

## 1. Background

The health and safety of all staff, children, families, and visitors to PCYC OOSH is of the utmost importance. We aim to reduce the likelihood of incidents, illness, accidents, and trauma through implementing comprehensive risk management, effective hygiene practices and the ongoing professional development of all staff to respond quickly and effectively to any incident or accident.

We acknowledge that in education and care services, illness and disease can spread easily from one child to another, even when implementing the recommended hygiene and infection control practices. PCYC OOSH aims to minimise illnesses by adhering to all recommended guidelines from relevant government authorities regarding the prevention of infectious diseases and to exclusion periods recommended by the Australian Government National Health and Medical Research Council (NHMRC) and Public Health Unit.

When groups of children play together and are in new surroundings, accidents and illnesses may occur. PCYC OOSH is committed to effectively managing our physical environment to allow children to experience challenging situations whilst preventing serious injuries.

## 2. Scope

This policy meets the following Quality Areas:

- Quality Area 2: Children's Health and Safety
- Quality Area 3: Physical Environment
- Quality Area 7: Governance and Leadership

This Policy applies to all educators (whether casual, part time or full time) who are subject to the policies and procedures in governing PCYC-Out of School Hours.

## 3. Definitions

<b>Educators</b>	Employees who hold qualifications in Children Services and/or relevant or related experience.
<b>Notifiable incident</b>	Any incidents that seriously compromise the safety, health, or wellbeing of children. The notification needs to be provided to the regulatory authority and also to parents within 24 hours of a serious incident. The regulatory authority can be notified online through the NQA IT System.
<b>Allegations of Sexual or Physical abuse</b>	<ul style="list-style-type: none"><li>• Regulations require the approved provider or nominated supervisor to notify the regulatory authority within <b>24 hours</b> of any <b>allegation of physical or sexual abuse</b> of a child being educated and cared for by the OOSH Service <b>within 24 hours</b> of the service becoming aware of the allegation and applies regardless of whether the alleged incident occurred on or off the service premises through the NQA IT System.</li></ul>

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A notifiable incident of physical or sexual abuse 175(2)(d) & 175(2)(d) (e)) is defined as any of the following

Any incident where the approved provider reasonably believes that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service

Allegations that physical or sexual abuse of a child or children has occurred or is occurring while the child is being educated and cared for by the service

### Serious Incident

- Regulations require the approved provider or nominated supervisor to notify the regulatory authority within **24 hours** of any serious incident at the OOSH Service through the NQA IT System.
- A serious incident (Reg. 12) is defined as any of the following:
  - a) The death of a child:
    - (i) while being educated and cared for by an OOSH Service or
    - (ii) following an incident while being educated and cared for by an OOSH Service.
  - b) Any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an OOSH 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.  
  
For example: whooping cough, broken limb, and anaphylaxis reaction.
  - c) Any incident or emergency where the attendance of emergency services at the OOSH Service premises was sought, or ought reasonably to have been sought (e.g., severe asthma attack, seizure, or anaphylaxis).
  - d) Any circumstance where a child being educated and cared for by an OOSH Service: (i) appears to be missing or cannot be accounted for or (ii) appears to have been taken or removed from the OOSH Service premises in a manner that contravenes these regulations or (iii) is mistakenly locked in or locked out of the OOSH Service premises or any part of the premises.

## 4. References

- Education and Care Services National Regulations S. 165, S. 174, 12, 77, 85, 86, 87, 88, 89, 90, 93, 95, 97, 103, 104, 161, 162, 168, 170, 171, 175, 176, 177, 183
- National Quality Standards, Elements 2, 3.1, 7.1.2, 7.1.3

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## 5. Policy

- **Effective 1 September 2026:** any **allegation of physical or sexual abuse** of a child being educated and cared for by the OOSH Service **must be notified to the Regulatory Authority within 24 hours** of the service becoming aware of the allegation and applies regardless of whether the alleged incident occurred on or off the service premises.
- A serious incident and/or any **allegation of physical or sexual abuse** should be documented and logged on PCYC incident management system CURA as soon as possible and within 24 hours of the incident, with any evidence attached.

### 5.1. Enrolment Information

- Families are required to provide written consent for educators to seek medical attention for their child, if required, as part of the enrolment process. This will be recorded in the enrolment form.
- Families will be required to supply details of their preferred doctor, dentist, health fund and Medicare details.

### 5.2. Incident, Injury or Trauma to a child whilst in the service

- If a child, educator, or visitor has an accident while at the centre, an educator who holds a first aid certificate will attend to them immediately.
- Anyone injured will be kept under adult supervision until they recover, and an authorised person takes charge of them.
- In the case of a major incident, injury, illness, or trauma at the service requiring more than basic first aid, the first aid attendant will:
  1. Assess the injury and decide whether the injured person needs to be attended to by a doctor or whether an ambulance should be called. The educator in charge or nominated supervisor will be advised of their decision.
  2. If the injury is serious, the first priority is to get immediate medical attention. Families or emergency contacts should be notified straight away where possible. If not possible, there should be no delay in organising proper medical treatment.
  3. Attend to the injured person and apply first aid as required.
  4. Educators will ensure that disposable gloves are used with any contact with blood or bodily fluids as per the infectious disease policy.
  5. Educators will stay with child until suitable help arrives, or further treatment taken.
  6. The educators will try to make the child comfortable and reassure them that they will be ok and that their families have been called.
  7. If an ambulance is required and the child is taken to hospital, an educator will accompany the child and take the child's medical records with them.

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8. Complete an incident notification and a serious incident report for the regulatory authority.

Another educator will:

1. Notify family or emergency contact person immediately regarding what happened and the action that is being taken including clear directions of where the child is being taken (e.g. hospital). Every effort must be made not to cause panic and to provide minimal detail regarding the extent of the injuries
  2. Ensure that all blood or bodily fluids are cleaned up in a safe manner.
  3. Ensure that anyone who has come in contact with any blood or fluids washes their hands in warm soapy water.
  4. Try to reassure the other children and keep them calm, keeping them informed about what is happening, and away from the child.
- Accidents which result in serious incident, injury, illness, and trauma (including death) to a child must be reported to:
    - ✓ The ambulance service
    - ✓ The police
    - ✓ Family or emergency contact person
    - ✓ Regulatory Authority
  - The centre will notify the family or emergency contact person that a serious incident has happened and advise them to contact the relevant medical agency. Only a qualified medical practitioner can declare a person is deceased, therefore educators should ensure the parents are only advised that the injury is serious and refer them to the medical agency (i.e. hospital) where the child has been taken.
  - This information should be provided in a calm and extremely sensitive manner.
  - The site of the accident should not be cleared or any blood or fluids cleaned up until after approval from the Police.
  - All other children should be removed away from the scene and if necessary, parents contacted for early collection of children. The children should be reassured and notified only that a serious incident has occurred.

### 5.3. Death or Serious Injury to a child or educator out of hours

- Educators in the service must be prepared to handle all incidents in a professional and sensitive manner. In the event of tragic circumstances such as the death of a child or educator, the educators will follow guidelines as set out below to minimise trauma to the remaining educators and children in the service.
- In the event of the death occurring out of service hours, a clear emergency procedure will be maintained for the other children at the service.
- If a child is the deceased, the Coordinator/Nominated Supervisor should contact the child's school to liaise with them regarding the school's response to the event.
- The Nominated Supervisor should also contact the NSW Regulatory Authority as soon as possible and within 24 hours to report the incident. The school and Network of Community Activities should be

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contacted to seek additional support, resources, or advice.

### 5.4 Incident and/or Allegations of Physical or sexual

- Educators will remove the child from harm (if the alleged perpetrator is present or there is an immediate risk) and record the allegation ensuring to use verbatim language — write exactly what the child or third party says.
- Educators will log the incident in CURA within 24 hours, attaching any supporting evidence.
- Educators will make a notification to the Child Protection Helpline if there is suspected risk of significant harm.
- Coordinator/Nominated Supervisor should contact the child's parent to notify them of the incident unless this could compromise the investigation or place the child at further risk. Educators should seek the advice of DCJ/Police first.
- The Nominated Supervisor/OOSH Manager should also contact the NSW Regulatory Authority as soon as possible and within 24 hours to report the incident.

### 5.5 Reporting of Serious Incident, Allegation of Physical or Sexual abuse, Injury and Trauma

- All serious incidents, **allegation of physical or sexual abuse**, injury, illness, or trauma will be recorded within 24 hours of the event occurring. The child's family or emergency contact must be notified of any accident or injury that has occurred to the child as soon as possible and no later than 24 hours after the event.
- Families are advised to keep their child home until they are feeling well, and they have not had any symptoms for at least 24–48 hours (depending upon the illness and exclusion periods).
- The Nominated Supervisor and OOSH Manager is responsible for ensuring that, in the event of a serious incident, the regulatory authority is advised as well as the Approved Provider
- It may not be until sometime after the incident that it becomes apparent that an incident was serious. If that occurs, the Nominated Supervisor must notify the regulatory authority within 24 hours of becoming aware that the incident was serious.

#### 5.4. How to decide if an injury, trauma, or illness is a 'serious incident'?

- If the advice of a medical practitioner was sought or the child attended hospital in connection with the incident, injury, trauma, or illness, then the incident is considered 'serious and the regulatory authority must be notified.
- An incident, injury, trauma or illness will be regarded by the service as a 'serious incident' if more than basic first aid was needed to manage the incident, injury, trauma or illness and medical attention was sought for the child, or should have been sought, including attendance at hospital or medical facility for further treatment.

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### Illness

- Families are advised upon enrolment and in regular reminders not to bring sick children to the service and to arrange prompt collection of children who are unwell. The care needs of a sick child are difficult to meet without dramatically reducing the general level of supervision of the other children or risking other children's health.
- Where a child takes ill at the service, all care and consideration will be given to comfort the child and minimise the risk of cross infection until the family/emergency contact collects the child.
- A child or adult will be considered sick if he/she:
  - Sleeps at unusual times, is lethargic.
  - Has a fever over 38<sup>0</sup>.
  - Is crying constantly from discomfort.
  - Vomits or has diarrhoea.
  - Needs constant one to one care.
  - Has symptoms of an infectious disease.
- If a child is unwell at home, the family is not permitted to bring the child to the service. Children who appear unwell when being signed in by their parent/ guardian will not be permitted to be left at the service.

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### 6. Document Information


#### Version History

Version	Date	Document Number	Created By	Role	Reason
2.0	22/08/2025	POL - 062	Laura Pellegrino	Quality, Compliance & Child Protection Manager	Updated Legislative requirements

#### Reviewed By

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2.0	22/08/2025	Justine Russell	GM Programs & Social Impact	Updated Legislative requirements

#### Acceptance Signoff

Version	Date	Reviewer	Role	Signature
2.0	28/08/2025	Justine Russell	GM Programs & Social Impact	

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