the child is 25 years old ([Regulation 183\(2\)](#)).

Under the national legislation, each service must ensure that an entry is recorded in the Incident, Injury, Trauma and Illness Record for the following occurrences:

- an incident in relation to a child, an injury received by a child or trauma to which a child has been subjected
- an illness that becomes apparent.

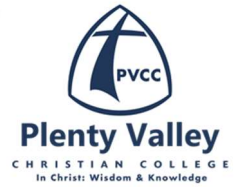
Medical emergencies may include serious health issues such as asthma, anaphylaxis, diabetes, fractures, choking and seizures. Such emergencies generally involve only one child, however they can affect everyone in the children's service. In some cases it will be appropriate to refer to specific policies for guidance, such as the *Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis and Allergic Reactions Policy, Diabetes Policy and Epilepsy and Seizures Policy*.

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# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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## Legislation and standards

Relevant legislation and standards include but are not limited to:

- Australian Standards AS3745–2002, Emergency control procedures for buildings, structures and workplaces
- *Education and Care Services National Law Act 2010*: Section 174(2)
- *Education and Care Services National Regulations 2011*: Regulations 77, 85–87, 103, 177, 183
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)
- *Occupational Health and Safety Act 2004* (Vic)
- *Occupational Health and Safety Regulations 2007*
- WorkSafe Victoria Compliance Code: *First aid in the workplace* (2008)
- National Quality Standard, Quality Area 2: Children’s Health and Safety
- National Quality Standard, Quality Area 3: Physical Environment
- National Quality Standard, Quality Area 7: Governance and Leadership
- Therapeutic Goods Act 1989 (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: [www.legislation.vic.gov.au](http://www.legislation.vic.gov.au)
- Commonwealth Legislation – Federal Register of Legislation: [www.legislation.gov.au](http://www.legislation.gov.au)

## Definitions

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Notifiable complaints, Serious Incidents, Duty of Care, etc.

**Emergency services:** Includes ambulance, fire brigade, police and state 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](http://www.acecqa.gov).

**Hazard:** A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

**Incident:** Any unplanned event resulting in or having potential for injury, ill health, damage or other loss.

**Incident, Injury, Trauma and Illness Record:** Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. The Approved Provider must ensure an Injury, Trauma and Illness Record is kept in accordance with [Regulation 87 of the Education and Care Services National Regulations 2011](#) and kept for the period of time specified in [Regulation 183](#). A sample is available on the ACECQA website: [www.acecqa.gov](http://www.acecqa.gov) (search ‘Sample forms and templates’).

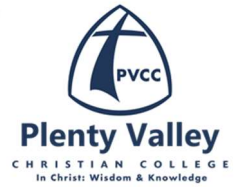
**Injury:** Any physical damage to the body caused by violence or an incident.

**Medical attention:** Includes a visit to a registered medical practitioner or attendance at a hospital.

**Medical emergency:** An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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**Medication:** Medicine within the meaning of the *Therapeutic Goods Act 1989* 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](http://tga.gov.au)

**Medical management plan:** A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCIA) action plan for anaphylaxis.

**Minor incident:** An incident that results in an injury that is small and does not require medical attention.

**Trauma:** An emotional wound or shock that often has long-lasting effects or any physical damage to the body caused by violence or an incident.

## Sources and related policies

### Sources

- ACECQA sample forms and templates: [www.acecqa.gov.au](http://www.acecqa.gov.au)
- Building Code of Australia: [www.abcb.gov.au](http://www.abcb.gov.au)
- Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th edition, 2013) National Health and Medical Research Council: [www.nhmrc.gov.au](http://www.nhmrc.gov.au)
- VMIA Insurance Guide, Community Service Organisations program: [www.vmia.vic.gov.au](http://www.vmia.vic.gov.au)
- WorkSafe Victoria: Guide to Incident Notification: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)
- WorkSafe Victoria: Online notification forms: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

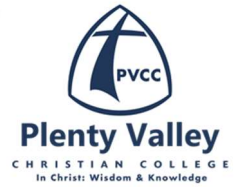
### Related policies

- [Administration of Medication Policy](#)
- [Anaphylaxis and Allergic Reactions Policy](#)
- [Asthma Policy](#)
- [Child Safe Environment and Wellbeing Policy](#)
- [Dealing with Infectious Diseases Policy](#)
- [Dealing with Medical Conditions Policy](#)
- [Delivery & Collection of Children Policy](#)
- [Diabetes Policy](#)
- [Emergency and Evacuation Policy](#)
- [Epilepsy Policy](#)
- [Excursions and Service Events Policy](#)
- [Hygiene Policy](#)
- [Occupational Health and Safety Policy](#)
- [Privacy and Confidentiality Policy](#)
- [Road Safety and Safe Transport Policy](#)



# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

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## EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider of Plenty Kids Early Learning Centre will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- review and analyse information gathered from the Incident, Injury, Trauma and Illness Record and staff first aid records regarding incidents at the service
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk ([Regulation 172 \(2\)](#)).

## ATTACHMENTS

- **Attachment 1:** [Incident, Injury, Trauma and Illness Record](#)
- **Attachment 2:** Daily Safety Check
- **Attachment 3:** Weekly Safety Check

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory - Quality area 2

## Attachment 1:

### Incident, Injury, Trauma and Illness Record

**Incident, injury, trauma and illness record**

plenty kids  
Early Learning Centre

Plenty Valley  
CHRISTIAN COLLEGE

**Details of person completing this record**

Name \_\_\_\_\_  
 Position/role \_\_\_\_\_  
 Service name \_\_\_\_\_

Date record was made \_\_\_\_\_ Time record was made \_\_\_\_\_  
 \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Signature \_\_\_\_\_

**Child details**

Child's full name \_\_\_\_\_  
 Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_  
 \_\_\_\_\_ Female  Male

**Incident/injury/trauma/illness details**

Incident/injury/trauma/illness Date \_\_\_\_\_ Time \_\_\_\_\_  
 \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Location of service \_\_\_\_\_  
 Location of incident/injury/trauma/illness \_\_\_\_\_  
 Name of person who witnessed the incident/injury/trauma/illness \_\_\_\_\_

Witness signature \_\_\_\_\_ Date \_\_\_\_\_

Details of incident/injury/trauma/illness \_\_\_\_\_

1

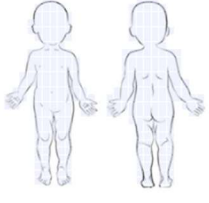
Circumstances leading to the incident/injury/trauma/illness, including any apparent symptoms \_\_\_\_\_

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) \_\_\_\_\_

2

Nature of injury/trauma/illness:



Indicate the part of the body affected on this diagram

- 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

Time emergency services contacted \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Time emergency services arrived \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

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

If yes to either of the above, provide details \_\_\_\_\_

3

Have any steps been taken to prevent or minimise this type of incident in the future? If yes, provide details. \_\_\_\_\_

**Notifications (including attempted notifications)**

Parent/guardian/carer  
 Date \_\_\_\_\_ Time \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Director/educator/coordinator  
 Date \_\_\_\_\_ Time \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Other agency (if applicable)  
 Date \_\_\_\_\_ Time \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

Regulatory authority (if applicable)  
 Date \_\_\_\_\_ Time \_\_\_\_\_ :\_\_ am \_\_:\_\_ pm

**Parental acknowledgement:**

I, \_\_\_\_\_ (name of parent/guardian/carer)  
 have been notified of my child's  incident  injury  trauma  illness.  
 (Please select either incident/injury/trauma/illness)

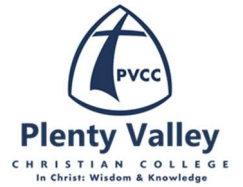
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Additional notes:** \_\_\_\_\_

4

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory - Quality area 2



## Attachment 2:

### Daily Safety Check

### Daily Safety Check

Plenty Kids Early Learning Centre

Hi, Rebecca. When you submit this form, the owner will see your name and email address.

\* Required

1. **Date safety check completed** \*

Please input date (dd/MM/yyyy)

2. **Current school Term** \*

Term 1  
 Term 2  
 Term 3  
 Term 4

3. **Current school week** \*

Week 1  
 Week 2  
 Week 3  
 Week 4  
 Week 5  
 Week 6  
 Week 7  
 Week 8  
 Week 9  
 Week 10  
 Week 11

4. **Outdoor Safety Check** \*

Check **sand pit** for foreign objects and remove.

Check for signs of **animal litter** and clean.

Check **gaps around fence line** to ensure no boards have been displaced.

Check **gates are secured** (closed and locked).

Check whole area for **any wildlife** that may have entered the premises (snakes, spiders etc).

Moveable **climbing equipment** in good repair and is attached with fasteners where provided.

**Climbing equipment** on soft fall area or has crash mats positioned accordingly.

Check **height of soft fall** is at a compacted depth of 250 mm & in areas of high use 300mm or more.

**Soft fall area clear** of hazards (e.g. rocks, toys etc).

Surfaces clear of **hazards**.

Check the **water pump** to ensure it is working correctly.

5. **Indoor Safety Check** \*

**Poisons** out of reach.

**First Aid Cabinet** closed.

No **sharp objects** on floor.

Power points have **safety plugs** fitted.

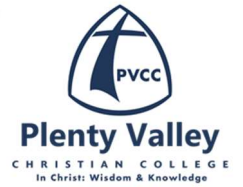
6. **Comments:**

Enter your answer

**Submit**

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory - Quality area 2



## Attachment 3:

### Weekly Safety Check

### Weekly Safety Check

Plenty Kids Early Learning Centre

Hi, Rebecca. When you submit this form, the owner will see your name and email address.

\* Required

1. **Date safety check completed \***

Please input date (dd/MM/yyyy)

2. **Current school Term \***

Term 1  
 Term 2  
 Term 3  
 Term 4

3. **Current school week \***

Week 1  
 Week 2  
 Week 3  
 Week 4  
 Week 5  
 Week 6  
 Week 7  
 Week 8  
 Week 9  
 Week 10  
 Week 11

4. **Items Checked \***

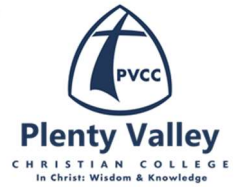
- Equipment has no broken or missing parts.
- No flaking metal or welds broken.
- All padding is in good condition.
- All moving parts are adequately lubricated.
- No flaking paint, visible rust or corrosion.
- No exposed bolts.
- Guard rails and hand rails are secure
- Shackle bearings and wire ropes are operating smoothly.
- Ropes, nets and attachment points are sound.
- Shade cloths are not damaged and are secure.
- Concrete footings are not exposed.
- Timbers are not splintering.

5. **Comments:**

Enter your answer

# INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory - Quality area 2



## DOCUMENT HISTORY AND VERSION CONTROL RECORD

**Name of document:** PKELC Incident, Injury, Trauma and Illness Policy

**Responsible officer:** Centre Administrator

**Approved by:** Principal (Approved Provider)

**Assigned review period:** Annually

**Date of next review:** April 2025

**Category:** Staff & Parents

Version number	Version date	Responsible officer	Amendment details
0.1	04/12/2017	Centre Director	Initial issue as a controlled document
1.0	20/04/2018	Principal	Approved policy
1.1	09/04/2020	Centre Director	Removal of AV How to Call Card. Changes to Incident, Injury, Trauma and Illness Record and other minor changes to wording
1.1	09/04/2020	Principal	Reviewed and signed
1.2	29/10/2020	Centre Director	Policy formatted in line with new style guide
1.3	17/03/2022	Centre Director	Reviewed and amended in line with ELAA recommendations
1.4	21/04/2022	Principal	Approved policy
1.5	26/05/2023	Centre Administrator	Reviewed and amended in line with ELAA recommendations
1.6	06/06/2023	Principal	Approved policy
1.7	11/04/2024	Centre Administrator	Reviewed and amended in line with ELAA recommendations
1.8	26/04/2024	Principal	Approved policy

Approved By:



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John Metcalfe  
Principal

26/04/2024  
Date