



## Operational Policies

### 7.07 Injury, Incident and Near Miss Policy

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**Classification:** Health and Safety  
**Applies to:** All Staff  
**Approved by:** General Manager

**Date:** March 2023  
**Review Date:** March 2025

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#### **Purpose:**

- To ensure consistent procedures for recording and investigating injuries, incidents and near misses that occur at the service or as part of the working day. This includes any injuries, incidents or near misses that occur during excursions organised by the Service Leader/Person Responsible and outside of the services licensed premises.

#### **References:**

- Education (Early Childhood Services) Regulations 2008 #46 Health and safety practices standard: general
- Licensing Criteria for Early Childhood Education and Care Services 2008 #HS 27 & 34
- Worksafe NZ [www.worksafe.govt.nz](http://www.worksafe.govt.nz)
- Education and Training Act 2020
- Health and Safety at Work Act 2015
- The NELPs – The Statement of National Education and Learning Priorities

#### **Definitions:**

- **Head Teachers and Centre Managers** – are referred to as Service Leaders
  - **Person Responsible** - In teacher-led, centre-based services, the Person Responsible is directly involved in and primarily responsible for, the day-to-day education and care, comfort and health and safety of the children. All services must have a Person Responsible present at the service at all times. The Service Leader is the Person Responsible when present at the service and they must designate who the Person Responsible whenever they are not at the service and ensure that Senior Management is made aware of this.
  - **Injury** - For the purpose of this policy, there are 5 possible categories of injury.
    1. **Insignificant:** An event that causes a child or adult to be physically harmed but it is so small that it does not need to be recorded on the online system.
    2. **Minor:** An event that causes a child or adult to be physically harmed enough to require it to be recorded on the online system but not to the extent that a parent/caregiver/emergency contact needs to be called.
    3. **Significant:** An event that causes a child or adult to be physically harmed enough to require it to be recorded on the online system and also to the extent that the parent/caregiver/emergency contact is called. This may also require the service to call for an ambulance to attend to the child/adult.
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4. **Serious Injury:** is an injury that requires an ambulance to be called and/or admission to hospital.
5. **Impact to the Head:** An impact to the head that may result in the following:
  - a. The child or adult loses consciousness, becomes disorientated or lethargic for any length of time.
  - b. A bump, bruise, open wound, or mark that has been caused by the impact is evident.
  - c. The child or adult begins to display the signs and symptoms of concussion (see appendix 1)
  - d. **None of the above**, however it is possible that a child or adult has received an impact to the head either by the impact having been witnessed by a teacher/adult or reported to them by either the injured party or someone who witnessed the impact occur.

- **Incident** - For the purpose of this policy, there are 5 possible incidents.

An incident is defined as follows:

1. An event at the service where psychological harm occurs (i.e., aggression).
2. If a child leaves the service unsupervised.
3. A medical event, at the service (i.e., heart attack).
4. An event where harm occurs to the service environment (i.e., fire, flood, property damage such as graffiti/broken windows).
5. A civil defence emergency such as earthquake, tsunami etc.

- **Investigation(s)** – may be conducted after an injury, incident or near miss event, and it is a planned search for facts and evidence through interviews, observation, and examination of records and the interpretation of physical evidence.
- **Kaitiaki Kindergartens** – is referred to as The Association
- **Kindergartens and Early Learning Centres** – are referred to as services.
- **Near Miss** – is an event that could have caused harm if the circumstances were different. These reports can identify hazards that have not yet been evident or recorded.
- **Notifiable Injuries or Events** – injuries or events that must be notified to Worksafe and/or the Ministry of Education. A notification of a serious injury or illness must be made if it:
  - is a serious injury or illness which occurred as a result of work/kindergarten activity; *and*
  - needs immediate admission to hospital; or
  - needs treatment by a doctor within 48 hours of exposure to a substance.
- **Serious Harm** –
  - Death; or
  - Injury that consists of or includes loss of consciousness; or
  - a notifiable injury or illness as defined in section 23 of the Health and Safety at Work Act 2015 (see Appendix 2)
- **Senior Management** – The General Manager, the 2IC General Manager, the Professional Practice Leaders, and the Operational Leader
- **Team Members** – members of services and Support Office staff
- **The online system** – is The Association’s online health and safety reporting system.



## Policy

The Association acknowledges that injuries, incidents and near misses can and do occur. The key principle of this Policy is to recognise the importance of effective responses to these situations. As part of the response process, it is essential that we understand the importance of effective reporting and gathering, recording and analysis of information, to help us to assess risks, institute appropriate practices and prevent future injury or incident.

## Procedures

### Responding to an Injury, Incident or Near Miss

1. **When to call an ambulance:** Make sure that you continue to administer first aid while someone calls for help.
  - a) If a child/adult loses consciousness (other than being normally asleep)
  - b) If a child/adult stops breathing
  - c) If a child/adult is choking and initial first aid has not resolved the problem
  - d) If a child/adult has a broken or suspected broken bone
  - e) If a child/adult has a wound that is bleeding, and first aid is ineffective at stemming the blood flow.
  - f) In the case of any medical emergency

2. **When to telephone the parent/guardian**

When contacting the parent/guardian, a phone call must be made, rather than texting. Contact the parent/guardian:

- a) If an ambulance has been called.
- b) When a child has had, or may have had, an impact to the head.

As impacts to the head can easily result in concussion which can be very difficult to diagnose, we must always consult with the parent/guardian to allow them to make the decision whether to seek medical advice.

- c) If a child leaves the kindergarten/ELC grounds unsupervised.
- d) When the accident/incident/near miss has distressed the child and they are not able to be comforted
- e) When the accident has caused a noticeable mark on the child.

It is good practice to warn a parent/guardian that they will see a mark on their child in advance of them arriving to pick up.

3. **Responsibilities:** All services must have a Person Responsible present at the service at all times. Service Leaders/Person Responsible are responsible for:

- Taking all practicable steps to ensure that all team members are aware of this injury, incident and near miss policy and procedure and are able to take appropriate action in response to a situation.
- Arranging appropriate first aid and emergency care (or other assistance) where required if an injury does occur.



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- Ensuring that all injuries, incidents and near misses are reported, recorded, and investigated in accordance with this policy and procedure.
- Liaising with senior management and with the parents/whānau/emergency contact of the injured person.

Team members are responsible for:

- Responding to injuries, incidents and near misses and providing first aid care as required.
- Reporting injuries, incidents and near misses to their Service Leader/Person Responsible and recording them in accordance with this policy and procedure.
- Liaising with their Service Leader/Person Responsible and ACC if treatment and/or time off work is required.
- Liaising with their Service Leader/Person Responsible and ACC about requirements if modified or alternative duties are required.
- Reporting non-work-related injuries resulting in time off to their Service Leader/Person Responsible as soon as possible.

Senior Management are responsible for:

- Ensuring that they respond to any reports of injuries, incidents or near misses to assist the Service Leader/Person Responsible to manage the situation effectively.
- Ensuring that any notifiable injury, incident or near miss is reported to the appropriate external bodies such as The Ministry of Education or Worksafe NZ.
- Ensuring that, if required, a review of the injury, incident or near miss is undertaken by the service leader/Person Responsible and team and that any remedial actions are instituted.

#### **4. Reporting an Injury, Incident or Near Miss**

Depending on the severity of the injury, incident or near miss as noted in definitions above, the following steps must be taken.

1. Report it to the Service Leader/Person Responsible as soon as possible and record the injury, incident or near miss onto the online system within 6 hours of the event.
2. If required, the Service Leader/Person Responsible will ensure that an investigation of the injury, incident or near miss is conducted within 24 hours of the event.
3. The Service Leader/Person Responsible will liaise with the Association to assist with the investigation.
4. If any hazards are identified from an injury, incident or near miss, follow the hazard reporting procedure by eliminating or minimising the hazard and completing a Hazard Reporting form.
5. Information on injuries, incidents and near misses will be reviewed regularly, but not less than once a term.

#### **5. What needs to be reported?**

All reports must be entered onto the online reporting system.

- a) Any injury, incident and near miss other than an insignificant injury as defined above.
- b) Any injury, incident or near miss where the parent/guardian has been called.
- c) All impacts to the head.



- d) If the injury/incident/near miss necessitated the need for ANY first aid to be applied this must be reported. However, if the first aid was **ONLY** to comfort the child (e.g., we know that some children do like to have a cold pack as self-soothing) then this does not need to be reported.
- e) If the injury/incident/near miss has indicated a hazard or future issues (e.g., possible concussion, climbing fences to escape, possible issues with balance, etc) then the accident/incident/near miss **MUST** always be reported.
- f) If the person injured in the accident/incident/near miss an adult, then the injury/incident/near miss **MUST** always be reported.

## 6. Notifiable Injuries or Events

If a notifiable injury or event occurs:

1. If necessary, ensure that first aid is given, and the appropriate emergency services are called by phoning 111 (i.e., ambulance).
2. Isolate the injury scene and notify the Service Leader/Person Responsible. The Service Leader/Person Responsible must advise the Association of the injury or event immediately (or as soon as practicable after the event).
3. The Association General Manager or a person delegated by them will notify WorkSafe NZ within 24 hours on phone 0800 030 040 (choose option 1) as they may be required to conduct an investigation (scene, people involved, etc).
4. The Association General Manager or a person delegated by them will provide written notification of the injury or event to WorkSafe NZ within seven days of the event by sending through a copy of the injury report or completing an online notification form on the WorkSafe NZ website: <https://worksafe.govt.nz/notify-worksafe/>. The General Manager will also notify the Ministry of Education and any other organisations that must be notified.
5. The Association General Manager and the Service Leader/Person Responsible must conduct an investigation of the notifiable injury or event within five working days.

## 7. Injury, Incident and Near Miss Investigators

The Association is committed to ensuring that there are designated and trained injury, incident and near miss investigators available at Support Office.

## 8. Steps for Conducting an Investigation

1. Control the scene if appropriate (i.e., if serious harm has occurred or a significant hazard is involved) and ensure an injury, incident and near miss report has been completed.
2. Collect all relevant information:
  - What happened, who was involved and what harm occurred?
  - Who should be interviewed?
  - What machinery, equipment, tools were being used?
  - What things may have failed?
  - What do you need to know about training, maintenance, and other records?
  - Analyse all significant causes – was a significant hazard involved?



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3. Develop and take remedial action. Make sure corrective actions are assigned to someone for implementation within a specific timeframe. Make sure this is noted on the investigation form.
4. Follow up. Ensure recommendations are implemented and provide feedback to all concerned.
5. Use information gathered to improve safety management systems, identify trends, identify hazards, and implement new procedures (if appropriate).

Signed:

Date:

28/9/23

General Manager

**Endorsed by**

Signed:

Date:

28/9/23

President of the Board





## Appendix 1



Downloaded 12/9/2023 from <https://www.health.govt.nz/your-health/conditions-and-treatments/accidents-and-injuries/head-injury-and-concussion>

## Head injury and concussion

The term 'head injury' covers cuts and bruises to the scalp as well as injury to the brain, which is known as Traumatic Brain Injury or TBI.

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Your brain is protected by your scalp and the bones of the skull and is cushioned by lining layers of tissue and the spinal fluid inside your skull.

If you get hit hard, or are shaken forcefully, your brain can bounce around inside and be bruised by the hard bone of your skull. This can cause a bruise in the brain, and damage to nerve fibres and blood vessels.

If bleeding or a blood clot result, this can be serious. Sometimes bleeding starts hours after the injury.

### Causes of head injury

Head injuries can happen in many different ways, such as:

- being hit on the head
- car or bike accidents
- falls around the home (especially for toddlers and older people)
- shaking a baby.

If you injure your head, your neck will probably be hurt as well.



## What to do after a head injury

If you or a family member suffers a head injury, there may be no immediate symptoms – no loss of consciousness and no signs of injury on your head or face.

However, it's very important to carefully monitor a person who has had a head injury, as symptoms may develop later.

If the person is unconscious or is unable to move all or some of their limbs, or is complaining of neck pain:

- **Call 111 immediately.**
- Do not move the person (unless it's dangerous to leave them where they are).

## When to see a doctor

Take the person to a doctor **as soon as possible** if they lose consciousness (even for a moment) or have symptoms of concussion.

Remember that these symptoms may develop some time after the injury.

## Head injury and concussion

The term 'head injury' covers cuts and bruises to the scalp as well as injury to the brain, which is known as Traumatic Brain Injury or TBI. You can search for more information from the [Health Navigator](#) web pages and from the [ACC](#) website.

## Symptoms of concussion

If the person has any of the following symptoms, they may have concussion:

- not remembering what happened immediately before or after the injury.
- confusion, difficulty concentrating.
- loss of judgement and coordination, walking unsteadily, dizziness
- slurred speech
- headache that lasts a long time or gets worse.
- vomiting or nausea
- ringing in their ears
- pupils of their eyes being different sizes
- changes in vision (what they can see)
- becoming sensitive to light
- loss of smell or taste.





Children may be irritable, sleepy, and generally 'not themselves'.

**Call Healthline 0800 611 116 if you are unsure what you should do.**

## **Post-concussion syndrome**

Some symptoms continue for several weeks. This is called *post-concussion syndrome*.

Symptoms of post-concussion syndrome include:

- forgetfulness
- trouble concentrating
- personality changes
- headaches
- tiredness
- not being able to sleep or being very sleepy.

The person might need time off work and should avoid activities (like sport) that could cause another injury.

## **Avoiding another injury**

A second injury to the head of a concussed person can be very dangerous. It can cause brain swelling, coma or death. Serious or long-term effects are much more likely if a brain injury is repeated.

## **Returning to sports**

ACC guidelines say that a person who has had concussion should not play sport or train for **3 weeks** after the injury.

After this time, you can play or train if you have no symptoms of your injury and your doctor has said you can.

## **Self-care**

If you or a family member has a minor head injury with no worrying symptoms, try these ideas. If you have any concerns at all, see your doctor.



- Apply ice or a cool pack for 10 to 20 minutes, every two to four hours, for the next day or two. (Wrapped ice or a pack of frozen vegetables will work well.) This will reduce swelling of the scalp and help with the pain.
- Drink only clear fluids for the first 2 hours, to decrease the likelihood of vomiting.
- Take nothing stronger than paracetamol for pain.
- Rest – someone must stay with the injured person if they sleep.
- Check every 2 hours to see if the person wakes easily (if asleep) and responds normally; that their behaviour and movements are normal; and that they know who they are and where they are.
- A responsible person should stay with the person for 48 hours after the injury.

## **A note about drowsiness in Children**

Taken from the article [patient.info/health/head-injury-instructions](http://patient.info/health/head-injury-instructions).

After a knock to the head, children will often cry, be distressed, and then settle down. It is quite common for them to want to sleep for a short while. This is normal. However, it will appear to be a normal 'peaceful' sleep, and they wake up fully after a nap.



## Appendix 2

Downloaded from legislation.govt.nz 26/9/2023

### 23 Meaning of notifiable injury or illness

- (1) In this Act, unless the context otherwise requires, a **notifiable injury or illness**, in relation to a person, means—
- (a) any of the following injuries or illnesses that require the person to have immediate treatment (other than first aid):
    - (i) the amputation of any part of his or her body;
    - (ii) a serious head injury;
    - (iii) a serious eye injury;
    - (iv) a serious burn;
    - (v) the separation of his or her skin from an underlying tissue (such as degloving or scalping);
    - (vi) a spinal injury;
    - (vii) the loss of a bodily function;
    - (viii) serious lacerations;
  - (b) an injury or illness that requires, or would usually require, the person to be admitted to a hospital for immediate treatment;
  - (c) an injury or illness that requires, or would usually require, the person to have medical treatment within 48 hours of exposure to a substance;
  - (d) any serious infection (including occupational zoonoses) to which the carrying out of work is a significant contributing factor, including any infection that is attributable to carrying out work—
    - (i) with micro-organisms; or
    - (ii) that involves providing treatment or care to a person; or
    - (iii) that involves contact with human blood or bodily substances; or
    - (iv) that involves handling or contact with animals, animal hides, animal skins, animal wool or hair, animal carcasses, or animal waste products; or
    - (v) that involves handling or contact with fish or marine mammals;
  - (e) any other injury or illness declared by regulations to be a notifiable injury or illness for the purposes of this section.