

ACCEPTANCE AND REFUSAL AUTHORISATION POLICY

Under the National Law and National Regulations, early childhood services are required to obtain written authorisation from parents/guardians for some circumstances, to ensure that the health, safety, wellbeing, and best interests of the child are met and upheld. An authorisation is given where a person who has legal responsibility for a child gives permission to another person to do something or to make a decision on that person's behalf. Authorisations are usually authenticated by a signature- either in written form or as an electronic signature. All authorisations and refusals are to be kept in the child's enrolment record.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement- anaphylaxis or asthma emergency
96	Self-administration of medication

99	Children leaving the education and care service
102	Authorisation for excursions
102D	Authorisation for service to transport children
157	Access for parents
160	Child enrolment records to be kept by approved provider
161	Authorisation to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures must be followed

RELATED POLICIES

Administration of Medication Policy Anaphylaxis Management Policy Arrival and Departure Policy Asthma Management Policy Child Protection Policy Child Safe Environment Policy Cyber Safety Policy	Epilepsy Management Policy Enrolment Policy Excursion Policy Incident, Injury, Trauma and Illness Policy Mobile Device Usage Policy Orientation of Families Policy Safe Transportation Policy Water Safety Policy
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PURPOSE

To ensure that all educators, staff and volunteers of the Service are consistent in how authorisations are managed and what constitutes a correct authorisation and what does not, which consequently may lead to a refusal. Decisions around refusing an authorisation will be made on a case by case basis by the service in discussion with the Nominated Supervisor, Police or other authorities.

SCOPE

This policy applies to families, staff, management and visitors of the Vacation Care Service

IMPLEMENTATION

Our Vacation Care Service will ensure we comply with the current Education and Care Services National Regulations, which require parent or guardian written authorisation to be provided in matters including:

- Administration of medication to children

- Self-administration of medication
- Administration of medical treatment, dental treatment, and general first aid treatment.
- Emergency Ambulance transportation
- Transportation- including regular outings and regular transportation
- Excursions
- Incursion attendance
- Taking of photographs by people other than educators
- Water based activities
- Enrolment of children, including providing details of persons nominated to authorise consent for medical treatment, to collect children from the service, or trips outside the service premises
- Children leaving the premises in the care of someone other than a parent or guardian
- Children having access to the internet

MANAGEMENT WILL ENSURE THAT:

- the *Acceptance and Refusal Authorisation Policy* is reviewed and maintained by the Vacation Care Service management and adhered to at all times by educators and staff
- all staff understand circumstances that may lead to refusal of an authorisation
- all staff follow the policies and procedures of our Vacation Care Service
- all parents/guardians have completed the authorised person's section of their child's enrolment form including authorised nominees (refer to *Enrolment Policy*), and that the form is signed and dated before the child commences at the Vacation Care Service.
- permission forms for excursions are provided to the parent/guardian or authorised nominee prior to the excursion (refer to *Excursion Policy* and *Safe Transportation Policy*)
- parent/guardians are provided with a copy of relevant policies for our Service or are aware of how they can be accessed
- attendance records are maintained for all children attending the Vacation Care Service
- a written record of all visitors to the Service, including time of arrival and departure and reasons for visit is documented
- where a child requires medication to be administered by educators/staff, that an *Administration of Medication Record* is completed, and authorisation provided by the parent/guardian or authorised nominee and included with the child's record (Refer to *Administration of Medication Policy*).
- where a child over preschool age, and is authorised by the parent or guardian to self-administer medication, this is recorded in the Medication Record

- educators/staff do not administer medication without the written authorisation of parent/guardian or authorised nominee named in the enrolment record as authorised to consent to the medical treatment of the child, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Asthma Management Policy, Anaphylaxis Management Policy, Diabetes Management Policy, and Epilepsy Management Policy*)
- educators and staff only allow a child to participate in regular outings and regular transportation with the written authorisation of a parent/guardian or authorised nominee name in the child's enrolment record
- educators and staff allow a child to participate in excursions only when the written authorisation of a parent/guardian or authorised nominee named in the child's enrolment record is received and documented
- educators/staff allow a child to depart the Service only with:
 - a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
 - with a person authorised by a parent or authorised nominee; or
 - leaves in accordance with the written authorisation of the parent; or authorised nominee; or
 - is taken on an excursion; or
 - in the case of a medical emergency or another emergency (Refer to *Arrival and Departure Policy and Emergency Evacuation Policy*).
- there are procedures in place if an inappropriate person, or a person who does not appear to be fit to take care of the child attempts to collect the child from the OSHC Service or poses a risk to the safety of children or staff (refer to *Arrival and Departure Policy*).

A NOMINATED SUPERVISOR / RESPONSIBLE PERSON WILL:

- follow the policies and procedures of the Service
- ensure documentation relating to authorisations contains:
 - the name of the child enrolled in the service
 - date
 - signature of the child's parent/guardian and authorised nominee as named on the enrolment form
- keep all authorisations relating to children in their enrolment record

- exercise the right of refusal if written or verbal authorisations do not comply with National Regulations or Child Protection Legislation. If an authorisation is refused by the Service, it is best practice to document:
 - the details of the authorisation
 - why the authorisation was refused, and
 - actions taken by the service. For example: if the service refused an authorised nominee named in the child’s enrolment record to collect the child from the service as they were under the influence of alcohol, the action taken to ensure that the child was collected (Refer to *Refusal of Authorisation Record*).
- waive compliance where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. In accordance with National Regulations (R.93) the Service can administer medication in these circumstances without authorisation. If these situations occur Management will be required to contact the parent/guardian as soon as practicable after the medication has been administered and emergency services. Notification to the Regulatory Authority is required within 24 hours of a serious incident
- ensure that medication is not administered to a child or self-administered by a child without the authorisation of a parent/guardian or authorised person, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Management of Asthma Policy, Management of Anaphylaxis Policy*).
- consult with parents/guardians and the child’s health practitioner to determine the circumstances that the child could self-administer their medication as per their ASCIA Action Plan for Anaphylaxis or Asthma Foundation Action Plan for Asthma
- determine where self-administered medication should be stored by the service (asthma, anaphylaxis or diabetes medication must be stored in an easily accessible location)
- ensure a child only departs from the Service with:
 - a person who is the parent/guardian or authorised nominee named in the child’s enrolment record; or
 - with a person authorised by a parent or authorised nominee; or
 - leaves in accordance with the written authorisation of the parent; or authorised nominee; or
 - is taken on an excursion; or
 - in the case of a medical emergency or another emergency (Refer to *Arrival and Departure Policy and Emergency Evacuation Policy*).

- ensure a child is not taken outside the Service premises on an excursion except with the written authorisation of a parent/guardian or authorised person
- inform the family and Approved Provider when a written authorisation does not meet the requirements outlined in the Service's policies.

EDUCATORS WILL:

- follow the policies and procedures of the Vacation care Service
- ensure that written authorisation is provided by the parent or other person named in the child's enrolment record for a regular outing or regular transportation
- ensure that parents/guardians sign and date permission forms for excursions prior to the excursion being implemented
- allow a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee
- check that parents/guardians or an authorised nominee sign the attendance record as their child arrives and departs from the OSHC Service
- administer medication only with the written authorisation of a parent/guardian or authorised nominee as per the *Administration of Medication Record*, except in the case of an emergency, including an asthma, anaphylaxis emergency
- allow a child over pre-school age to self-administer medication under the following circumstances:
 - a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication.
 - medication is stored safely by an educator, who will provide it to the child when required
 - supervision is provided by an educator whilst the child is self-administering.
 - a recording is made in the medication record for the child that the medication has been self-administered
- allow a child to depart from the Service only with:
 - with a person authorised by a parent or authorised nominee; or
 - leaves in accordance with the written authorisation of the parent; or authorised nominee; or
 - is taken on an excursion; or
 - in the case of a medical emergency or another emergency (Refer to *Arrival and Departure Policy* and *Emergency Evacuation Policy*).
- follow procedures if an inappropriate person attempts to collect a child from the Service and poses a risk to the safety of the children and staff (for example, an intoxicated person).

- inform the Approved Provider when a written authorisation does not meet the requirements outlined in Service’s policies.

FAMILIES WILL:

- read and comply with the policies and procedures of the OSHC Service
- complete and sign the authorised nominee section of their child's enrolment form before their child commences at the Service
- ensure that changes to nominated authorised persons are provided to the Service in a timely manner
- advise nominated authorised persons that they will require photo identification (such as a driver’s licence) in order to collect their child from the Service
- sign and date permission forms for regular transportation and regular outings
- sign and date permission forms for excursions
- sign the attendance record as their child arrives and departs from the Service
- provide written authorisation on the *Administration of Medication Form* when their child requires medication to be administered by educators/staff, including signing and dating it for inclusion in the child's medication records
- provide a Medical Management Plan or Action Plan from their child’s health practitioner regarding circumstances by which the child could self-administer their medication (eg: Asthma inhaler)

AUTHORISATION REQUIREMENTS

Authorisation documents are required for the following situations and must have details recorded as specified:

<p>Administration of Medication</p>	<ul style="list-style-type: none"> • Name of the child • <i>Administration of Medication Record</i> is signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication • Authorisation is provided by a parent or guardian for the child to self-administer medication as per their Action Plan • Name of the medication to be administered • Clearly indicate the time and date the medication is to be administered • Dosage of the medication to be administered • Method of dosage (eg: oral or inhaled) • Whether the medication is to be self-administered (asthma, diabetes) • Period of authorisation (actual days and dates: from and to). • Date the authorisation is signed • Medication must be in its original container and bearing the correct child’s name • Medication is not past its expiry or use-by date
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	<ul style="list-style-type: none"> • Medication is administered in accordance with any instructions attached to the medication or provided by a registered medical practitioner • A second person checks the signed <i>Administration of Medication Record</i>, checks the dosage of the medication, and witnesses its administration • The educator administering medication and witness must write their full name and sign the medication record • Details of the administration must be recorded in the medication record • Supervision is provided by an educator whilst a child is self-administering medication • A recording is made in the medication record for the child that the medication has been self-administered
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<p>Medical treatment of the child including transportation by an ambulance service</p> <p>(Included and authorised initially as part of the child’s enrolment record):</p>	<ul style="list-style-type: none"> • Name of the child • Authorisation to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service • Authorisation for the transportation of the child by an ambulance service • Name, address and telephone number of the child's registered medical practitioner or medical service • Child's Medicare number • Name of the parent or guardian providing authorisation • Relationship to the child
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<p>Emergency Medical Treatment</p> <p>(included and authorised initially as part of the child’s enrolment record or as updates during enrolment):</p>	<ul style="list-style-type: none"> • The Service is able to seek emergency medical assistance for a child as required (i.e. medical practitioner, ambulance or hospital) without seeking further authorisation from a parent or guardian in the case of an emergency, including for emergencies relating to medical conditions noted on the enrolment form.
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<p>Collection of Children</p> <p>(included and authorised initially as part of the child’s enrolment record or as updated during enrolment):</p>	<ul style="list-style-type: none"> • Name of the child • Name of the parent or the guardian of the child or the authorised nominee on the enrolment form providing authorisation • Name of the person/s authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises • State relationship to the child of the persons authorised to collect the child from the premises • Signature of the person providing authorisation and date of authorisation
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<p>Transportation</p>	<p>If the transportation is ‘regular transportation’ the authorisation is only required to be obtained once in a 12-month period</p> <ul style="list-style-type: none"> • Name of the child • the reason the child is to be transported
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<p>(other than as part of an excursion)</p>	<ul style="list-style-type: none"> • if the authorisation is for regular transportation, a description of when the child is to be transported and the date the child is to be transported • a description of the proposed pick-up location and destination • the means of transport • the period of time during which the child is to be transported • the anticipated number of children likely to be transported • the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation • any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported • that a risk assessment has been prepared and is available at the education and care service • that written policies and procedures for transporting children are available at the education and care service
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<p>Excursions</p>	<ul style="list-style-type: none"> • Name of the child • Date of the excursion • Reason for the excursion • Proposed destination for the excursion • Method of transport to be used • Route to be taken to and from the excursion • Period of time away from premise- include time leaving premise and time returning to premise • Proposed activities to be undertaken by the child during the excursion • Anticipated number of children likely to be attending the excursion • Ratio of educators attending the excursion to the number of children attending the excursion • Number of staff members and any other adults who will accompany and supervise the children on the excursion (including parents, students, volunteers) • Statement that a risk assessment has been prepared and is available at the service • Name of the parent or guardian-providing authorisation • Relationship to the child • Signature of the person providing authorisation and date of authorisation • Details of any water hazards and risks associated with water-based activities (to be included in risk assessment). • Items that should be taken on the excursion
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<p>Confirmation of Authorisation</p>	<ul style="list-style-type: none"> • All authorisation forms received (including the initial enrolment form) are to be checked for completion • All authorisations (excluding the initial enrolment form) are checked to ensure that the authoriser (name and signature) is the nominated parent or guardian a person named on the enrolment form as having authority to authorise • If incomplete or inappropriately signed, the authorisation form should be returned to the parent or guardian for correction • Children will be suspended from any activity requiring authorisation until the appropriate form has been correctly completed and signed
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SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (Amended 2020).
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED:	NEXT REVIEW DATE:
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ADMINISTRATION OF FIRST AID POLICY

First aid can save lives and prevent minor injuries or illnesses from becoming major. The ability to provide prompt basic first aid is particularly important in the context of an out of school hours service where Educators have a duty of care and obligation to assist children who are injured, become ill, or require support with administration of medication.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
97	Emergency and evacuation procedures
136	First aid qualifications
161	Authorisations to be kept in enrolment record

162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
174	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Diabetes Management Policy Epilepsy Policy Family Communication Policy	Health and Safety Policy Incident, Illness, Accident and Trauma Policy Responsible Person Policy Sick Child Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

Our Vacation Care Service has a duty of care to provide and protect the health and safety of children, families, educators, and visitors of the Service. This policy aims to support educators to:

- Preserve life
- Ensure the environment is safe and other people are not in danger of becoming ill or injured
- Ensure that ill or injured persons are stabilised and comforted until medical assistance intervenes
- Relieve pain if possible
- Monitor ill or injured persons and promote recovery
- Provide immediate and effective first aid to children or adults
- Apply additional first aid if the condition does not improve

‘First aid can reduce the severity of an injury or illness and in extreme cases, could mean the difference between life and death.’ (Safe Work Australia).

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service

IMPLEMENTATION

First aid is the emergency aid or treatment given to persons suffering illness or injury following an accident and prior to obtaining professional medical services if required. It includes emergency treatment, maintenance of records, dressing of minor injuries, recognition and reporting of health hazards, and participation in safety programs. Legislation that governs the operation of approved

children's services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm.

MANAGEMENT IS RESPONSIBLE FOR:

- taking every reasonable precaution to protect children at the Vacation Care Service from harm and/or hazards that can cause injury
- ensuring that the following qualified people are in attendance **at all times** the service is providing education and care to children
 - at least one staff member or one nominated supervisor who holds a current ACECQA approved first aid qualifications
 - at least one staff member or one nominated supervisor of the service who has undertaken current approved anaphylaxis management training
 - at least one staff member or one nominated supervisor of the service who has undertaken current approved emergency asthma management training
- (one staff member may hold one or more of the three qualifications)
- appointing a nominated first aid officer
- ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised
- ensuring that first aid training details are recorded and kept up to date on each staff member's record
- ensuring there is an induction process for all new staff, including casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements and individual children's allergies and individual medical management plans
- ensuring that parents are notified when practicable or within 24 hours if their child is involved in an incident, injury, trauma or illness at the Service and that details are recorded on the *Incident, Injury, Trauma and Illness* Record.
- ensuring the Regulatory Authorities are notified within 24 hours if a child is involved in a serious incident, injury, trauma or illness at the Vacation Care Service.
- ensuring that staff members are offered support and debriefing subsequent to a serious incident requiring the administration of first aid
- ensuring a resuscitation flow chart is displayed in a prominent position in the indoor and outdoor environments of the Vacation Care Service
- keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL:

- maintain a current approved first aid qualification
- support staff when dealing with a serious incident and/or trauma
- provide and maintain an appropriate number of up-to-date, fully equipped first aid kits that meet Australian Standards.
- provide and maintain a transportable first aid kit/s that can be taken to excursions and other activities
- monitor the contents of all first aid kits and arrange replacement of stock, including when the use-by date has been reached
- dispose of out-of-date materials and supplies appropriately
- ensure safety signs showing the location of first aid kits are clearly displayed
- ensure that all educators approved first aid qualifications, anaphylaxis management training and emergency asthma management training are current and meet the requirements of the National Act and National Regulations and are approved by ACECQA.
- keep up to date with any changes in the procedures for the administration of first aid
- contact families immediately if a child has had a head injury whilst at the Service
- ensure that appropriate documentation is being recorded by the Nominated Supervisor / Responsible Person regarding incidents, injury, trauma, and illnesses and the administration of first aid.

Documentation of the following must be recorded:

- name and age of the child
- circumstances leading to the incident, injury, trauma, or illness (including any symptoms)
- time and date
- details of action taken by the service including any medication administered, first aid provided or
- medical personnel contacted
- details of any witnesses
- names of any person the service notified or attempted to notify, and the time and date of this
- signature of the person making the entry, and time and date of this.

EDUCATORS WILL:

- implement appropriate first aid procedures when necessary

- maintain current approved first aid qualifications, and qualifications in anaphylaxis management and emergency asthma management as required (Safe Work Australia recommends first aid qualifications should be renewed every three years)
- refresh their CPR and administration of an auto-injector device training at least annually
- ensure that all children are adequately supervised while providing first aid and comfort for a child involved in an incident or suffering trauma
- ensure that the details of any incident requiring the administration of first aid are recorded on the *Incident, Injury, Trauma and Illness* Record accurately.
- conduct a risk assessment prior to an excursion to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised.

PARENTS WILL:

- sign Vacation Care Service records of accidents or injuries that have occurred, acknowledging they have been made aware of the incident and the first aid that treatment that was given to the child
- provide the required information for the service's medication record
- provide written consent (via the enrolment record) for service staff to administer first aid and call an ambulance if required
- be contactable, either directly or through emergency contacts listed on the child's enrolment record

FIRST AID KIT:

The Approved Provider of the Service will ensure that first aid kits are kept in accordance with National Education and Care Service Regulations (regulation 89).

ALL FIRST AID KITS AT THE SERVICE MUST:

All First Aid Kits at the Service must:

- be suitably equipped
- not be locked
- not contain paracetamol
- be suitable for the number of employees and children and sufficient for the immediate treatment of injuries at the Service
- be easily accessible to staff and educators
- be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents

- be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments
- contain a list of the contents of the kit
- be regularly checked using the First Aid Kit Checklist to ensure the contents are as listed and have not degraded or expired
- be easily recognisable
- be easy to access and if applicable, located where there is a risk of injury occurring
- be stocked with precautionary items such as sunscreen and water if using outdoors.
- be taken on excursions
- be maintained in proper condition and the contents restocked as required.

Our First Aid delegated individual responsible for maintaining all First Aid kits at the OSHC Service is:

FIRST AID OFFICER

Name: Erin Hunt

Role: Nominated Supervisor

Number of First Aid Kits Responsible for at the Service: 2

These individuals are responsible for conducting and maintaining each first aid kit by complying with the First Aid Checklist, certifying each kit has the required quantities, items are within their expiry dates, and sterile products are sealed. This will occur after each use or if unused, at least annually.

Individuals along with the Nominated Supervisor will also consider whether the first aid kits and components are appropriate and effective for the Service's hazards and the injuries that have occurred. If the kit requires additional resources, these individuals will advise and follow up with the Nominated Supervisor.

- Our Service will display a well-recognised, standardised first aid sign to assist in easily locating first aid kits. Signage will comply with AS 1319:1994 – Safety Signs for the Occupational Environment.

FIRST AID KIT CHECKLIST:

Our Service will use the Checklist provided by the *Childcare Centre Desktop*.

Safe Work Australia's First Aid in the Workplace Code of Practice also provides a guide to what to include in a First Aid Kit. (Appendix E- Example of contents)

<https://www.safeworkaustralia.gov.au/doc/model-code-practice-first-aid-workplace>

We will determine the need for additional items to those in the checklist, or whether some items are unnecessary, after analysing the number of children at our OSHC Service and what injuries children or adults may incur. We will review our incident, injury, trauma and illness records to assist us in making an informed decision about what to include.

For further advice on first aid in the workplace, refer to the following website for state and territory specifications.

<https://www.safeworkaustralia.gov.au/first-aid>

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard.(2020)

Revised National Quality Standard. (2018).

Safe Work Australia First Aid in the Workplace Code of Practice: <https://www.safeworkaustralia.gov.au/doc/model-code-practice-first-aid-workplace>

Safe Work Australia Legislative Fact Sheets First Aiders: <https://www.safeworkaustralia.gov.au/first-aid>

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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ADMINISTRATION OF MEDICATION POLICY

In supporting the health and wellbeing of children, the use of medications may be required by children at the Out of School Hours Service. All medications must be administered as prescribed by medical practitioners and first aid guidelines to ensure the continuing health, safety, and wellbeing of the child.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement - anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication

RELATED POLICIES

Administration of First Aid Policy	Health and Safety Policy
Arrival and Departure Policy	Incident, Illness, Accident and Trauma Policy
Control of Infectious Disease Policy	Medical Conditions Policy
Child Protection Policy	Privacy and Confidentiality Policy
Code of Conduct Policy	Respect for Children Policy
Diabetes Management Policy	Safe Storage of Hazardous Substances Policy
Enrolment Policy	Sick Children Policy
Epilepsy Policy	Supervision Policy
Family Communication Policy	Work Health and Safety Policy

PURPOSE

To ensure all educators of the Vacation Care Service understand their liabilities and duty of care to meet each child's individual health care needs. To ensure all educators are informed of children diagnosed with a medical condition and strategies to support their individual needs. To ensure that all educators are specifically trained to be able to safely administer children's required medication with the written consent of the child's parent or guardian. Educators will follow this stringent procedure to promote the health and wellbeing of each child enrolled at the Vacation Care Service.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Families requesting the administration of medication to their child will be required to follow the guidelines developed by the Vacation Care Service to ensure the safety of children and educators. The Service will follow legislative guidelines and adhere to the National Quality Standard to ensure the health of children, families, and educators at all times.

For children with a diagnosed health care need, allergy or relevant medical condition a Medical Management Plan must be provided prior to enrolment and updated regularly. A Risk Minimisation Plan and Communication Plan must be developed in consultation with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child. (see *Medical Conditions Policy*).

MANAGEMENT WILL ENSURE:

- children with specific health care needs or medical conditions have a current medical management plan detailing prescribed medication and dosage by their medical practitioner

- medication is only administered by the Vacation Care Service with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication [Regulation 92(3)(b)]
- enrolment records for each child outline the details of persons permitted to authorise the administration of medication to the child
- medication provided by the child's parents must adhere to the following guidelines:
 - the administration of any medication is authorised by a parent or guardian in writing
 - medication is prescribed by a registered medical practitioner (with instructions either attached to the medication, or in written form from the medical practitioner)
 - medication is from the original container
 - medication has the original label clearly showing the name of the child
 - medication is before the expiry/use by date.
- the *Administration of Medication* Record is completed for each child
- a separate form must be completed for each medication if more than one is required
- any person delivering a child to the Service must not leave any type of medication in the child's bag or locker. Medication must be given directly to an educator for appropriate storage upon arrival.
- written and verbal notifications are given to a parent or other family member of a child as soon as practicable if medication is administered to the child in an emergency when consent was either verbal or provided by medical practitioners
- if medication is administered without authorisation in the event of an asthma or anaphylaxis emergency the parent of the child is notified as soon as practicable
- if the incident presented imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident.
- reasonable steps are taken to ensure that medication records are maintained accurately
- medication forms are kept in a secure and confidential manner and archived for the regulatory prescribed length of time following the child's departure from the Service
- children's privacy is maintained, working in accordance with the Australian Privacy Principles (APP).
- educators receive information about Medical Conditions and Administration of Medication Policies and other relevant health management policies during their induction
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition as detailed in Medical Management Plans, Asthma or Anaphylaxis Action Plans

- written consent is requested from families on the enrolment form to administer emergency asthma, anaphylaxis, or other emergency medication or treatment if required
- families are informed of the Service's medical and medication policies
- safe practices are adhered to for the wellbeing of both the child and educators.

A NOMINATED SUPERVISOR / RESPONSIBLE PERSON / EDUCATORS WILL:

- not administer any medication without the authorisation of a parent or person with authority, except in the case of an emergency, when the written consent on an enrolment form, verbal consent from an authorised person, a registered medical practitioner or medical emergency services will be acceptable if the parents cannot be contacted.
- ensure medications are stored in the refrigerator in a labelled and locked medication container with the key kept in a separate location, inaccessible to children. For medications not requiring refrigeration, they will be stored in a labelled and locked medication container with the key kept in a separate location, inaccessible to children.
- adrenaline autoinjectors should be kept out of reach of children and stored in a cool dark place at room temperature. They must be readily available when required and **not** locked in a cupboard. A copy of the child's medical management plan should be stored with the adrenaline autoinjector.
- ensure that two educators administer and witness medications at all times. One of these educators must have approved First Aid qualifications in accordance with current legislation and regulations.

Both educators are responsible for:

- checking the *Administration of Medication Record* completed by the parent/guardian
- checking the prescription label for:
 - the child's name
 - the dosage of medication to be administered
 - the use-by date
- confirming that the correct child is receiving the medication
- signing and dating the Administration of Medication Form
- returning the medication back to the locked medication container.
- follow hand-washing procedures before and after administering medication
- discuss any concerns or doubts about the safety of administering medications with management to ensure the safety of the child (checking if the child has any allergies to the medication being administered)

- seek further information from parents/guardian, the prescribing doctor or the Public Health Unit before administering medication if required
- ensure that the instructions on the *Administration of Medication Record* are consistent with the doctor's instructions and the prescription label
- invite the family to request an English translation from the medical practitioner for any instructions written in a language other than English
- ensure that the *Administration of Medication Record* is completed and stored correctly including name and signature of witness.

FAMILIES WILL:

- provide management with accurate information about their child's health needs, medical conditions and medication requirements on the enrolment form
- provide the Vacation Care Service with a Medical Management Plan prior to enrolment of their child if required
- develop a Risk Minimisation Plan for their child in collaboration with management and educators and medical practitioner for long-term medication plans.
- notify educators, verbally when children are taking any short-term medications AND whether or not these medications may be self-administered.
- complete and sign an *Administration of Medication Record* for their child requiring medication whilst they are at the Vacation Care Service.
- update (or verify currency of) Medical Management Plan quarterly or as the child's medication needs change
- be requested to sign consent to use creams and lotions should first aid treatment be required (list of items in the first aid kit provided at enrolment)
- keep prescribed medications in original containers with pharmacy labels. Please understand that medication will only be administered as directed by the medical practitioner and only to the child whom the medication has been prescribed for. Expired medications will not be administered.
- adhere to our Service's *Sick Children Policy and Control of Infectious Disease Policy*
- keep children away at home while any symptoms of an illness remain
- keep children at home for 24 hours from commencing antibiotics to ensure they have no side effects to the medication
- advise the Vacation Care Service if their child has taken any medication with them to school. The *Administration of Medication* record may be emailed to the Service if necessary.
- complete the *Administration of Medication* record when dropping off their child in the morning and the educator will sign to acknowledge the receipt of the medication.

- provide any herbal/ naturopathic remedies or non-prescription medications (including Paracetamol or cold medications) with a letter from the doctor detailing the child's name and dosage: Note that the stated procedure for administering medications applies to the administration of non-prescription medications.

SELF-ADMINISTRATION OF MEDICATION:

A child over pre-school age may self-administer medication under the following circumstances:

- a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication.
- medication is stored safely by an Educator, who will provide it to the child when required.
- supervision is provided by an Educator whilst the child is self-administering.
- a recording is made in the medication record for the child that the medication has been self-administered.

GUIDELINES FOR ADMINISTRATION OF PARACETAMOL:

- families must provide their own Paracetamol for use as directed by a medical practitioner.
- Paracetamol will be kept in the locked medication container for emergency purposes should authorised collectors not be contactable
- to safeguard against the incorrect use of Paracetamol and minimise the risk of concealing the fundamental reasons for high temperatures, educators will only administer Paracetamol if it is accompanied by a Doctor's letter stating the reason for administering, the dosage and duration it is to be administered for except for in emergency situations (onset of fever whilst at the Service).
- if a child presents with a temperature whilst at the Service, the family will be notified immediately and asked to organise collection of the child as soon as possible
- the family will be encouraged to visit a doctor to find the cause of the temperature. While waiting for the child to be collected, educators will:
 - remove excess clothing to cool the child down
 - offer fluids to the child
 - encourage the child to rest.
 - monitor the child for any additional symptoms
 - maintain supervision of the ill child at all times, while keeping them separated from children who are well.

MEDICATIONS KEPT AT THE SERVICE

- any medication, cream or lotion kept on the premises will be checked monthly for expiry dates.
- a list of First Aid Kit contents close to expiry or running low will be given to the Nominated Supervisor who will arrange for the purchase of replacement supplies
- if a child's individual medication is due to expire or running low, the family will be notified by educators that replacement items are required
- it is the family's responsibility to take home short-term medication (such as antibiotics) at the end of each day, and return it with the child as necessary
- MEDICATION WILL NOT BE ADMINISTERED IF IT HAS PAST THE PRODUCT EXPIRY DATE.
- families are required to complete an *Administration of Medication Record* for lotions to be administered.

EMERGENCY ADMINISTRATION OF MEDICATION

- in the occurrence of an emergency and where the administration of medication must occur, the Vacation Care Service must attempt to receive verbal authorisation by a parent of the child named in the child's enrolment form who is authorised to consent to the administration of medication.
- If a parent of a child is unreachable, the Vacation Care Service will endeavour to obtain verbal authorisation from an emergency contact of the child named in the child's enrolment form, who is authorised to approve the administration of medication.
- If all the child's nominated contacts are non-contactable, the Service must contact a registered medical practitioner or emergency service on 000.
- In the event of an emergency and where the administration of medication must occur, written notice must be provided to a parent of the child or other emergency contact person listed on the child's enrolment form.

EMERGENCY INVOLVING ANAPHYLAXIS OR ASTHMA

- for anaphylaxis or asthma emergencies, medication/treatment will be administered to a child without authorisation, following the Asthma or Anaphylaxis Action Plan provided by the parent/guardian. [National Asthma Council (NAC) or ASCIA]
- in the event of a child not known to have **asthma or anaphylaxis** and appears to be in severe respiratory distress, the emergency plans for first aid must be followed immediately.
 - an ambulance must be called immediately
 - place child in a seated upright position
 - give 4 separate puffs of a reliever medication (eg: Ventolin) using a spacer if required.
 - repeat every 4 minutes until the ambulance arrives

- in the event of an **anaphylaxis** emergency where any of the following symptoms are present, an EpiPen must be administered
 - difficulty/noisy breathing
 - swelling of the tongue
 - swelling or tightness in throat
 - difficulty talking
 - wheeze or persistent cough
 - persistent dizziness or collapse pale and floppy

(Sydney Children’s Hospitals Network – 2020)

The Vacation Care Service will contact the following (as required) as soon as practicably possible:

- Emergency Services 000
- a parent of the child
- the regulatory authority within 24 hours (if an ambulance was called).
- The child will be comforted, reassured, and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian society of clinical immunology and allergy. ascia. <https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis>

Belonging, Being and Becoming: The Early Years Learning Framework for Australia. (2009).

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2017).

National Health and Medical Research Council. (2012). (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

NSW Department of Health: www.health.nsw.gov.au

Revised National Quality Standard. (2018).

The Sydney Children’s Hospital Network (2020)

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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ANAPHYLAXIS MANAGEMENT POLICY

Anaphylaxis is a severe and sometimes sudden allergic reaction which is potentially life threatening. It can occur when a person is exposed to an allergen (such as food or an insect sting). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more.

Anaphylaxis should always be treated as a medical emergency, requiring immediate treatment. Most cases of anaphylaxis occur after a person is exposed to the allergen to which they are allergic, usually a food, insect sting or medication. Any anaphylactic reaction always requires an emergency response.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
85	Incident, injury, trauma and illness policies and procedures
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents

92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
173	Prescribed information to be displayed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Enrolment Policy Incident, Illness, Accident, Trauma Policy	Medical Conditions Policy Privacy and Confidentiality Policy Supervision Policy
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PURPOSE

We aim to minimise the risk of an anaphylactic reaction occurring at our Service by implementing risk minimisation strategies and ensuring all staff members are adequately trained to respond appropriately and competently to an anaphylactic reaction. We will also aim to ensure that the risk of children with known allergies coming into contact with allergens is eliminated or reduced.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

DUTY OF CARE

Our Service has a legal responsibility to take reasonable steps to provide

- a. A safe environment for children free of foreseeable harm
- b. Adequate Supervision of children

Our focus is keeping children safe and promoting the health, safety and wellbeing of children attending our Service. Staff members including relief staff need to be aware of children at the Vacation Care Service who suffer from allergies that may cause an anaphylactic reaction. Management will ensure all staff are aware of children's Medical Management Plan and Risk Management Plans.

BACKGROUND

Anaphylaxis is a severe, rapidly progressing allergic reaction that is potentially life threatening.

The most common allergens in children are:

- Peanuts
- Eggs
- Tree nuts (e.g. cashews)
- Cow's milk
- Fish and shellfish
- Wheat
- Soy
- Sesame
- Certain insect stings (particularly bee stings)

The key to the prevention of anaphylaxis and response to anaphylaxis within the Vacation Care Service is awareness and knowledge of those children who have been diagnosed as at risk, awareness of allergens, and the implementation of preventative measures to minimise the risk of exposure to those allergens. It is important to note however, that despite implementing these measures, the possibility of exposure cannot be completely eliminated.

Communication between the Service and families is vital in understanding the risks and helping children avoid exposure.

Adrenaline given through an adrenaline autoinjector (such as an EpiPen[®] or Anapen[®]) into the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Service will adhere to privacy and confidentiality procedures when dealing with individual health needs, including having families provide written permission to display the child's action plan in prominent positions within Vacation Care Service.

A copy of all medical conditions policies will be provided to all educators, volunteers and families of the Service. It is important that communication is open between families and educators to ensure that appropriate management of anaphylactic reactions are effectively implemented.

It is imperative that all educators and volunteers at the Vacation Care Service follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

CHILDREN WHO CARRY THEIR OWN ADRENALINE AUTOINJECTOR IN OUTSIDE OF SCHOOL HOURS CARE SERVICES

In some cases, children over preschool age attending an Out of School Hours Service as part of a before/after school or vacation care program might carry their own adrenaline auto-injector. Children at risk of anaphylaxis usually only carry their own adrenaline auto-injector once they travel independently to and from school. This often coincides with high school or the latter years of primary school. To ensure compliance with the National Quality Framework an authorisation for a child over preschool age to self-administer medication is required (Regulation 96).

Where a child carries their own adrenaline auto-injector it is advisable that the Vacation Care Service requests the child's parent to provide a second adrenaline auto-injector to be kept on the Service premises in a secure location, as it should not be relied upon that the auto-injector is always being carried on their person.

If a child does carry an auto-injector device exact location should be easily identifiable by Vacation Care Service staff. Hazards such as identical school bags in before and after school care should be considered. Where an auto-injector device is carried on their person, a copy of the child's medical management plan should also be carried.

MANAGEMENT NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- all parents/guardians are asked as part of the enrolment procedure, and prior to their child's attendance at the Vacation Care Service, whether the child has allergies and document this information on the child's enrolment record. If the child has severe allergies, the parents/guardians are required to provide a medical management action plan signed by a Registered Medical Practitioner
- that all staff members have completed ACECQA approved first aid training at least every 3 years and this is recorded with each staff member's certificate held on the Service's premises
- that at least one educator who has completed an anaphylaxis management training approved by the Education and Care Services National Regulations is in attendance whenever children are being educated and cared for by the Service
- that all staff members have completed anaphylaxis management training approved by the Education and Care Services National Regulations at least every 2 years
- that all staff members, whether or not they have a child diagnosed at risk of anaphylaxis undertakes training in the administration of the adrenaline auto-injection device and cardio-pulmonary resuscitation every 12 months, recording this in the staff records
- that all staff members are aware of symptoms of an anaphylactic reaction, the child at risk of anaphylaxis, the child's allergies, anaphylaxis action plan and EpiPen kit® / Anapen®.
- that a copy of this policy is provided and reviewed during each new staff member's induction process.
- a copy of this policy is provided to the parent or guardian of each child diagnosed at risk of anaphylaxis at the Vacation Care Service.
- that updated information, resources, and support for managing allergies and anaphylaxis are regularly provided for families
- that all management and staff remain up to date with changes to individual children's action plans
- the Vacation Care Service receives an up to date copy of the action plan every 12 to 18 months or if changes have occurred to the child's diagnosis or treatment.

IN OUT OF SCHOOL HOURS SERVICES WHERE A CHILD DIAGNOSED AT RISK OF ANAPHYLAXIS IS ENROLLED THE NOMINATED SUPERVISOR SHALL ALSO:

- conduct an assessment of the potential for accidental exposure to allergens while the child/children at risk of anaphylaxis are in the care of the Service and develop a risk minimisation plan for the Service in consultation with staff and the families of the child/children.

- ensure that a child who has been prescribed an adrenaline auto-injection device is **not** permitted to attend the Vacation Care Service without the device
- display an Australasian Society of Clinical Immunology and Allergy Inc. (ASCI A)- Action *Plan for Anaphylaxis* 2020 (RED) for each child with a diagnosed risk of anaphylaxis in key locations at the Vacation Care Service, for example, in the main area of the Vacation Care service, near the kitchen, and / or near the medication cabinet
- display ASCIA First Aid Plan for Anaphylaxis (ORANGE) in key locations in the Vacation Care Service.
- ensure that a child's individual anaphylaxis medical management action plan is signed by a Registered Medical Practitioner and inserted into the enrolment record for each child. This will outline the allergies and describe the prescribed medication / treatment for that child and the circumstances in which the medication should be used
- ensure that a complete auto-injection device kit (which must contain a copy the child's anaphylaxis medical management action plan) is provided by the parent/guardian for the child while at the Vacation Care Service
- ensure that all staff responsible for the preparation of food are trained in managing the provision of meals for a child with allergies, including high levels of care in preventing cross contamination during storage, handling, preparation, and serving of food
- ensure that a notice is displayed prominently in the main entrance of the Vacation Care Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and providing details of the allergen/s
- ensure that all relief staff members in the Vacation Care Service have completed training in anaphylaxis management including the administration of an adrenaline auto-injection device, awareness of the symptoms of an anaphylactic reaction and awareness of any child at risk of anaphylaxis, the child's allergies, the individual anaphylaxis medical management action plan and the location of the auto-injection device kit
- implement the communication strategy and encourage ongoing communication between parents/guardians and staff regarding the current status of the child's allergies, this policy and its implementation
- display an Emergency contact card by the telephone
- ensure that all staff in the Vacation Care Service know the location of the anaphylaxis medical management plan and that a copy is kept with the auto-injection device kit
- ensure that a staff member accompanying children outside the Vacation Care Service carries a copy of the anaphylaxis medical management action plan with the auto-injection device kit

- provide information to the Vacation care Service community about resources and support for managing allergies and anaphylaxis

EDUCATORS WILL:

- ensure that that a current anaphylaxis medical management action plan signed by the child's Registered Medical Practitioner and a complete auto-injection device kit (which must contain a copy the child's anaphylaxis medical management action plan) is provided by the parent/guardian for the child while at the Vacation Care Service
- ensure a copy of the child's anaphylaxis medical management action plan is visible and known to staff, visitors, and students in the Vacation Care Service
- follow the child's anaphylaxis medical management action plan in the event of an allergic reaction, which may progress to anaphylaxis
- practice the administration procedures of the adrenaline auto-injection device using an auto-injection device trainer and 'anaphylaxis scenarios' on a regular basis, preferably quarterly.
- ensure the child at risk of anaphylaxis only eats food that has been prepared according to the parents' or guardians' instructions.
- ensure tables and bench tops are washed down effectively after eating
- increase supervision of a child at risk of anaphylaxis on special occasions such as excursions, incursions, parties and family days
- ensure that the auto-injection device kit is:
 - stored in a location that is known to all staff, including relief staff;
 - NOT locked in a cupboard
 - easily accessible to adults but inaccessible to children
 - stored in a cool dark place at room temperature
 - NOT refrigerated
 - contains a copy of the child's medical management plan
- ensure that the auto-injection device kit containing a copy of the anaphylaxis medical management action plan for each child at risk of anaphylaxis is carried by a staff member accompanying the child when the child is removed from the Vacation Care Service e.g. on excursions that this child attends.

- regularly check and record the adrenaline auto-injection device expiry date. (The manufacturer will only guarantee the effectiveness of the adrenaline auto-injection device to the end of the nominated expiry month)
- provide information to the Vacation Care Service community about resources and support for managing allergies and anaphylaxis

In the event where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:

- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Administer an adrenaline autoinjector
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours

IN THE EVENT THAT A CHILD SUFFERS FROM AN ANAPHYLACTIC REACTION THE VACATION CARE SERVICE AND STAFF WILL:

- Follow the child's anaphylaxis action plan.
- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Record the time of administration of adrenaline autoinjector
- If after 5 minutes there is no response, a second adrenaline autoinjector should be administered to the child if available
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the regulatory authority within 24 hours

FAMILIES WILL:

- inform staff at the Vacation Crae Service, either on enrolment or on diagnosis, of their child's allergies
- provide staff with an anaphylaxis medical management Action Plan giving written consent to use the auto-injection device in line with this action plan and signed by the Registered Medical Practitioner

- develop an anaphylaxis risk minimisation plan in collaboration with the Nominated Supervisor and other Service staff
- provide staff with a complete auto-injection device kit
- maintain a record of the adrenaline auto-injection device expiry date to ensure it is replaced prior to expiry
- assist staff by offering information and answering any questions regarding their child's allergies
- communicate all relevant information and concerns to staff, for example, any matter relating to the health of the child
- comply with the Vacation Care Service's policy that a child who has been prescribed an adrenaline auto-injection device is **not** permitted to attend the Vacation Care Service or its programs without that device
- read and be familiar with this policy
- identify and liaise with the nominated staff member primarily caring for their child
- bring relevant issues to the attention of both staff and the Approved Provider
- notify the Vacation Care Service if their child has had a severe allergic reaction while not at the service- either at home or at another location
- notify staff of any changes to their child's allergy status and provide a new anaphylaxis action plan in accordance with these changes
- provide an updated action plan every 12-18 months or if changes have been made to the child's diagnosis

EDUCATING CHILDREN:

- Educators will talk to children about foods that are safe and unsafe for the anaphylactic child.
- staff will talk about signs and symptoms of allergic reactions to children (e.g. itchy, furry, or scratchy throat, itchy or puffy skin, hot, feeling funny).
- with older children, staff will talk about strategies to avoid exposure to unsafe foods, such as taking their own plate and utensils, having the first serve from commercially safe foods, and not eating food that is shared
- Educators and staff will include information and discussions about food allergies in the programs they develop for the children, to help children understand about food allergy and encourage empathy, acceptance and inclusion of the allergic child

REPORTING PROCEDURES:

After each emergency situation the following will need to be carried out:

- staff members involved in the situation are to complete an *Incident, Injury, Trauma and Illness Report*, which will be countersigned by the Nominated Supervisor of the Service at the time of the incident
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Report*
- if necessary, a copy of the completed form will be sent to the insurance company
- a copy of the *Incident, Injury, Trauma and Illness Report* will be placed in the child's file
- the Nominated Supervisor will inform the Vacation Care Service management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours as per regulations
- staff will be debriefed after each anaphylaxis incident and the child's individual Anaphylaxis medical action plan evaluated, including a discussion of the effectiveness of the procedure used.
- staff will discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

CONTACT DETAILS FOR RESOURCES AND SUPPORT:

[Australasian Society of Clinical Immunology and Allergy \(ASCIA\)](#) provide information on allergies. Their sample Anaphylaxis Action Plan can be downloaded from this site. Contact details for Allergists may also be provided. Important information: The ASCIA Action Plan for Anaphylaxis must be completed by a medical practitioner.

<https://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis>

Current ASCIA Action Plan are the 2020 versions, however previous versions (2018 and 2017) are still valid for use throughout 2020. There are two types of ASCIA Action Plans for Anaphylaxis:

ASCIA Action Plan 2020 (**RED**) are for adults or children with medically confirmed allergies, who have been prescribed adrenaline autoinjectors.

ASCIA Action Plan for Allergic Reactions (**GREEN**) is for adults or children with medically confirmed allergies who have not been prescribed adrenaline autoinjectors.

A new ASCIA First Aid Plan for Anaphylaxis (**ORANGE**) EpiPen and Generic versions has replaced other versions of the action plans.

[Allergy & Anaphylaxis Australia](#) is a non-profit support organisation for families with food anaphylactic children. Items such as storybooks, tapes, auto-injection device trainers and other resources are available for sale from the Product Catalogue on this site. Allergy & Anaphylaxis Australia also provides a

telephone support line for information and support to help manage anaphylaxis: Telephone 1300 728 000.

[Royal Children’s Hospital Anaphylaxis Advisory Support Line](#) provides information and support about anaphylaxis to school and licensed children’s services staff and parents. Telephone 1300 725 911 or Email:carol.whitehead@rch.org.au

[NSW Department of Education](#) provides information related to anaphylaxis, including frequently asked questions related to anaphylaxis training.

ADDITIONAL INFORMATION

The following links have been provided so you can research and adjust your policy to align with your own state governments requirements. Delete all or part of this section once formatting is complete.

NEW SOUTH WALES (NSW)
<p>www.dec.nsw.gov.au/what-we-offer/regulation-and-accreditation/early-childhood-education-care (Search for ‘anaphylaxis’)</p> <p>https://education.nsw.gov.au/search?site=%2Fcontent%2Fmain-education%2Fen%2Fhome&access=s&q=anaphylaxis</p>

Source

ASCIA Action Plans, Treatment Plans, & Checklists for Anaphylaxis and Allergic Reactions: <https://www.allergy.org.au/hp/ascia-plans-action-and-treatment>

Australian Children’s Education & Care Quality Authority. (2014).

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2020).

Guide to the National Quality Standard. (2017).

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

New South Wales Department of Education and Communities. (2014). *Anaphylaxis Guidelines for Early Childhood Education and Care Services.*

Revised National Quality Standard. (2018).

REVIEW

NOVEMBER 2020	NOVEMBER 2021
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ARRIVAL AND DEPARTURE POLICY

Arrival and departure times are planned to promote a smooth transition between home and our Vacation Care Service. The opportunity to build secure, respectful and reciprocal relationships between children and families is promoted during arrival and departure times where educators have the opportunity to engage in conversations with families and support each child's well-being. To ensure the health and safety of children at our Service, our *Arrival and Departure Policy* is strictly adhered to, allowing only nominated authorised persons to collect children at any time throughout the day. The daily sign in and out register is not only a legally required document to record children's attendance as per National Law and Regulations but is also used as a record of the children on the premises should an emergency evacuation be required to be implemented.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
99	Children leaving the education and care service premises
157	Access for parents

158	Children's attendance record to be kept by approved provider
160	Child enrolment records to be kept by approved provider and family day care educator
173	Prescribed information to be displayed
176	Time to notify certain information to Regulatory Authority
177	Prescribed enrolment and other documents to be kept by approved provider
S162 (A)	Persons in day to day charge and nominated supervisors to have child protection training

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of Medication Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Control of Infectious Diseases Policy Coronavirus (COVID-19) Management Policy Emergency Evacuation Policy	Enrolment Policy Handwashing Policy Orientation of New Families Policy Privacy and Confidentiality Policy Sick Children Policy Termination of Enrolment Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure the protection and safety of all children, staff members, and families accessing the Service. Educators and Staff will only release children to an authorised person as named by the parent/guardian on the individual child's enrolment form.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Guidelines for delivery and collection of children are put in place to ensure the health, safety and wellbeing of each individual child.

As part of our Risk Management process, our Service *may* introduce explicit control measures to minimise the risk of spreading infectious diseases/viruses such as coronavirus (COVID-19). Our risk

assessment may result in changes to our *Arrival and Departure Policy* and are based on mitigating risks following the recommendations made by the Australian Health Protection Principal Committee (AHPPC), Safe Work Australia and the Department of Health. Control measures and changes to policies are reviewed in consultation with staff members and communicated clearly to parents, families and visitors.

ARRIVAL AT SERVICE

Our Service has an obligation to ensure the health and safety of employees, children and visitors in our workplace, so far as reasonably practicable. Our Service has implemented the following measures:

- any person who is displaying symptoms such as: fever, coughing, sore throat, fatigue and shortness of breath should not attend our Service under any circumstance. (Any person displaying these symptoms should be tested for COVID-19 by visiting a free respiratory clinic or contacting their GP.)
- a designated area for drop off/ pick up will be clearly indicated
- signage clearly indicates the requirement of all adults to adhere to physical distancing requirements (1.5 metres)
- any child who has a temperature over 37.5°C will not be permitted entry to care (unless there is another logical explanation for their higher-than-normal temperature reading)
- children will be welcomed outside our Service by an educator in the foyer
- all children need to be signed in by an authorised person. Note: the signing in of a child is verification of the accuracy of the record. Information required on the register includes the time and the signature of the person dropping off the child
- children are required to wash their hands upon arrival or use the hand sanitiser provided
- the parent/authorised nominee must also advise staff who will be collecting the child/children
- families will be reminded to sign their child/children into the Service and will be encouraged to do so immediately upon arrival to avoid forgetting.
- should families forget to sign their child/children in, National Regulations require the Nominated Supervisor to sign the child in
- sign in sheets are to be used as a record in the case of an emergency to account for all children
- children are to be sighted by an educator before the parent or person responsible for the child leaves. This ensures that the educator is aware that the child has arrived and is in the building.

- a child's medication needs, or any other important or relevant information should be passed on to one of the child's educators by the person delivering the child
- the educator will check that the family has completed an *Administration of Medication Record* and store the medication appropriately, away from children's reach
- in order for children to feel secure and safe, it is important that children and families are greeted upon arrival by a member of staff and have the chance to say goodbye to the person dropping them off
- in the case of a separated family, either biological parent is able to add a contact in writing unless a court order is provided to the Nominated Supervisor stating that one parent has sole custody and responsibility.

DEPARTURE FROM SERVICE

- parents are to advise their child's educator if someone different is picking up their child, both verbally and on the sign in/out sheet. This person is to be named on the enrolment form or added in writing to Management as an authorised nominee for the child.
- photo identification must be sighted by a Primary Contact Educator before the child is released. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- all children must be signed out by their parent (or a person authorised by the parent-authorised nominee) when the child is collected from our Service. If the parent or other person forgets to sign the child out, they will be signed out by the Nominated Supervisor
- children must be signed out on the same sheet that they were signed in on
- educators must use hand sanitiser between child collections
- in the case of an emergency, where the parent or a previously authorised nominee is unable to collect the child, the parent or person responsible for the child (as listed on enrolment form as having a parenting role) may telephone the service and arrange an alternative person to pick up the child. This contact must then be confirmed in writing to the Service (email, text, or letter)
- parents are requested to arrive to collect their child/children by 4.00pm

- no child will be withheld from an authorised contact or biological parent named on the enrolment form unless a current court order is on file at the Service
 - in the case of a particular person (including a biological parent) being denied access to a child, the service requires a written notice (court order) from a court of law.
 - educators will attempt to prevent that person from entering the service and taking the child; however, the safety of other children and educators must be considered
 - educators will not be expected to physically prevent any person from leaving the service
 - in such cases, the parent with custody will be contacted along with the local police and appropriate authorities
 - where possible the educator will provide police with the make, colour, and registration number of the vehicle being driven by the unauthorised person, and the direction of travel when they left the Service
 - a court order overrules any requests made by parents to adapt or make changes
 - in the case of a serious incident occurring, as described above, the regulatory authority must be notified within 24 hours through the [NQA IT System](#)
 - nominated supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow anyone under the age of 16 to collect children.
 - if the person collecting the child appears to be intoxicated or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
 - discuss their concerns with the person, without the child being present if possible, and
 - suggest they contact another parent or authorised nominee to collect the child
 - follow procedures to protect the safety of children and staff of the education and care service as per Child Protection Law and Child Protection Policy
 - contact the Police and other regulatory authorities (Child Protection Hotline 132 111)
 - if an authorisation to collect a child is refused by the Service, it is best practice to document the actions for evidence to authorities (refer to *Refusal of Authorisation Record*).
 - at the end of each day educators will check indoor and outdoor premises including all rooms and storage rooms to ensure that no child remains on the premises after the service closes
- children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy*.

MISSING CHILDREN

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling **000**
- Contact the child's parents
- Notify the regulatory authority within 24 hours of becoming aware of a serious incident

VISITORS

- to ensure we can meet Work Health and Safety requirements and ensure a child safe environment, individuals visiting our Service must sign in when they arrive at the service and sign out when they leave. It is also a requirement of the National Regulations that Visitors are not left alone with children at any time.
- signage will clearly indicate who is permitted to enter the service
- all visitors must adhere to our *Handwashing Policy* and wash their hands or sanitise upon arrival and departure of the service

LATE COLLECTION OF CHILDREN

- if there are children still present at the Service upon closing, it is best practice to ensure a minimum of two Educators are present remain until all children are collected.
- instruction to parents; *"Please remember that our Educators have families to go home to and their own children to collect by a designated time. If you are late to collect your child two Educators have to stay behind and therefore both have to be paid overtime. To cover this, a late fee of \$15 per 15 minutes or part thereof will be charged (e.g. if you are 5 minutes late you will be charged for a 15-minute block. If you are 20 minutes late you will be charged for two 15-minute blocks, etc.)"*
- if parents/guardians know that they are going to be late, they must notify the Service. If possible, they should make arrangements for someone else to collect their child
- if they have not arrived by 4:00pm the Service will attempt to contact them via phone. If parents/authorised persons are unable to be contacted the Nominated Supervisor will call alternative contacts as listed on the enrolment form to organise collection of the child

- due to licensing and insurance purposes, if by 4pm neither the parent or any of the authorised contacts are available or contactable, the Service may need to contact the police and other relevant authorities
- if the child is taken to an alternative safe location for example: Police Station, a sign will be displayed at the Service notifying parents/guardian of the child’s whereabouts. If this occurs, the Service will be obligated to contact relevant Child Protection Agencies and notify the Regulatory Authority.
- where families are continually late to collect children, a *Late Collection of Children letter* will be presented to parents/guardians
- should this non-compliance continue, the service reserves the right to terminate a child’s enrolment.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Government Department of Education Skills and Employment. *My Time, Our Place. Framework for School Aged Care in Australia.* (2011).
 Australian Government Department of Health *Australian Health Protection Principal Committee (AHPPC)*
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations.](#) (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Standard. (2020).
 National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*
 Revised National Quality Standard. (2018).
 Safe Work Australia (2020)

REVIEW

POLICY REVIEWED: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER 2021
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ASTHMA MANAGEMENT POLICY

Asthma is a chronic health condition affecting approximately 15% of children. It is one of the most common reasons for childhood admission to hospital. Community education and correct asthma management will assist to minimise the impact of asthma. It is generally accepted that children under the age of six do not have the skills or ability to recognise and manage their own asthma effectively. Our Out of School Hours Service recognises the need to educate its staff and families about asthma and to implement responsible asthma management strategies.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
85	Incident, injury, trauma and illness policies and procedures
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan

91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Enrolment Policy Incident, Illness, Accident, Trauma Policy	Medical Conditions Policy Privacy and Confidentiality Policy Supervision Policy
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PURPOSE

We aim to provide a safe and healthy environment for all children enrolled at the Vacation Care Service. We believe in providing children with asthma the ability to participate in the programmed learning activities and experiences ensuring an inclusive environment is upheld.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

DUTY OF CARE

Our Vacation Care Service has a legal responsibility to take reasonable steps to provide

- A safe environment free of foreseeable harm and
- Adequate Supervision of children

Staff members, including relief staff, need to be aware of children at the Vacation Care Service who suffer from allergies, including asthma and know enough about Asthma reactions to ensure the safety and wellbeing of the children. Management will ensure all staff are aware of children's Medical Management Plan and Risk Management Plans.

BACKGROUND

Asthma is clinically defined as a chronic lung disease, which can be controlled but not cured. In clinical practice, asthma is defined by the presence of both excessive variation in lung function, i.e. variation in expiratory airflow that is greater than that seen in healthy children ('variable airflow limitation'), and respiratory symptoms (e.g. wheeze, shortness of breath, cough, chest tightness) that vary over time and may be present or absent at any point in time (National Asthma Council Australia, 2015, p.4).

Asthma affects approximately one in 10 Australian children and adults. It is the most common reason for childhood admission to hospital. However, with correct asthma management people with asthma need not restrict their daily activities. Community education assists in generating a better understanding of asthma within the community and minimising its impact.

Symptoms of asthma include wheezing, coughing (particularly at night), chest tightness, difficulty in breathing and shortness of breath, and symptoms may vary between children. It is generally accepted that children under six years of age do not have the skills and ability to recognise and manage their own asthma without adult assistance. Our OSHC Service recognises the need to educate the staff and parents/guardians about asthma and to promote responsible asthma management strategies.

Asthma causes three main changes to the airways inside the lungs, and all of these can happen together:

- the thin layer of muscle within the wall of an airway can contract to make it tighter and narrower – reliever medicines work by relaxing these muscles in the airways.
- the inside walls of the airways can become swollen, leaving less space inside – preventer medicines work by reducing the inflammation that causes the swelling.
- mucus can block the inside of the airways – preventer medicines also reduce mucus.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. Our Service will ensure that there is at least one educator on duty at all times who has current approved emergency asthma management training in accordance with the Education and Care Services National Regulations.

ASTHMA AND COVID-19

There is no specific data as yet to suggest people with asthma are at greater risk of contracting COVID-19 however as this is a serious respiratory illness, anyone with asthma should implement strict hygiene measures to protect themselves and others.

Health practitioners have encouraged parents of children with asthma to:

- o update their child's Asthma Action Plan with their general practitioner
- o ensure their child uses their reliever and preventer medicines (if required) as prescribed
- o ensure their child continues taking medication to keep their asthma well controlled
- o practice good hygiene and other measures to reduce contact with people who may be infected
- o have their child tested for COVID-19 if they develop any symptoms (cough, fever, shortness of breath, sore throat)

(Asthma Australia, June 2020)

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our Vacation Care Service will adhere to privacy and confidentiality procedures when dealing with individual health needs.

A copy of our *Medical Conditions Policy* will be provided to all educators, volunteers and families of the Service and reviewed on an annual basis. It is important that communication is open between families and educators to ensure appropriate asthma management.

It is imperative that all educators and volunteers at our Vacation Care Service follow each individual child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

MANAGEMENT AND NOMINATED SUPERVISOR WILL ENSURE:

- upon employment at the Vacation Care Service all staff will read and be aware of all medical condition policies and procedures, maintaining awareness of asthma management strategies

- that all educator's approved first aid qualifications, anaphylaxis management training and Emergency Asthma Management training are current, meet the requirements of the National Law and National Regulations, and are approved by ACECQA
- at least one staff member with current approved Emergency Asthma Management training is on duty at all times that children are in attendance at the Service, as per Regulations
- the details of approved Emergency Asthma Management training are included on the staff record.
- parents are provided with a copy of the Service's *Asthma Policy* upon enrolment of their child
- written consent is requested from families on the enrolment form to administer emergency asthma medication or treatment if required
- that when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable **or within 24 hours of the incident.**
- to identify children with asthma during the enrolment process and inform all staff
- families are provided with an Asthma Action Plan, or requested to provide one, completed in consultation with, and signed by, a medical practitioner and updated regularly (or whenever a change to their child's management of asthma changes)
- a Risk Minimisation Plan is developed for every child with asthma, in consultation with parents/guardians
- that all children with asthma have an Asthma Action Plan and Risk Minimisation Plan filed with their enrolment record
- an Administration of Medication record is kept for each child to whom medication is to be administered by the Service
- families of all children with asthma provide reliever medication and a spacer (including a child's face mask, if required) whilst their child is attending the Service
- the expiry date of reliever medication is checked regularly and replaced when required, and that spacers and facemasks are replaced after every use
- the asthma first aid procedure is consistent with current national recommendations
- that all staff are aware of the asthma first aid procedure
- communication between management, educators, staff and parents/guardians regarding the Service's *Asthma Policy* and strategies are reviewed and discussed regularly to ensure compliance and best practice
- all staff are able to identify and minimise asthma triggers for children attending the Service, where possible
- that children with asthma are not discriminated against in anyway

- that children with asthma can participate in all activities safely and to their full potential
- staff communicate any concerns with parents/guardians regarding the management of children with asthma at the Service
- Asthma Australia's Asthma First Aid posters are displayed in key locations at the Vacation Care Service
- that medication is administered in accordance with the *Administration of Medication Policy*.

In the event that a child suffers from an asthma emergency the Service and staff will:

- Follow the child's Asthma Action Plan
- If the child does not respond to steps within the Asthma Action Plan call an ambulance immediately by dialing 000.
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the regulatory authority within 24 hours

EDUCATORS WILL ENSURE:

- they are aware of the Service's *Asthma Policy* and asthma first aid procedure (ensuring that they can identify children displaying the symptoms of an asthma attack and locate their personal medication, and Asthma Action Plans.
- they maintain qualifications for approved emergency asthma management training.
- they are able to identify and, where possible, minimise asthma triggers as outlined in the child's Asthma Action Plan.
- that the asthma first aid kit, children's personal asthma medication and Asthma Action Plans are taken on excursions or other offsite events, including emergency evacuations and drills
- to administer prescribed asthma medication in accordance with the child's Asthma Action Plan and the Service's *Administration of Medication Policy*.
- a Risk Minimisation Plan is developed for every child with asthma in consultation with parents/guardians
- to discuss with parents/guardians the requirements for completing the enrolment form and *Administration of Medication Record* for their child

- to consult with the parents/guardians of children with asthma in relation to the health and safety of their child, and the supervised management of the child's asthma
- communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- that children with asthma are not discriminated against in any way
- that children with asthma can participate in all activities safely and to their full potential, ensuring an inclusive program.

FAMILIES WILL:

- read the Service's *Asthma Management Policy*
- inform staff, either on enrolment or on initial diagnosis, that their child has asthma
- provide a copy of their child's Asthma Action Plan to the Service ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- have the Asthma Action Plan reviewed and updated at least annually or whenever medication or management changes
- ensure all details on their child's enrolment form and medication record are completed prior to commencement at the Vacation Care Service
- work with staff to develop a Risk Minimisation Plan for their child
- provide an adequate supply of appropriate asthma medication and equipment for their child at all times
- notify staff, in writing, of any changes to the information on the Asthma Action Plan, enrolment form or medication record
- communicate regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma
- encourage their child to learn about their asthma, and to communicate with Service staff if they are unwell or experiencing asthma symptoms

RISK MINIMISATION PLAN FOR A CHILD WITH DIAGNOSED ASTHMA

The staff, together with the parents/guardians of a child with asthma, will discuss and agree on a Risk Minimisation Plan for the emergency management of an asthma attack based on the child's Asthma Action Plan. This plan will be included as part of, or attached to, the child's asthma action plan and enrolment record. This plan should include action to be taken where the parents/guardians have provided asthma medication, and in situations where this medication may not be available.

COMMUNICATION PLAN

A communication plan will be created in accordance to our *Medical Conditions Policy*. This will detail the negotiated and documented manner to communicate any changes to the child’s medical management plan and risk management plan for the child with relevant staff and educators.

RESOURCES

[Asthma First Aid A4 Poster](#)

[Asthma Action Plan](#)

[Supporting the Continuity of Asthma Care \(for patients with severe asthma during Coronavirus \(COVID-19\) pandemic\)](#)

SOURCE:

Asthma Australia: www.asthmaaustralia.org.au

Australian Asthma Handbook: <https://www.astmahandbook.org.au/>

Australian Children’s Education & Care Quality Authority. (2014)

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (~~2017~~). (2020).

National Asthma Council Australia. (2015). *Australian asthma handbook: Quick reference guide*.

<https://www.astmahandbook.org.au/uploads/555143d72c3e3.pdf> (due for re-release in July 2020)

National Asthma Council Australia. (2019). *My asthma guide*. <https://www.nationalasthma.org.au/living-with-asthma/resources/patients-carers/brochures/my-asthma-guide>

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED-NOVEMBER 2020	POLICY REVIEW-NOVEMBER 2021
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BUSHFIRE POLICY

Bushfires are an inherent part of Australia's environment. Bushfires can significantly impact on lives, property and the environment. The basic factors that determine whether a bushfire will occur include the presence of fuel, oxygen, and an ignition source. The intensity and speed the bushfire will spread depends on the current temperature, fuel load (fallen bark, leaf litter, small branches), fuel moisture (dry fuel will burn quickly, damp or wet fuel may not burn at all), wind speed, and slope angle.

Emergency management arrangements for fire safety differ within each state and territory and are determined by the State Emergency Services or combined emergency service agencies.

Regulations 97 and 168 (2) of the Education and Care Services National Regulations require that every early childhood education and care service in Australia, including Out of School Hours Care Services has an emergency and evacuation policy and procedure which includes:

- a risk assessment to identify the potential emergencies that are relevant to the service
- instructions for what must be done in the event of an emergency and evacuation procedures
- an emergency and evacuation floor plan, and
- the rehearsal of emergency and evacuation procedures every 3 months.

<https://www.legislation.nsw.gov.au/#/view/regulation/2011/653/chap4/part4.2/div5/reg97>

This policy outlines the strategies and procedures the Vacation Care Service will adhere to in the event of a bush fire, including information about closures during an emergency evacuation, and forms part of our Service's **Emergency Management Plan (EMP)**. The EMP records the emergency management arrangements to ensure every reasonable precaution to protect children, staff, and visitors from harm and hazard is maintained at all times.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

12	Meaning of serious incident
51	Conditions on service approval (safety, health and wellbeing of children)
89	First Aid Kits
93	Administration of medication
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
168	Education and care services must have policies and procedures

RELATED POLICIES

Administration of First Aid Policy Emergency Evacuation Policy Family Communication Policy Health and Safety Policy	Incident, Injury, Trauma and Illness Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure every reasonable precaution is taken to protect children and staff from harm and hazards likely to cause injury, including potential injury from bushfires. The potential for extreme fire conditions varies greatly throughout Australia, both in frequency and severity. Each state and territory

have varying mandatory regulations for implementing policies and procedures for being safe in areas where bushfires occur. Our Vacation Care Service will adhere to the regulations outlined by our Regulatory Authority within our state or territory and be familiar with relevant legislation and other special requirements such as building regulations, traffic restrictions or emergency announcements that may apply to the area our service is located.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

It is vital for the Vacation Care Service to be informed and prepared for bush fire conditions and respond appropriately during periods of high fire danger or local bush fire activity. This policy is to be implemented should a bush fire threaten our Service. During peak bush fire season, the nominated supervisor will monitor fire ratings through relevant authorities on a daily or hourly basis and communicate with all stakeholders as required. We are aware of our Fire Danger Rating and have appropriate fire safety equipment installed and maintained at all times. Our *Emergency Management Plan* (EMP) ensures all staff understand evacuation procedures in case of an emergency.

DEFINITIONS

The Australian climate is frequently hot, dry, and susceptible to drought. The widely varied fire seasons are reflected in the continent's different weather patterns. For most of southern Australia, the danger period is summer and autumn. For New South Wales and southern Queensland, the peak risk usually occurs in spring and early summer. The Northern Territory experiences most of its fires in winter and spring.

A '**Bush fire prone area**' is an area of land that can support a bushfire or is likely to be subject to bushfire attack. Bush fire prone maps are prepared by local councils and governments within each state and territory. Baseline data for bushfire prone areas is referred to as Bushfire Attack Level (BAL). (see additional information for each State or Territory's contacts)

Fire danger rating (FDR): provides an indication of the possible consequences of a fire. This rating is standardised across all Australian states and territories. The higher the fire danger rating, the more dangerous the conditions. Ratings range from *Low* to *Moderate*, to *Catastrophic*. FDR are maintained and updated by emergency services in each state or territory.

Emergency Management Plan (EMP): identifies the nature and range of possible emergencies and hazards to which children and staff may be exposed and the response and procedure in the event of an emergency. Effective planning and preparation of the EMP within the workplace ensures optimal response to emergencies should they occur. A risk assessment to identify potential emergencies that impact the service form the basis of the EMP.

Management/Nominated Supervisor will:

- ensure the *Emergency Management Plan* (EMP) is updated regularly inclusive of Emergency and Evacuation policies and procedures (see Appendix 1 for further information about inclusions)
- consult with relevant authorities for guidance and advice on the management of bushfire risk and emergencies
- conduct a risk assessment to identify a potential bush fire risk to the Vacation Care Service
- ensure the risk assessment considers-
 - prevention measures the Service will take prior and during the bush fire period
 - procedures to be taken when there is a bush fire in the local district
 - response measures the Service will take if confronted with a bush fire hazard or emergency
 - identified evacuation assembly areas and evacuation routes
 - procedures to ensure children are only released to persons authorised to collect them
 - mechanisms to ensure visitors and contractors are aware of the service’s emergency response procedures
- contact the local council *or* use a program (such as that available at <https://www.rfs.nsw.gov.au/plan-and-prepare/building-in-a-bush-fire-area/planning-for-bush-fire-protection/bush-fire-prone-land/check-bfpl> for NSW) to determine if you are in a bush fire prone area
- ensure a current emergency and evacuation floor plan of the Vacation Care Service is clearly displayed near each exit of the service
- ensure emergency drills, including a bush fire drill are practiced with educators and children every 3 months
- ensure a record is kept of each emergency evacuation drill practiced
- ensure the Service and educators are prepared for bush fire conditions and prepared to respond quickly and appropriately during high fire danger periods
- ensure all fire safety equipment is installed and maintained regularly- (fire extinguishers, fire panels, smoke detectors, long hoses with nozzles, buckets etc.).
- ensure all outdoor taps are in working order

- communicate with staff, educators, and families about bush fire preparation information and provisions
- discuss *Bush Fire Response Procedure* at team meetings and make any amendments as required
- ensure local emergency services have current contact details, including mobile number for emergency contact after hours
- ensure a clear and effective communication procedure during an emergency is implemented
- organise and communicate with off-site evacuation sites about emergency arrangements.
- ensure the Fire Danger Rating (FDR) is checked daily through **Australian Government Bureau of Meteorology** <http://www.bom.gov.au/?ref=hdr> or specific State/Territory sites (*see appendix*).
- ensure gutters are cleaned out and free from dry leaves and other debris
- trim trees to 2m from the Service building
- ensure flammable items are removed from the Service
- ensure all emergency exits are clear and accessible at all times
- conduct an 'emergency first aid kit / backpack audit' to ensure emergency contact information and supplies are current.
- ensure all records of attendance of children, staff and volunteers is accurate for each session of care
- ensure current emergency phone numbers are easily accessible at all times, including Regulated Authorities.
- monitor the bush fire situation when the rating is above High through internet or radio.
- not accept children for care on days when there is an extreme or catastrophic danger rating
- cancel any outdoor activities on days where air quality due to bushfire smoke may cause harm to children
- be prepared for closures of the Service on days when Catastrophic Fire Danger Rating (FDR) is issues in the NSW Fire Area
- notify the Regulatory Authority in the event of any closures or damage to premises within 24 hours or as soon as possible via the NQA ITS or email if there is no access to phones.

Educators will:

- assist in the development and review of the service's Emergency Management Plan (EMP)
- examine the Service grounds during their daily indoor and outdoor safety checks to ensure flammable and/or combustible materials (e.g. dead leaves and bark, chemicals) have been removed
- ensure they are familiar with the daily Fire Danger Rating (FDR)
- ensure the emergency first aid kit / backpack is organised and stored in an area that is easily accessible
- become familiar and confident with the Service's emergency evacuation policies and procedures
- participate in emergency drills, including *Bush Fire Response* procedures at least every 3 months

- become familiar with the Service’s emergency exits
- be aware of the designated assembly area
- eliminate all papers around the Service, including artwork, posters, displays and emptying garbage bins if advised that bush fires are in the local district
- keep up to date with professional development and training about bush fires and emergency evacuation
- be familiar with their role and responsibilities in the event of a bush fire.

RESOURCES

Bushfire Emergency Planning Guideline [A guide to planning for bushfire emergency](#)

[Early Childhood Australia Resources for Bushfire affected communities](#)

[NSW Rural Fire Service](#) for up-to-date information

NSW Rural Fire Service [Development Planning A guide to developing a Bush Fire Emergency Management Evacuation Plan](#)

[Australian Government Department of Education, Skills and Employment](#) – Emergency and natural disaster assistance

[Emerging Minds](#)- Bushfire preparedness for your family

[Be You](#)- resources- Bushfires and mental health

Department of Education Victoria- [Emergency Management Plan 2020-2021 Template](#)

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government: Geoscience Australia. Community safety: Bushfire: <http://www.ga.gov.au/scientific-topics/hazards/bushfire>

Community Early Learning Australia. [Bushfire advice for children’s services: https://www.cela.org.au/2018/01/07/bushfire-advice-for-childrens-services/](#)

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

NSW Government Education. Information sheet for the 2017/2018 bush fire season: Early childhood education and care: <https://education.nsw.gov.au/content/dam/main-education/early-childhood-education/operating-an-early-childhood-education-service/media/documents/ECE-Bushfires-information-sheet.pdf>

NSW Rural Fire Service. BAL rating and bush fire prone area map: <https://www.rfs.nsw.gov.au/plan-and-prepare/building-in-a-bush-fire-area/planning-for-bush-fire-protection/bush-fire-prone-land/check-bfpl>

NSW Rural Fire Service. Fire Danger Rating: <https://www.rfs.nsw.gov.au/fire-information/fdr-and-tobans>

Victoria State Government Education and Training. Emergency management requirements:

<https://www.education.vic.gov.au/childhood/providers/regulation/Pages/emergencymanagementrequirements.asp>

Revised National Quality Standard. (2018).

REVIEW:

POLICY REVIEWED: JANUARY 2020	NEXT REVIEW DATE: JANUARY 2021
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CHILD PROTECTION POLICY

Our Vacation Care Service is committed to providing a child safe environment where children’s safety and wellbeing is supported and children feel respected, valued and encouraged to reach their full potential. We will ensure all employees and volunteers understand the meaning, importance and benefits of providing a child safe environment and critically, understand their obligations and requirements as Mandatory Reporters.

At all times, management, staff and volunteers will treat children with the utmost respect and understanding

Our Service believes that:

- Children are capable of the same range of emotions as adults.
- Children’s emotions are real and need to be accepted by adults.
- A reaction given to a child from an adult in a child’s early stages of emotional development can be positive or detrimental depending on the adult’s behaviour.
- Children, who preserve, enhance and better understand their body’s response to an emotion is more able to predict the outcome from a situation and evade them or ask for help.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is respected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law

155	Interactions with children
175	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority
S162 (A)	Persons in day to day charge and nominated supervisors to have child protection training

RELATED POLICIES

Child Safe Environment Policy Code of Conduct Policy Family Communication Policy Health and Safety Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy	Respect for Children Policy Responsible Person Policy Staffing Arrangements Policy Student and Volunteer Workers Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

All Educators, Staff and Volunteers are committed to identifying possible risk and significant risk of harm to children and young people at the Service. We comprehend our duty of care responsibilities to protect children from all types of abuse and adhere to our legislative obligations at all time.

We aim to implement effective strategies to assist in ensuring the safety and wellbeing of all children. Our Service will act in the best interest of each child, assisting them to develop to their full potential in a secure and child safe environment.

SCOPE

This policy applies to management, staff, families and visitors (including contractors) of the Vacation Care Service.

WHAT IS ABUSE?

Child abuse is any action towards a child or young person that harms or puts at risk their physical, psychological or emotional health or development. Child abuse can be a single incident or can be a number of different incidents that take place over time.

In NSW there are eight types of abuse, some of which are further divided into more specific categories:

1. Physical abuse

2. Neglect, incorporates;
 - a. Supervision
 - b. Shelter/environment
 - c. Food
 - d. Hygiene/clothing
 - e. Medical care
 - f. Mental health care
 - g. Education – not enrolled / habitual absence
3. Sexual abuse, incorporates;
 - a. Abuse of a child
 - b. Abuse of a young person
 - c. Problematic sexual behaviour toward others
4. Psychological harm
5. Danger to self or others
6. Relinquishing care
7. Carer concern, incorporates:
 - a. Substance abuse
 - b. Mental health
 - c. Domestic violence
8. Unborn child

DEFINITIONS

Maltreatment refers to non-accidental behaviour towards another person, which is outside the norms of conduct and entails a substantial risk of causing physical or emotional harm. Behaviours may be intentional or unintentional and include acts of omission and commission. Specifically abuse refers to acts of commission and neglect acts of omission. Note that in practice the terms child abuse and child neglect are used more frequently than the term child maltreatment

Risk of Significant Harm (ROSH) refers to circumstances causing concern for the safety, welfare and wellbeing a child or young person present to a significant extent. This means it is sufficiently serious to warrant a response by a statutory authority irrespective of the family's consent.

What is significant is not minor or trivial, and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child's or young person's safety, welfare, or wellbeing.

In the case of an unborn child, what is significant is not minor or trivial and may reasonably be expected to produce a substantial and demonstrably adverse impact on the child.

Reasonable grounds refer to the need to have an objective basis for suspecting that a child may be at risk of abuse and neglect based on:

- First hand observation of the child or family
- What the child, parent or other person has disclosed
- What can reasonably be indirect based on observation, professional training and/ or experience

Mandatory Reporting is the legislative requirement for selected classes of people to report suspected child abuse and neglect to government authorities. **Mandatory reporting laws are not the same across all jurisdictions.**

In NSW, mandatory reporting is regulated by the Children and Young Persons (Care and Protection) Act 1998 (The Care Act).

MANDATORY REPORTERS

Legislation across all jurisdictions, describes a list of particular occupations that are mandated to report suspected child abuse and neglect to the relevant government authorities. Each jurisdiction may include different groups of people who are mandated to report and differences in the types of abuse to be reported. Please check with your state or territory jurisdiction.

Mandatory reporters are people who deliver the following services, wholly or partly, to children as part of their paid or professional work:

- Health care (e.g. registered medical practitioners, specialists, general practice nurses, midwives, occupational therapists, speech therapists, psychologists, dentists and other allied health professionals working in sole practice or in public or private health practices)
- Welfare (e.g. social workers, caseworkers and youth workers)
- Education (e.g. teachers, counsellors, principals)
- Children's services (e.g. child care workers, out of school hours services, family day carers and home-based carers)
- Residential services (e.g. refuge workers)
- Law enforcement (e.g. police)

- Registered psychologists providing a professional service as a psychologist
- A person in religious ministry or a person providing religious-based activities to children

All staff have a responsibility to recognise and respond to concerns for safety, welfare and the wellbeing of children and young people, and to report these concerns to management. According to the *Children and Young Persons (Care and Protection) Act 1998* mandated reporters (including people employed in children's services and unpaid managers of these services) must make reports if they suspect on reasonable grounds a child is at risk of significant harm because:

- the child's basic physical or psychological needs are not being met or are at risk of not being met
- the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child to receive necessary medical care
- the parents or other caregivers have not arranged and are unable or unwilling to arrange for a school age child to receive an education
- the child has been, or is at risk of being physically or sexually abused or ill-treated
- the child is living in a household where there have been incidents of domestic violence and they are at risk of serious physical or psychological harm
- the parent's or other caregiver's behaviour means the child has suffered or is at risk of suffering serious psychological harm.

Source: Children and Young Persons (Care and Protection Act) NO 157 Chapter 3 > Part 2 > Section 23

CHILD STORY REPORTER

Mandatory reporters in **NSW** should use the Mandatory Reporter Guide (MRG) if they have concerns that a child or young person is at risk of being neglected or physically, sexually or emotionally abused. The MRG assists in providing mandatory reporters with the most appropriate reporting decision. It is not designed to determine whether the matter constitutes risk of significant harm (ROSH). This is done at the Child Protection Helpline through the Screening and Response Priority (SCRPT) tool.

The MRG supports mandatory reporters to:

- Determine whether a report to the Child Protection Helpline is needed for concerns about possible abuse or neglect of a child (including unborn) or young person
- Identify alternative ways to support vulnerable children, young people and their families where a mandatory reporter's response is better served outside the statutory child protection system

It is recommended that mandatory reporters complete the MRG on each occasion they have risk

concerns, regardless of their level of experience or expertise. Each circumstance is different, and every child and young person is unique.

Helpline caseworkers will make determinations on reports received from mandatory reporters using SCRPT in conjunction with additional information, which may not be available to mandatory reporters. Mandatory reporters can call the NSW Child Protection Helpline on 132 111 (24 hours a day, 7 days a week).

For more information on Child Story Reporter, refer to: <https://reporter.childstory.nsw.gov.au/s/>

NOTE: The reporter is not required to prove that abuse has occurred.

INDICATORS OF ABUSE

There are common physical and behavioural signs that may indicate abuse or neglect. The presence of one of these signs does not necessarily mean abuse or neglect. Behavioural or physical signs, which assist in recognising harm to children, are known as indicators. The following is a guide only. One indicator on its own may not imply abuse or neglect. However, a single indicator can be as important as the presence of several indicators. Each indicator needs to be deliberated in the perspective of other indicators and the child's circumstances. A child's behaviour is likely to be affected if he/she is under stress. There can be many causes of stress and it is important to find out specifically what is causing the stress. Abuse and neglect can be single incidents or ongoing and may be intentional or unintentional.

General indicators of abuse and neglect may include:

- Marked delay between injury and seeking medical assistance
- History of injury
- The child gives some indication that the injury did not occur as stated
- The child tells you someone has hurt him/her
- The child tells you about someone he/she knows who has been hurt
- Someone (relative, friend, acquaintance, and sibling) tells you that the child may have been abused.

NEGLECT

Child neglect is the continuous failure by a parent or caregiver to provide a child with the basic requirements needed for their growth and development, such as food, clothing, shelter, medical and dental care and adequate supervision. Some examples are:

- Inability to respond emotionally to the child
- Child abandonment
- Depriving or withholding physical contact
- Failure to provide psychological nurturing
- Treating one child differently to the others

Indicators of Neglect in children:

- Poor standard of hygiene leading to social isolation
- Scavenging or stealing food
- Extreme longing for adult affection
- Lacking a sense of genuine interaction with others
- Acute separation anxiety
- Self-comforting behaviours, e.g. rocking, sucking
- Delay in development milestones
- Untreated physical problems

PHYSICAL ABUSE

Physical abuse is when a child has suffered, or is at risk of suffering, non-accidental trauma or injury, caused by a parent, caregiver or other person. Educators will be particularly aware of looking for possible physical abuse if parents or caregivers:

- Make direct admissions from parents about fear of hurting their children
- Have a family history of violence
- Have a history of their own maltreatment as a child
- Make repeated visits for medical assistance

Indicators of Physical Abuse:

- Facial, head and neck bruising
- Lacerations and welts
- Explanations are not consistent with injury
- Bruising or marks that may show the shape of an object
- Bite marks or scratches
- Multiple injuries or bruises

- Ingestion of poisonous substances, alcohol or drugs
- Sprains, twists, dislocations
- Bone fractures
- Burns and scalds

PSYCHOLOGICAL ABUSE

Psychological harm occurs where the behaviour of the parent or caregiver damages the confidence and self-esteem of the child, resulting in serious emotional deficiency or trauma. In general, it is the frequency and duration of this behaviour that causes harm. Some examples are:

- Constant or excessive criticism, condescending, teasing of a child or ignoring or withholding admiration and affection
- Excessive or unreasonable demands
- Persistent hostility, severe verbal abuse, and rejection
- Belief that a specific child is bad or 'evil'
- Using inappropriate physical or social isolation as punishment
- Exposure to domestic violence
- Intimidating or threatening behaviour.

Indicators of psychological abuse

- Feeling of worthlessness about them
- Inability to value others
- Lack of trust in people and expectations
- Lack of 'people skills' necessary for daily functioning
- Extreme attention seeking behaviours
- Extremely eager to please or obey adults
- May take extreme risks, is markedly disruptive, bullying, or aggressive
- Other behavioural disorders (disruptiveness, aggressiveness, bullying)
- Suicide threats (in young people)
- Running away from home.

SEXUAL ABUSE

Sexual abuse is when someone involves a child in a sexual activity by using their authority over them or takes advantage of their trust. Children are often bribed or threatened physically and psychologically to make them participate in the activity. Sexual abuse includes:

- Exposing the child to the sexual behaviours of others
- Coercing the child to engage in sexual behaviour with other children or adults
- Verbal threats of sexual abuse
- Exposing the child to pornography

Indicators of Sexual Abuse

- The child describes sexual acts
- Direct or indirect disclosures
- Age inappropriate behaviour and/or persistent sexual behaviour
- Self-destructive behaviour
- Regression in developmental achievements
- Child being in contact with a suspected or known perpetrator of sexual assault
- Bleeding from the vagina or anus
- Injuries such as tears to the genitalia

DOMESTIC VIOLENCE

Domestic violence, or intimate partner violence, is a violation of human rights. It involves violent, abusive or intimidating behaviour carried out by an adult against a partner or former partner to control and dominate that person.

Domestic violence causes fear, physical, and/or psychological harm. It is most often violent, abusive, or intimidating behaviour by a man against a woman, but can also be these behaviours by a woman against a man. Living with domestic violence has a profound effect upon children and young people and therefore constitutes a form of child abuse. (*The NSW Domestic and Family Violence Action Plan, June 2010*).

Indicators of Domestic Violence

A child may:

- Demonstrate aggressive behaviour
- Develop phobias & insomnia
- Experience anxiety
- Show signs of depression
- Have diminished self esteem

- Demonstrate poor academic performance and problem-solving skills
- Have reduced social skills including low levels of empathy
- Show emotional distress
- Have physical complaints

NOTE THAT ONLY THE FREQUENTLY REQUIRED CATEGORIES HAVE BEEN INCLUDED HERE. FOR FURTHER INFORMATION ON INDICATORS PLEASE REFER TO THE *RESOURCES FOR INDICATORS OF ABUSE AND NEGLECT* SECTION OF THIS POLICY.

IMPLEMENTATION

Our OSHC Service strongly opposes any type of abuse against a child and endorses high quality practices in relation to protecting children. Educators have an important role to support children and young people and to identify concerns that may jeopardise their safety, welfare, or wellbeing. To ensure best practice, all educators will attend approved Child Protection training certified by a registered training organisation. Educators will continue to maintain current knowledge of child protection and Mandatory Reporter requirements by completing Child Protection Awareness Training **annually**.

MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- the Service and any responsible person in day-to-day charge of the Service has successfully completed a course in child protection approved by the Regulatory Authority
- all educators', staff, and volunteers' Working with Children Checks are validated unless the person meets the criteria for exemption from a WWCC. See exemption factsheet at <http://www.kidsguardian.nsw.gov.au/child-safe-organisations/working-with-children-check/apply>
- all employees and volunteers are:
 - provided with a copy of the current Child Protection policy as part of the induction process at the Service
 - aware of their mandatory reporting obligations and responsibilities to immediately report cases where they believe a child is at risk of significant harm to their immediate supervisor or to the NSW Child Protection Helpline **on 132 111**
 - aware of indicators showing a child may be at risk of harm or significant risk of harm.
- training and development in child protection is provided for all educators, staff and volunteers
- educators are provided with a reporting procedure and professional standards to safeguard children and protect the integrity of educators, staff and volunteers

- access is provided to all staff regarding relevant legislations, regulations, standards and other resources to help educators, staff, and volunteers meet their obligations
- records of abuse or suspected abuse are kept in line with our *Privacy and Confidentiality Policy*.
- the Office of the Children’s Guardian is notified within 7 business days of becoming aware of any allegations and/or convictions of abuse or neglect of a child made against an employee or volunteer and ensure they are investigated, and appropriate action taken. [7-day notification form](#)
- to notify the regulatory authority through the NQA-ITS (within 7 days) of any incident where it is reasonably believed that physical and/or sexual abuse of a child has occurred or is occurring while the child is being educated and cared for by the Service
- to notify the regulatory authority through the NQA-ITS (within 7 days) of any allegation that sexual or physical abuse of a child has occurred or is occurring while the child is being educated and cared for by the Service.

EDUCATORS WILL:

- contact the police on 000 if there is an immediate danger to a child and intervene if it is safe to do so.
- be able to recognise indicators of abuse
- respect what a child discloses, taking it seriously and following up on their concerns through the appropriate channels.
- allow children to be part of decision-making processes where appropriate.
- comprehend their obligations as mandatory reporters and their requirement to report any situation where they believe, on reasonable grounds, that a child is at risk of significant harm to the Child Protection Helpline on **132 111** (available 24 hours/7 days a week).
- have completed online training to understand the child protection reporting process and use of the Mandatory Reporter Guide (MRG) <https://reporter.childstory.nsw.gov.au/s/mrg>
- refer families to appropriate agencies where concerns of harm do not meet the threshold of significant harm. These services may be located through CWU (Child Wellbeing Units) or/and FRS (Family Referral Services) at <http://www.keepthemsafe.nsw.gov.au> Family consent will be sought before making referrals.
- promote the welfare, safety, and wellbeing of children at the Service
- prepare accurate records recording exactly what happened, conversations that took place and what was observed to pass on to the relevant authorities to assist with any investigation

- understand that allegations of abuse or suspected abuse against them are treated in the same way as allegations of abuse against other people
- NOT investigate suspicion of abuse or neglect but collect only enough information to substantiate concerns and pass on to the Child Protection Helpline or appropriate authority.

DOCUMENTING A SUSPICION OF HARM

If educators have concerns about the safety of a child they will:

- record their concerns in a non-judgmental and accurate manner as soon as possible
- record their own observations as well as precise details of any discussion with a parent (who may for example explain a noticeable mark on a child)
- not endeavour to conduct their own investigation
- document as soon as possible so the details are accurate including:
 - child's personal details (name, address, DOB, details of siblings)
 - time, date and place of the suspicion
 - full details of the suspected abuse
 - date of report and signature

DOCUMENTING A DISCLOSURE

A disclosure of harm emerges when someone, including a child, tells you about harm that has happened or is likely to happen. When a child discloses that he or she has been abused, it is an opportunity for an adult to provide immediate support and comfort and to assist in protecting the child from the abuse. It is also a chance to help the child connect to professional services that can keep them safe, provide support and facilitate their recovery from trauma. Disclosure is about seeking support and your response can have a great impact on the child or young person's ability to seek further help and recover from the trauma.

When receiving a disclosure of harm, the Service will:

- remain calm and find a private place to talk
- not promise to keep a secret
- tell the child/person they have done the right thing in revealing the information but that they'll need to tell someone who can help keep the child safe
- only ask enough questions to confirm the need to report the matter because probing questions could cause distress, confusion and interfere with any later enquiries
- not attempt to conduct their own investigation or mediate an outcome between the parties involved.

- document as soon as possible so the details are accurately captured including:
 - time, date and place of the disclosure
 - 'word for word' what happened and what was said, including anything they said and any actions that have been taken
 - date of report and signature.

In addition, an educator receiving a disclosure from a child will:

- give the child or young person their full attention
- maintain a calm appearance
- reassure the child or young person it is right to tell
- accept the child or young person will disclose only what is comfortable and recognise the bravery/strength of the child for talking about something that is difficult
- let the child or young person take his or her time
- let the child or young person use his or her own words
- don't make promises that can't be kept. For example, never promise that you will not tell anyone else
- honestly tell the child or young person what you plan to do next
- do not confront the perpetrator.

CONFIDENTIALITY

It is important that any notification remains confidential, as it is vitally important to remember that no confirmation of any allegation can be made until the matter is investigated. The individual who makes the notification should not inform the suspected perpetrator (if known). This ensures the matter can be investigated without contamination of evidence or pre-rehearsed statements. It also minimises the risk of retaliation on the child for disclosing.

PROTECTION FOR REPORTERS

All reporters are protected against retribution for making or proposing to make a report under amendments to the Children and Young Persons (Care and Protection) Act 1998 effective 1 March 2020. The identity of the reporter is protected by law from being disclosed, except in certain exceptional circumstances. Provided the report is made in good faith:

- The report will not breach standards of professional conduct
- The report cannot lead to defamation and civil and criminal liability
- The report is not admissible in any proceedings as evidence against the person who made the report
- A person cannot be compelled by a court to provide the report or disclose its contents

- The identity of the person making the report is protected.

A report is also an exempt document under the Freedom of Information Act 1989.

BREACH OF CHILD PROTECTION POLICY

All educators and staff working with children have a duty of care to support and protect children. A duty of care is breached if a person:

- does something that a reasonable person in that person's position would not do in a particular situation
- fails to do something that a reasonable person in that person's position would do in the circumstances
- acts or fails to act in a way that causes harm to someone the person owes a duty of care.

MANAGING A BREACH IN CHILD PROTECTION POLICY

Management will investigate the breaches in a fair, unbiased and supportive manner by:

- discussing the breach with all people concerned and advising all parties of the process
- giving the educator/staff member the opportunity to provide their version of events
- documenting the details of the breach, including the versions of all parties
- recording the outcome clearly and without bias
- ensuring the matters in relation to the breach are kept confidential
- reach a decision based on discussion and consideration of all evidence.

OUTCOME OF A BREACH IN CHILD PROTECTION POLICY

Depending on the nature of the breach outcomes may include:

- emphasising the relevant element of the child protection policy and procedure
- providing closer supervision
- further education and training
- providing mediation between those involved in the incident (where appropriate)
- disciplinary procedures if required
- reviewing current policies and procedures and developing new policies and procedures if necessary.

REPORTABLE CONDUCT SCHEME- ALLEGATIONS AGAINST EDUCATORS AND OTHER EMPLOYEES, VOLUNTEERS or STUDENTS (or contractors)

The Approved Provider has the legislative obligation under the *Reportable Conduct Scheme* to notify the Office of the Children’s Guardian (OCG) of reportable allegations and convictions against their employees (including volunteers and contractors), investigate the allegation and advise the Office of the outcome. In addition, the Approved Provider must take appropriate action to prevent reportable conduct by employees.

The *Children’s Guardian Act 2019*, effective 1 March 2020, defines the head of an organisation as a ‘**relevant entity**’. An approved education and care service is listed at Schedule 1 of the Act as an ‘entity’.

All staff members have an obligation to report relevant allegations of a child protection nature as part of the Reportable Conduct Scheme to the Approved Provide or OCG. This reportable conduct may have occurred either within work hours or outside work hours. A child is anyone under the age of 18 at the time of the alleged conduct occurred.

The Approved Provider must notify the Children’s Guardian within seven (7) business days and conduct an investigation into the allegations. [7-day notification form](#) Reportable Conduct Directorate: (02) 8219 3800. [\(Monday – Friday\)](#)

A final report of the investigation must be ready to submit within 30 calendar days or provide information about the progress of the investigation to the Children’s Guardian. [30 Day interim report form](#)

The Approved Provider must send a report to the Office of the Children’s Guardian that enables the Office of the Children’s Guardian to determine whether the investigation was completed satisfactorily and whether appropriate action was or can be taken.

The Approved Provider must ensure an appropriate level of confidentiality of information relating to the reportable allegations as per the Act or other legislation. The heads of relevant entities have obligations under section 57 of the Act to disclose ‘relevant information’ to the following persons unless they are satisfied that the disclosure is not in the public interest:

- a child to whom the information relates
- a parent of the child
- if the child is in out-of-home care- an authorised carer that provides out-of-home care to the child.

See: <https://www.kidsguardian.nsw.gov.au/child-safe-organisations/reportable-conduct-scheme/factsheets> for further information.

The Children’s Guardian will monitor the entity’s response and may conduct their own investigation.

The Children’s Guardian Act 2019 defines reportable conduct as:

- a sexual offence has been committed against, with or in the presence of a child
- sexual misconduct with, towards or in the presence of a child
- ill-treatment of a child
- neglect of a child
- an assault against a child
- behaviour that cause significant emotional or psychological harm to the child

see: <https://www.kidsguardian.nsw.gov.au/child-safe-organisations/training-and-resources/webinars-and-face-to-face-training> for further information and training

EDUCATING CHILDREN ABOUT PROTECTIVE BEHAVIOUR

Our program will educate children

- about acceptable and unacceptable behaviour, and what is appropriate and inappropriate contact at an age appropriate level and understanding
- about their right to feel safe at all times
- to say ‘no’ to anything that makes them feel unsafe or uncomfortable
- about how to use their own knowledge and understanding to feel safe
- to identify feelings that they do not feel safe
- the difference between ‘good’ and ‘bad’ secrets
- that there is no secret or story that cannot be shared with someone they trust
- that educators are available for them if they have any concerns
- to tell educators of any suspicious activities or people
- to recognise and express their feelings verbally and non-verbally
- that they can choose to change the way they are feeling.

State-specific information (excluding NSW) are available on the following pages. Delete areas not required for your state/territory.

QUEENSLAND SPECIFICATIONS

In Queensland under the Child Protection Act 1999 (Qld) there are four different types of child abuse:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect

Child abuse can be a single incident or can be a number of different incidents that take place over time. Under the Act, it does not matter how much the child is harmed but whether a child:

- Has suffered harm, is suffering harm, or is at risk of suffering harm
- Does not have a parent able or willing to protect them from harm.

Mandatory Reporting requirements are outlined in the Child Protection Act 1999. Mandatory Reporters include:

- Teachers
- Doctors
- Registered Nurses
- Police officers
- Early childhood education and care professionals (including teacher aides employed in approved early childhood education and care programs)
- A person performing advocate function under the Public Guardian Act 2014

Early childhood education and care (ECEC) professionals are mandated by law to report child safety concerns to the Department of Child Safety, Youth and Women or Queensland Police Service (QPS) where there is a reasonable suspicion that the 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 willing and able to protect the child from harm.

ECEC professionals include staff from family day care, kindergarten, limited-hours care, long day care and after-school hours care. Individuals who are volunteers or under 18 years of age are not mandatory reporters.

ECEC professionals are not approved bodies and cannot refer families to Family and Child Connect or an intensive family support service without their consent. If concerns about a family do not meet the

legislative threshold for reporting to the department, ECEC professionals are encouraged to refer families to support services, with their consent.

Working with Children Check- Queensland Blue Card system

Paid employees who work with children and young people must hold a blue card to comply with Working with Children (Risk Management and Screening) Act 2000 and the Education and Care Services Act 2013. <https://www.bluecard.qld.gov.au/index.html>

REPORTING AUTHORITY	CONTACT DETAILS
Department of Child Safety, Youth and Women 07 3235 9999 Queensland Police Services (QPS) 131 444	To locate the nearest Child Safety Service Centre Ph. 1800 811 810 Child Protection Guide

ACT SPECIFICATIONS

[Guide to reporting child abuse and neglect in the ACT](#) identifies a range of indicators of sexual abuse. Mandatory Reporting requirements are outlined in the Children and Young People Act 2008 (ACT). From September 1 2019, new child sexual abuse reporting laws make it an offence for anyone in Canberra over the age of 18 who reasonably believes a sexual offence has been committed against a child must make a report to the police **131 444**

Mandatory reporters include:

- Minister of religion
- Doctor
- Dentist
- Nurse
- Enrolled Nurse
- Midwife
- Teacher at school (inclusive of teachers’ aides and assistants in paid employment)
- A person authorised to inspect education programs, materials or other records used for home education of a child or young person under the Education Act 2004
- Police Officers
- A person employed to counsel children or young people at school
- A person caring for a child at a child care centre (including assistances and aides in paid employment at the service)

- A person coordinating or monitoring home-based care for a family day care scheme proprietor
- A public servant who, in the course of employment as a public servant, works with or provides services personally to, children and young people or families
- Public advocates
- Official visitor
- A person who in the course of the person's employment has contact with or provides services to children, young people and their families and is prescribed by regulation

Mandatory reporting is a legal requirement under the Act. Mandated reporters must make a Child Concern Report to CYPS if through the course of your work, you believe on reasonable grounds a child is experiencing:

- Sexual abuse
- Experiencing or has experienced non-accidental physical injury (physical abuse)
- Emotional abuse (including exposure to family violence)
- Neglect

Failing to report as soon as practicable after forming a belief of child abuse is an offence under the Act. Out of School Hours educators may form beliefs on reasonable grounds that someone has already made a report if:

- A report was made about the same child or young person in relation to the same abuse or neglect with the same reasons given for their belief as you have for your belief
- Someone tells you
- You read a file note
- You sight the reporting documentation

Mandatory Reporters are not required to prove the abuse has occurred

Reportable Conduct Scheme

Organisations must report allegations or convictions concerning child abuse and child related misconduct by an employee to the ACT Ombudsman within 30 days after the organisation becoming aware of the conduct. (<http://www.ombudsman.act.gov.au/reportable-conduct-scheme>)

Designated entities include: childcare services and education and care service providers, including Out of School Hours Care.

All employees under contract of employment with a designated entity are included in the scheme, including employees who do not work directly with children.

Working with Vulnerable People

The Working with Vulnerable People (Background checking) Act 2011 requires those who work or volunteer with vulnerable people to have a background check and be registered. All staff and educators within an early childhood education and care service must undergo a background check and become registered before they are permitted to work with children.

https://www.accesscanberra.act.gov.au/app/answers/detail/a_id/1804

REPORTING AUTHORITY	CONTACT DETAILS
<p>Child and Youth Protection Services (CYPS) https://www.communityservices.act.gov.au/ocyfs/children/child-and-youth-protection-services</p>	<p>Mandated Reporters Ph. 1300 556 728 childprotection@act.gov.au cyf@act.gov.au Onelink 1800 176 468</p>

NORTHERN TERRITORY SPECIFICATIONS	
<p>In the Northern Territory under the Care and Protection of Children Act 2007 (NT) a child is a person under 18 years of age. Child abuse refers to significant harm or injury to a child that is not caused by an accident. Harm can be one or more of the following:</p> <ul style="list-style-type: none"> - Physical harm - Sexual harm - Emotional harm - Neglect - Exposing a child to violence <p>The Department of Health and Families is responsible for overseeing and upholding child protection in the Northern Territory. The acts that help govern and guide the process of child protection in the Northern Territory include:</p> <ul style="list-style-type: none"> • Child Protection (Offender Registration and Reporting) Act 2016 • Care and Protection of Children Act 2007 <p>Mandatory Reporting requirements are outlined in the Care and Protection of Children Act 2007 which impose a legal responsibility on EVERY PERSON in the Northern Territory to report child abuse and neglect and cases where children have been or are likely to be a victim of sexual offence.</p> <p>A person should report your concerns if you believe on reasonable grounds a child has been harmed or is likely to be harmed.</p> <p>Persons reporting are safeguarded under the law from legal or professional liability, if the report has been made in good faith.</p> <p>Working with children clearance- OCHRE Card</p> <p>All people working or volunteering in early childhood education and care services must hold a working with children clearance, also called an Ochre Card.</p>	
REPORTING AUTHORITY	CONTACT DETAILS

Territory Families	Child Protection Hotline Ph. 1800 700 250 (24hours) Crime Stoppers 1800 333 000
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SOUTH AUSTRALIA SPECIFICATIONS

In South Australia, under the Children’s Protection Act 1993 (SA) child abuse may be:

- Physical
- Sexual
- Emotional
- neglectful

All education and child development staff are considered mandated notifiers under the Children’s Protection Act 1993.

There is a legal obligation for mandated notifiers to notify the Department for Child Protection of all suspected cases of child abuse and neglect within their professional context. Staff also have an ethical responsibility to report experiences outside of their professional context.

Education staff who are considered mandated notifiers include:

- Teachers employed in a school, pre-school or kindergarten
- Family day care educators
- Out of School Hour care educators and staff
- Volunteers working in education or childcare
- Ancillary staff
- Medical Practitioner
- Pharmacists
- Police Officers
- Community Correction Officers
- Social Workers
- Minister of religion
- A person who is an employee of, or volunteer in an organisation formed for religious or spiritual purposes
- Volunteers working in education or childcare
- Managers responsible for the above staff

Mandated reporters must report abuse when they have a suspicion on reasonable grounds. Proof that the abuse actually occurred is not required. Notifiers may have suspicion on reasonable grounds if:

- the child tells you they have been abused
- observations of a child’s behaviour or knowledge of the child leads you to suspect that abuse is occurring
- a child tells you that he/she knows someone who has been abused
- Someone reliable such as relative, friend, neighbour or sibling tells you of the abuse to a child.

Failure to report suspicion of child abuse or neglect can result in being penalised as outlined in section 11 of the Children’s Protection Act 193.

<https://www.childprotection.sa.gov.au/reporting-child-abuse/mandated-notifiers-and-their-role>

Working with children check (WWCC)

All people who work in a ‘prescribed position’ working with children, need a working with children check. Registered teachers who have a current, valid DHS/DCSI child related employment screening, can still use this until it expires. A valid working with children check must be obtained before teacher registration can be renewed. Applications can be made through Department of Human Services. WWCC are valid for 5 years.

REPORTING AUTHORITY	CONTACT DETAILS
Department for Child Protection	Child Abuse Report Line (CARL): Ph. 13 14 78 Online reporting system (only to be used to report less serious concerns) www.reportchildabuse.families.sa.gov.au After hours crisis Ph. 13 16 11

TASMANIA SPECIFICATIONS

In Tasmania, under the Children, Young Persons and their Families Act 1997 (Tas.) a child is a person under 18 years of age. Child abuse is generally recognized as falling into four categories:

- sexual abuse
- physical abuse
- emotional abuse
- neglect

Every adult who knows, or believes or suspects on reasonable grounds, that a child is suffering, has suffered or is likely to suffer abuse or neglect has a responsibility to take steps to prevent the occurrence or further occurrence of the abuse or neglect.

Prescribed persons (who are often called ‘mandatory reporters’) have a special duty to inform the Child Safety Service if they believe, suspect or know that a child has been or is being abused or neglected.

According to the Children, Young Persons and Their Families Act 1997 mandatory reporters include:

- registered medical practitioners
- registered and enrolled nurses
- a person who is registered as a dentist, dental therapist or dental hygienist
- registered psychologists
- police officers
- probation officers
- principals and teachers in any educational institution (including a kindergarten)
- a person who provides child care, or a child care service, for fee or reward
- a person concerned in the management of a licensed child care service
- any other person who is employed or engaged as an employee for, of or in, or who is a volunteer in –
 - a Government Agency that provides health, welfare, education, child care or residential services wholly or partly for children,
 - an organisation that receives any funding from the Crown for the provision of such services, and
 - Any other person of a class determined by the Minister by notice in the Gazette to be prescribed persons.

Section 14 of the Act provides that if a mandatory reporter –

“in carrying out official duties or in the course of his or her work (whether paid or voluntary), believes, or suspects, on reasonable grounds, or knows –

(a) that a child has been or is being abused or neglected or is an affected child within the meaning of the Family Violence Act 2004 (which defines “an affected child” as “a child whose safety, psychological wellbeing or interests are affected or likely to be affected by family violence”), or

(b) that there is a reasonable likelihood of a child being killed or abused or neglected by a person with whom the child resides; or

(c) while a woman is pregnant, that there is a likelihood that after the birth of the child –

i. the child will suffer abuse or neglect, or may be killed by a person with whom the child is likely to reside; or

ii. the child will require medical treatment or other intervention as a result of the behaviour of the woman, or another person with whom the woman resides or is likely to reside, before the birth of the child

If a mandatory reporter fails to inform Child Safety Service of a reasonable belief, suspicion or knowledge of a child suffering abuse or is at risk of abuse, they may be charged with an offence under the Act. Educators may not be guilty of an offence where they honestly and reasonably believed that the Secretary or a Community-Based Intake Service had been informed of the reasonable grounds on which your suspicion or knowledge was based by another person.

[Working with vulnerable people check](#)

<p>Registration is required for all people who work or volunteer with children. This includes all administration staff, educators, volunteers within early education and care services, family day care, out of school hours care. https://www.cbos.tas.gov.au/topics/licensing-and-registration/registrations</p>	
REPORTING AUTHORITY	CONTACT DETAILS
<p>Department of Health and Human Services Ph. 1300 135 513</p>	<p>24 hour contact 1800 000 123 If a child is at immediate risk or medical assistance is required- dial 000</p>

VICTORIA SPECIFICATIONS
<p>In Victoria, under the Children, Youth and Families Act 2005 (Vic.) types of child abuse include:</p> <ul style="list-style-type: none"> - Physical abuse - Sexual abuse - Emotional abuse - Neglect - Medical neglect - Family violence - Human trafficking (including forced marriage) - Sexual exploitation (including pornography and prostitution) <p>The Children Youth and Families Act 2005 section 182 (1) and 184 states that where the following mandated reporters form the belief on reasonable grounds that a child has suffered, or is likely to suffer, significant harm as a result of physical injury or sexual abuse and the child’s parents have not protected, or are unlikely to protect, the child from harm of that type must make a report to Child Protection Services as soon as practicable. Mandatory reporters include:</p> <ul style="list-style-type: none"> • registered teachers and early childhood teachers • early childhood workers • registered medical practitioners • nursers • midwives • school principals • school counsellors • police officers • out of home care workers (excluding voluntary foster and kinship carers) • youth justice workers • registered psychologist • people in religious ministry

In addition, any person who believes on reasonable grounds that a child needs protection, can make a report the Department of Health and Human Services (DHHS). It is the Child Protection worker's job to assess and, where necessary, further investigate if a child or young person is at risk of harm ensuring a child safe environment is maintained.

All early childhood services and schools operating in Victoria are required to comply with the Child Safe Standards. The focus is to raise awareness and build capacity for organisations to create and maintain a child safe environment. The Child Safe Standards have been introduced to keep children safe from harm and abuse. The Standards are designed to drive cultural change in organisations, so that protecting children from abuse is embedded in the everyday thinking and practice of leaders, staff and volunteers.

This will assist organisations to:

- Promote the safety of children
- Prevent child abuse
- Ensure effective processes are in place to respond to and report allegations of child abuse.
- Create and maintain a child safe environment under the standards

Services working to embed or improve the culture of child safety in their organisation should ensure leaders, staff and volunteers know and understand the organisation's commitment to child safety and can raise and respond to allegations of abuse.

Services must have:

- a code of conduct which outlines clear expectations for how all staff and volunteers interact with children
- a policy or statement of commitment to child safety
- processes for responding to and reporting allegations of child abuse.

All Services should review recruitment, screening and induction processes to ensure staff and volunteers are aware of relevant policies and are trained to minimise the risk of child abuse. Simple and accessible processes will assist Services to promote the participation and empowerment of all children, especially Aboriginal children, children from culturally and or linguistically diverse backgrounds and children with a disability. All staff and volunteers need to have an awareness of children's rights and adults' responsibilities regarding child abuse.

To create and maintain a child safe environment, Services must implement 7 standards.

Standard 1: Strategies to embed a culture of child safety through effective leadership arrangements

Standard 2: A Child safe policy or statement of commitment to child safety highlighting the services' zero tolerance of child abuse.

Standards 3: A code of conduct that establishes clear expectations for appropriate behaviour with children

- Standard 4: Screening, supervision, training and other human resources practices that reduce the risk of child abuse by new and existing staff
- Standard 5: Processes for responding to and reporting suspected child abuse
- Standard 6: Strategies to identify and reduce or remove risks of child abuse
- Standard 7: Strategies to promote the participation and empowerment of children

In applying each standard, Services must reflect and embed the following 3 key principles

- [Cultural safety of Aboriginal children](#)
- [Cultural safety of children from culturally and linguistically diverse backgrounds](#)
- [Safety of children with disabilities](#)

Reportable conduct scheme

The Reportable Conduct Scheme seeks to improve organisations’ responses to allegations of child abuse and neglect by their workers and volunteers. An allegation of ‘reportable conduct’ could include: sexual abuse; grooming; sexting; inappropriate physical contact or sexualised behaviour with a child. Approved education and care services and children’s services including Family Day Care and Out of School Hours Care services are identified organisations under this scheme.

Commission for Children and Young People (CCYP) <https://ccyp.vic.gov.au>

Working with children check Victoria

All adults engaged in paid or voluntary child-related work require a Working with Children Check. This includes: childcare services, family day care, occasional care and outside school hours care.

Teachers and volunteers currently registered as teachers with the Victorian Institute of Teaching (VIT), they are exempt from the Working with Children Check (unless they have been given a Negative Notice). If they have suspended or cancelled their registration, the exemption no longer applies.

REPORTING AUTHORITY	CONTACT DETAILS
Department of Health and Human Services North Division Intake- 1300 664 977 South Division Intake- 1300 655 795 East Division Intake- 1300 360 391 West Division Intake- 1300 664 977	Child Protection Crisis Line (urgent concerns) Ph. 13 12 78 National Child Abuse Helpline: Ph. 1800 99 10 99 (9am-5pm AEST)

WESTERN AUSTRALIA SPECIFICATIONS

In Western Australia, under the Children and Community Services Act 2004, a child is any person under the age of 18 years. There are generally five types of child abuse and neglect, which may co-exist:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Psychological abuse
- Child neglect

Mandatory reporting describes the legal obligation of certain professionals and community members to report incidences of child sexual abuse. Mandatory Reporter MUST report to Child Protection Services if they believe on reasonable grounds that a child is in need of protection. Penalties may apply to mandated reporters who fail to report suspected abuse.

It is a legal requirement in Western Australia for

- Doctors
- Nurses
- Midwives
- Teachers
- Police officers and
- Boarding supervisors to report all reasonable beliefs of child sexual abuse to the Department for Child Protection and Family Support.

On 1 January 2009, the legislation that governs mandatory reporting of child sexual abuse became part of the *Children and Community Services Act 2004*. The legislation requires mandatory reporters to report a belief of child sexual abuse, if they form this belief, based on reasonable grounds, in the course of their paid or unpaid work, to the Department for Child Protection and Family Support.

This legislation focuses on child sexual abuse. Other forms of abuse (physical, emotional and neglect) should continue to be reported, but there is no penalty if a report is not made.

Mandatory reporters must lodge a written report either using the online tool or PDF mandatory reporting template.

[Mandatory Reporting Information System](#)

[Mandatory Report- Sexual Abuse PDF](#)

[Working with Children Check](#)

A WWCC is required by a person if they engage in paid or unpaid work with children.

Child care services (means a child care service as defined in the Child Care Services Act 2007 s4 or an education and care service as defined in the Education and Care Services National Law (Western Australia) s 5 (1). This includes: managerial officers, family day care educators, educators, gardeners, cleaners, cooks whose employment is at the child care centre during centre hours and whose usual duties involve contact with children, students on placement over 18 years of age, self-employed dance or art instructors who attend the service.

<https://workingwithchildren.wa.gov.au/about/categories-of-child-related-work>

REPORTING AUTHORITY	CONTACT DETAILS
Department for Child Protection and Family Support Ph. 08 9222 2555 FAX: 9223 1190 Post: PO Box 8146 Perth BC WA 6849	Mandatory Reporters: Ph. 1800 708 704

RESOURCES FOR INDICATORS OF ABUSE AND NEGLECT

<https://www.childprotection.sa.gov.au/reporting-child-abuse/indicators-abuse-or-neglect>

<https://www.communities.qld.gov.au/disability/preventing-responding-abuse-neglect-exploitation/identifying-abuse-neglect-exploitation/indicators-signs>

<http://det.wa.edu.au/childprotection/detcms/inclusiveeducation/child-protection/public/recognising-abuse/indicators-of-abuse.en?cat-id=1337568>

<https://education.nsw.gov.au/student-wellbeing/child-protection/child-protection-policy-guidelines/resources>

https://www.dhhs.tas.gov.au/children/child_protection_services/information_sheets_and_resources

<https://www.vit.vic.edu.au/news/news/2017/the-child-safe-standards-and-mandatory-reporting>

NAPCAN- <https://www.napcan.org.au/napcan-brochures/>

CHILD SAFE ORGANISATIONS- <https://childsafefoundation.org.au>

[Child Protection Reporting: Overview of legislative amendments \(NSW\) 2020](#)

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Australian Institute of Family Studies. (2005). National comparison of child protection systems: <https://aifs.gov.au/cfca/publications/national-comparison-child-protection-systems>

Australian Government Australian Institute of Family Studies. (2018). Australian child protection legislation: <https://aifs.gov.au/cfca/publications/australian-child-protection-legislation>

Australian Government: Australian Institute of Family Studies. (2017). Mandatory reporting of child abuse and neglect: <https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect>

Belonging, Being and Becoming: The Early Years Learning Framework for Australia. (2009).

Child Protection (Working with Children) Act 2012

Children and Young Persons (Care and Protection) Act 1998

ChildStory Reporter: <https://reporter.childstory.nsw.gov.au/s/>

Early Childhood Australia Code of Ethics. (2016).

Government of Western Australia Department of Communities, Child Protection and Family Support. (2019). About mandatory reporting legislation <https://mandatoryreporting.dcp.wa.gov.au/Pages/Aboutmandatoryreportinglegislation.aspx>

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020).

My Time Our Place: Framework for School Age Care in Australia. (2011).

NSW Government Family & Community Services. (2019). Mandatory reporters: What to report and when: <https://www.facs.nsw.gov.au/families/Protecting-kids/mandatory-reporters/what-when-to-report/chapters/mandatory-reporter-guide>

NSW Government Legislation *Children’s Guardian Act 2019*: <https://legislation.nsw.gov.au/#/view/act/2019/25/full>

NSW Office of the Children’s Guardian: <https://www.kidsguardian.nsw.gov.au/>

Ombudsman Act 2001.

Revised National Quality Standard. (2018).

The Commission for Children and Young People Act 1998

Victoria State Government Education and Training: (2018). Obligations to protect children in early childhood services: <https://www.education.vic.gov.au/childhood/providers/regulation/Pages/protectionprotocol.aspx>

Victoria State Government Health and Human Services. Child safe standards: <https://providers.dhhs.vic.gov.au/child-safe-standards>

Victoria State Government Health and Human Services. Creating child safe organisations: <https://providers.dhhs.vic.gov.au/creating-child-safe-organisations>

REVIEW

POLICY REVIEWD: NOVEMBER 2020	NEXT POLICY REVIEW:2021
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CHILDREN'S BELONGINGS POLICY

We acknowledge that children may bring certain personal belongings with them to the Vacation Care Service each day, and as such, it is important to clarify responsibilities. This policy therefore outlines the types of belongings that children may bring with them on a regular basis and the level of associated responsibility.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships, which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

RELATED POLICIES

Enrolment Policy Orientation of New Families Policy	Respect for children
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PURPOSE

To ensure families and educators are aware of their responsibility regarding children's belonging including keeping them safe.

SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

IMPLEMENTATION

It can be distressing for children to misplace their toys from home whilst attending Vacation Care. At times toys from home can also cause conflict between children. Children often want to share or show other children or staff special items from home, but these treasures may be inadvertently broken or lost. To save the upset and heartache, parents are requested to encourage children to leave their toys at home, unless they are essential to a child's emotional wellbeing and/or sense of belonging (security items).

We have numerous stimulating, challenging and educational toys and resources catering to a range of children's interests that are available to play with each day.

NOMINATED SUPERVISORS, RESPONSIBLE PERSON, EDUCATORS AND STAFF WILL

- Allow children to bring personal belongings to share with others and understand that children may frequently have items in their bag. Items may include special items from gifts, holiday souvenirs, or items relating to a current interest.
- Facilitate opportunities for children to share their toys/news items with others to encourage:
 - social development
 - language skills
 - children to verbalise thoughts, fears, and feelings
 - broaden the cultural and social understandings of all children involved
 - and provide an opportunity for development of special interests for the group.
- remind families that if they allow children to bring items to the Vacation Care Service it is completely at the family's own risk
- re-iterate our policy, that if personal belongings are particularly valuable, fragile, or hold irreplaceable emotional value, it is recommended that the child bring in the item, show it to friends and educators, and then have the educator put them in a safe place. This allows for the child to share the excitement and experience without the risk of loss or damage.
- provide appropriate storage for lost property that will be available to children and families at all times

- manage any grievances or concerns related to lost, damaged, or stolen property of the children in accordance with the *Grievance and Complaints* policy and procedure
- request that if children wish to bring in DVD/Blu-ray, music, or electronic game, these should be discussed with management and be 'G-rated'. Although media rated 'PG' (Parental Guidance) is generally appropriate for children, it cannot be assumed that all parents want their children exposed to this rating.
- take as much care as possible in ensuring that personal belongings are returned to the correct family. To assist us with this we ask families to ensure that any item that can be labelled, either has the child's name on it, or the child's initials. If an item cannot be labelled, it is the parent's responsibility to advise an educator that their child has this item in their possession.
- We will encourage children who bring special belongings into care to place them in a special designated box to reduce the prospect of them becoming lost or broken. For added security this box will be placed in a position that requires the assistance of an educator to access.
- allow children to wear dress-up clothes to the service for specific 'mufti days' or special occasions.
- take as much care as possible in ensuring that children's clothing items are returned to their correct family. The labelling of all items can help us achieve this. However, the Service cannot take responsibility for damaged, lost or stolen items.
- actively encourage children to care for their belongings by:
 - reminding children appropriately when belongings need to be placed in storage. (For example, lunch box into bag.)
 - providing suitable storage to keep belongings safe-bag storage areas
 - negotiating a secure and safe position with families for any item or personal belonging that is either special, expensive, or at risk of being damaged but is nevertheless being left at the Vacation Care service.
- inform families through relevant newsletters and publications such as the Parent/Family handbook of appropriate personal belongings required at the Vacation Care service each day.

FAMILIES WILL:

- be responsible for providing the child with appropriate belongings and property required for active participation in all service activities and experiences. This property may include (but is not limited to):
- enclosed footwear and weather appropriate clothing (if not in school uniform).
- wide brim hat
- suitable school bag (backpack).
- appropriate food and lunch box for snacks (if required)

- ensure all personal property and belongings are clearly named or labelled.

COMFORT TOYS:

School age children rarely require a security/comfort item. However, if this is required (particularly by Kindergarten children) we recommend children bring something such as a favourite book, small soft toy etc.

We encourage families to communicate specific needs of their child directly with educators and staff.

SOURCE:

Australian Children’s Education & Care Quality Authority. (2014).

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. ~~(2017)~~ (2020).

Privacy Act 1988.

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: NOVEMBER 2020	NEXT POLICY REVIEW: 2021
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CHILD SAFE ENVIRONMENT

POLICY (excluding VIC)

The United Nations Convention on the Rights of the Child (UNCRC) outline that children and young people have a right to be safe and cared for, no matter where they are or who they are with. Children have the right to be protected from violence, abuse or neglect. When working with children and young people, it is important to understand children's rights and needs.

We are advocates for children and have a strong commitment to child safety and establishing and maintaining a child safe environment. Our Vacation Care Service embeds the National Principles for Child Safe Organisations and promotes a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children's sense of security and belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is respected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW	
82	Tobacco, drug and alcohol-free environment
84	Awareness of child protection law
102(A-D)	Transportation of children (risk assessments and authorisations)
103	Premises, furniture and equipment to be safe, clean and in good repair

104	Fencing
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
115	Facilities designed to facilitate supervision
136	First aid qualifications
155	Interactions with children
162	Health information to be kept in enrolment record
168 (h)	Providing a child safe environment
S162 (A)	Persons in day to day charge and nominated supervisors to have child protection training
S165	Offence to inadequately supervise children
S167	Offence relating to protection of children from harm and hazards

RELATED POLICIES

Arrival and Departure Policy Child Protection Policy Code of Conduct Policy Cyber Safety Excursion Policy Furniture and Equipment Safety Policy Governance Policy Health and Safety Policy Interactions with Children, Families and Staff Policy	Medical Conditions Policy Physical Environment Policy Safe Storage of Hazardous Chemicals Policy Safe Transportation of Children Policy Staffing Arrangements Policy Sun Safe Policy Supervision Policy Technology Policy Water Safety Policy Work, Health and Safety Policy
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PURPOSE

Our Vacation Care has a legal and ethical responsibility to provide a safe and friendly environment where all children are respected, valued and encouraged to reach their full potential. Children’s safety is paramount, and we aim to take all practical steps to protect children from harm, ensuring a healthy and safe environment. Our Vacation Care Service provides children and staff with an environment free from the use of tobacco, alcohol and illicit drugs.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

The National Law requires management to ensure all children being educated and cared for are adequately supervised and every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury. Our focus is to build a child safe environment which is reflected in our Service policies and procedures and understood and practiced by all educators and staff.

'Child safety is everyone's responsibility.' (A guide to the Child Safe Standards. p.26. 2020)

NATIONAL PRINCIPLES FOR CHILD SAFE ORGANISATIONS

Our Service is committed to being a child safe organisation and endorses the National Principles for Child Safe Organisations, placing the protection of children as a priority of our responsibilities and obligations. The Child Safe Standards recommended by the Royal Commission provide guidance for our Service to ensure our policies and procedures, strategies and attitudes, ensure children's safety is paramount.

Our Service has a zero tolerance to child abuse, and we are committed to the safety, participation and empowerment of all children. We promote diversity and tolerance and aim to form equitable and positive relationships with children. We ensure children participate in decisions affecting them and listen and respect their suggestions and ideas. We respond to any concerns, disclosures, allegations or suspicions of harm.

We are dedicated in promoting cultural safety for Aboriginal children, cultural safety for children from culturally and/or linguistically diverse backgrounds and to providing a safe environment for children with a disability.

RECRUITMENT

Our Vacation Care Service maintains a rigorous and consistent recruitment, screening and selection process to ensure the best staff possible based on skills, qualifications, experience and suitability for the position available. All staff are provided with a comprehensive induction process which outlines our Code of Conduct, identifying and responding to child abuse, grievance processes, and work health and safety.

WORKING WITH CHILDREN CHECK- POLICE CHECKS

Working in conjunction with the Child Protection Act and National Regulations, the safety, welfare and wellbeing of children is paramount within our Vacation Care Service and community. A Working with Children Check (WWCC) is a requirement for people who work in child-related work. It involves a national criminal history check and a review of findings of workplace misconduct.

Management is responsible for the periodic review and maintenance of up to date records of employees' Working with Children Check, including the Working with Children Check number and the date on which each clearance expires. Once an employee provides their WWCC clearance, management will verify the clearance to ensure that it is valid and current. The WWCC will be placed in the individual's file and continue to be updated as required.

[Primary policy - Staffing Arrangements]

CHILD PROTECTION- REPORTABLE CONDUCT SCHEME

Children and young people always have a right to be safe and protected. To comply with legislation and ensure a child safe environment, educators are provided with training and ongoing supervision to ensure they understand that *child safety is everyone's responsibility*.

Nominated Supervisors, Responsible persons, Coordinators, educators and other staff are mandatory reporters and must make reports if they suspect on reasonable grounds, a child is at risk of significant harm. All staff are provided with up to date training about child protection law and their obligations under this law and to ensure they are confident in following the reporting guidelines within NSW and adhere to our *Child Protection Policy*.

Through continual education and training, educators and staff are equipped with the knowledge, skills and awareness to keep children safe. Training gives educators and staff confidence to identify, respond and report child abuse.

Coordinators or responsible persons in day-to-day charge must complete a course in child protection approved by the Regulatory Authority on an annual basis. All staff must refresh their knowledge about mandatory reporting each year.

[Primary policy – Child Protection]

Child protection- Allegations Against Employees

To protect children and ensure their safety, welfare and wellbeing, management is responsive to report allegations or convictions of child abuse and child related misconduct by any staff member or volunteer

or contractor to the Office of the Children’s Guardian (OCG) as part of the *Reportable Conduct Scheme* or reporting authority within NSW.

Our Vacation Care Service will ensure an appropriate level of confidentiality of information relating to the reportable allegations as per the Children’s Guardian Act 2019. We take our legislative responsibilities as part of the Reportable Conduct Scheme seriously and will respond to any reportable allegation or conviction against employees or volunteers that may arise.

PHYSICAL ENVIRONMENT- SAFETY CHECKLISTS

Children’s safety is embedded in our day-to-day practices. We ensure effective and adequate supervision is provided to children at all times. Through conducting risk assessments, we assess and manage risks in the physical environment collaborating with children to develop behaviour guidelines for play including adventurous play to ensure their safety. Educators have a sound understanding of their duty of care and responsibilities in ensuring a child safe environment.

Regular safety checks maintain basic standards of safety within our Vacation Care Service venues. We believe that child safety is a shared responsibility at all levels within our Vacation Care Service. Children are encouraged to speak up about their safety and the safety of their friends by telling an educator if they feel unsafe in a particular situation or environment.

Educators will complete an indoor and outdoor safety checklist to assist and record inspections of the physical environment where foreseeable risks may be evident and cause harm or injury to a child. Any findings that require attention will be either dealt with immediately or submitted into the maintenance book depending on priority. The Approved Provider and Nominated Supervisors must be notified of any areas that need immediate attention within the Service venue.

[Primary policies – Code of Conduct, Supervision, Health and Safety]

STORAGE OF HAZARDOUS SUBSTANCES

We reduce the risk of harm to children and educators by using eco-friendly products. Our Service will endeavour to provide a safe environment where necessary chemical and hazardous equipment are safely stored away from children and handled appropriately.

Our Vacation Care educators will keep a register of hazardous chemicals used within the service, including Safety Data Sheets (SDS).

[Primary policies – Safe Storage of Hazardous Chemicals, Administration of Medication]

EQUIPMENT, FURNITURE & MAINTENANCE RECORD

There are several factors that can contribute to a hazard, such as a deprived program, insufficient supervision and dilapidated equipment. To ensure a child safe environment free from hazards, we have implemented practices and continue to monitor Service policies and procedures that uphold Australian Safety Standards.

The venue of our Vacation Care Service, and all equipment and furniture used within the service are audited to ensure all aspects are safe, clean and in good repair. We understand that hazards are specific to developmental stages of children. Educators are aware that toys and equipment need to be checked to ensure they are safe and developmentally appropriate for school aged children from Kindergarten to Year 6. Regular checks occur within the Vacation Care Service hours to ensure that all toys, furniture and equipment are in good condition and working order.

[Primary policy – Furniture and Equipment Safety Policy]

RISK ASSESSMENT & RISK ASSESSMENT TOOL

It is a legislative requirement that all services implement a risk management system where they identify and manage hazards and risks within the workplace to ensure a child safe environment. The key principles of risk management include:

1. Identifying all hazards in the workplace
2. Assess the risk of each hazard
3. Control or manage the risk
4. Monitor and improve safety

It is the responsibility of Coordinators or Responsible persons in day-to-day charge to complete a risk assessment where children's safety may be jeopardised and when organising an excursion/incursion.

Children's safety must be incorporated into everyday practice within the Vacation Care service.

Common hazards which may require a risk assessment include:

- cross-infection and infectious disease
- administration of medication
- anaphylaxis procedures and management
- building and equipment (including storage)

- inadequate space for conducting activities and experiences
- hazardous chemicals
- electrical appliances
- food preparation and storage
- environmental influences such as shade, noise etc
- sun safety
- children's behaviours
- water safety
- fire equipment
- pets and/or animals
- inadequate supervision of children
- children's activities and experiences
- Work Health and Safety such as manual handling
- non-compliance risk
- hot drinks
- transportation of children (regular outing and regular transportation)
- excursions

To maintain a child safe environment, we will adhere to our Vacation Care Service policies and procedures and conduct the following checklist: risk assessments, maintenance record and excursion risk assessments.

[Primary policies – Emergency and Evacuation; Incident, Injury, Trauma and Illness; Safe Transportation of Children; Sun Safe; Administration of First Aid; Medical Conditions]

EMERGENCY AND EVACUATION PROCEDURES

Management will ensure that copies of the emergency and evacuation floor plan is displayed in prominent positions near each exit of the service premises, including indoor and outdoor learning areas. All staff are familiar with emergency evacuation procedures and regulatory requirements. Rehearsals for emergency and evacuation procedures, including lock downs, are conducted at least once every 3 months.

ARRIVAL AND DEPARTURE AUTHORISATION

Our Vacation Care Service prioritises children’s safety at all times. We will only release children to an authorised person as named on the child’s enrolment form. We request families provide current court orders, and parenting plans to ensure our records are up to date.

National Regulations require our Vacation Care Service to keep a record of children and visitor’s arrival and departures, with the signatures of the person responsible for verifying the accuracy of the record and the identity of the person collecting the child.

Educators will work in collaboration with our *Arrival and Departure Policy* and *Student and Visitors Policy* to ensure children feel safe and secure at all times.

To ensure children’s safety, educators have a clear understanding of their legal obligation to check identification when a person is collecting a child from their residence or venue. To maintain compliance, parents and educators will complete an alternate collection form if they authorise a person who is not on their emergency contact form to pick up their child.

[Primary policies - Arrival and Departure; Student and Visitors]

CODE OF CONDUCT

Management, coordinators, educators, staff, volunteers and students will adhere to our Service’s Code of Conduct Policy. We will:

- provide adequate supervision of children at all times
- take reasonable action to protect children and young people for risk of harm
- ensure the service premise is free from the use of tobacco, illicit drugs and alcohol
- adhere to our *Privacy and Confidentiality Policy*
- not discriminate against any child, because of culture, race, ethnicity or disability
- be responsible for their own, and others health and safety
- be a positive role model to children
- respect children’s privacy and dignity at all times
- not put children at risk of abuse- refusing food/play, making threats, exposing children to inappropriate language or material (movies, internet, photos)
- report any allegations of child abuse to the Approved Provider as mandatory reporter
- notify the approved provider and/or the regulatory authority within 24 hours of any serious incident or complaint as per the National Regulations

[Primary policies – Code of Conduct; Privacy and Confidentiality]

ONLINE SAFETY

Our Vacation Care Service is committed to create and maintain a safe online environment with support and collaboration with staff, families and community. Management ensures anti-virus and internet security systems are installed to block access to unsuitable web sites, newsgroups and chat rooms. Our Service ensures backups of important and confidential data is made regularly and either stored securely offline, or online. Software and devices are updated regularly to avoid any breach of confidential information.

Written authorisation is requested as part of the enrolment process for children to have their photo taken and published as part of promotional marketing or on the app program used by the service. The identity of a child is not published on any platform.

Personal mobile phones are not used to take photos or video of children at the Service.

[Primary policies – Cyber Safety; Technology; Privacy and Confidentiality, Code of Conduct]

CONTINUOUS REVIEW

To ensure we maintain a culture of continuous improvement, we will ensure our child safe practices are regularly reviewed, evaluated and improved. We aim to ensure all educators, staff and volunteers understand and effectively implement our policies and procedures to provide a child safe environment at our Vacation Care Service.

We will regularly review and monitor the effectiveness of our Child Safe policies and procedures and invite children, staff members, families and communities to contribute to their development.

Any updates or revisions will be communicated to all stakeholders.

FAMILIES

Our Vacation Care Service ensures families are always welcome and feel comfortable asking questions on how we prioritise child safety. We provide a range of opportunities for consultation and collaboration about decisions about their child's safety whilst at our Service including:

- policy and procedure review
- child protection
- allegations/grievance procedures
- sun safety
- written authorisations- parenting orders
- code of conduct

- inclusivity and supporting children with diverse needs.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Government Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.
 Australian Human Rights Commission (2020). *Child Safe Organisations*. <https://childsafesafe.humanrights.gov.au/>
 Child Protection (Working with Children) Act 2012
 Children’s Health and Safety – An analysis of Quality Area 2 of the National Quality Standard
 Department of Education NSW Providing a child safe environment
 Education and Care Services National Regulations. (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (Amended 2020).
 NSW Government Office of the Children’s Guardian *A guide to the Child Safe Standards*. (2020).
 Revised National Quality Standard. (2018).
[United Nations Convention of Rights of the Child, \(1989\). \(UNCRC\)](#)
 Victoria State Government Health and Human Services. Creating child safe organisations:
<https://providers.dhhs.vic.gov.au/creating-child-safe-organisations>
 Work Health and Safety Act, (2011).

REVIEW

POLICY REVIEWED: NOVEMBER 2020	POLICY REVIEW: NOVEMBER 2021
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CONTROL OF INFECTIOUS DISEASES POLICY



The spread of infections in the early childhood environment is facilitated by microbial contamination of the environment, as well as the greater exposure to young children who are still developing hygienic behaviours and habits. Our Vacation Care Service will minimise children's exposure to infectious diseases by adhering to all recommended guidelines from relevant authorities regarding the prevention of infectious diseases, promoting practices that reduce the transmission of infection, ensuring the exclusion of sick children and educators, supporting child immunisation, and implementing effective hygiene practices.

Our Service will provide up-to-date information and advice to parents, families and educators sourced from the Australian Government Department of Health, Australian Health Protection Principal Committee (AHPPC) and state Ministry of Health about infectious diseases as required. Recommendations from the Health Department will be strictly adhered to at all times.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
90	Medical conditions policy

93	Administration of medication
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures

RELATED POLICIES

Administration of Medication Policy Coronavirus (COVID-19) Management Policy Dental Health Policy Family Communication Policy Hand Washing Policy Health and Safety Policy	Incident, Illness, Accident & Trauma Policy Medical Conditions Policy Physical Environment Policy Pregnancy in Early Childhood Policy Sick Children Policy Work Health and Safety Policy
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PURPOSE

Children encounter many other children and adults within the Vacation Care Service environment which can result in the contraction of infectious illnesses. Our Service has a duty of care to ensure that children families, educators, and visitors of the Service are provided with a high level of protection during the hours of the Service’s operation. We aim to manage illnesses and prevent the spread of infectious diseases throughout the Service.

Immunisation is a simple, safe, and effective way of protecting people against harmful diseases before they come into contact with them in the community. Immunisation not only protects individuals, but also others within the community, by reducing the spread of disease and illnesses.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Service is committed to minimise the spread of infectious diseases and viruses by implementing recommendations as stated in the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) developed by the Australian Government National Health and Medical Research Council and advice provided from the Australian Health Protection Principal Committee (AHPPC).

We are guided by decisions regarding exclusion periods and notification of infectious diseases by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction as per the Public Health Act.

The need for exclusion and the length of time a person is excluded from the Service depends on:

- how easily the infection can spread
- how long the person is likely to be infectious and
- the severity of the infectious disease or illness.

This policy must be read in conjunction with our other Quality Area 2 policies:

- Immunisation Policy
- Sick Children Policy
- Incident, Illness, Accident and Trauma Policy and
- Medical Conditions Policy and
- Handwashing Policy

INFORMATION TO BE DISPLAYED AT THE SERVICE

INFORMATION	WEBSITE	PHONE NUMBER
The National Immunisation Program (NIP) Service	https://beta.health.gov.au/initiatives-and-programs/national-immunisation-program	1800 020 103
The NSW Immunisation Schedule (March 2020)	http://www.health.nsw.gov.au/immunisation/Pages/nsw-immunisation-schedule.aspx	
NSW Health Local NSW Public Health Unit Contact Details	https://www.health.nsw.gov.au/Infectious/pages/phus.aspx	1300 066 055
Department of Health	In the event of a community spread virus- (COVID-19) publications from Government agencies will be displayed https://www.health.gov.au/resources/collections/coronavirus-covid-19-campaign-resources	1800 020 080

NOTE: HOMEOPATHIC IMMUNISATION IS NOT RECOGNISED.

PREVENTING INFECTIOUS DISEASES

Children often enter school and education and care services when their immune systems are still developing. They have not been exposed to many common germs and therefore are susceptible to bacteria that may cause infections. Given the close physical contact children have with other children in Vacation Care it is very easy for infectious diseases and illnesses to spread through normal daily activities.

Our Service implements rigorous hygienic practices to limit the spread of illness and infectious diseases including:

- effective hand washing hygiene
- cough and sneeze etiquette
- use of gloves
- exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- effective environmental cleaning including toys and resources
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service
- physical distancing (if recommended)

Immunisation requirements

Immunisation is a reliable way to prevent many childhood infectious diseases. When enrolling a child in an Out of School Hours Care service, parents will be asked to provide an Immunisation History Statement. Should a child not be fully immunised according to the National Immunisation Program Schedule, they will not be prevented from enrolling.

Educators and other staff at our Service are highly recommended to keep up to date with all immunisations including yearly influenza vaccinations. These include vaccinations recommended by the National Health and Medical Research Council (NHMRC).

Refer to Immunisation Policy for more information.

Reporting Outbreaks to the Public Health Unit

Outbreaks of communicable diseases and contagious viruses represent a threat to public health. To help prevent outbreaks, the Department of Health monitors the number of people who contract certain infectious diseases and their characteristics, the recent travel or attendance of infected people in a public place or on public transport, and works with health specialists and doctors to help prevent the transmission of diseases to other people.

The Public Health Act 2010 lawfully requires and authorises doctors, hospitals, laboratories, school principals and childcare centre directors to confidentially notify [NSW Health](#) of patients with certain conditions, and to provide the required information on the notification forms. Specialist trained public health staff review this information and if necessary, contact the patient’s doctor, and sometimes the patient, to provide advice about disease control and to complete the collection of information.

All information is held confidentially in order to protect the patient’s privacy. Both the NSW and Commonwealth Privacy Acts only release/disclose patient information where it is lawfully required or authorised.

Management is required to notify the local [Public Health Unit](#) (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the Service is suffering from one of the following vaccine preventable diseases or any confirmed case of COVID-19

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella (‘German measles’)
- Measles
- Pertussis (‘whooping cough’)
- Tetanus
- An outbreak of 2 or more people with gastrointestinal or respiratory illness.

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak – (eg: COVID-19)

The Approved Provider must also notify the Regulatory Authority of any incidence of a notifiable Infectious disease or illness. [acecqa contact regulatory authority](#)

MANAGEMENT WILL ENSURE

- that all information regarding the prevention of infectious diseases is sourced from a recognised health authority [Australian Government Department of Health](#)

- exclusion periods for people with infectious diseases recommended by Government Authorities are implemented for all staff, children, parents, families and visitors
- the Vacation Care Service implements recommendations from [Staying healthy: Preventing infectious diseases in early childhood education and care services](#) to maintain a healthy environment
- advice and recommendations from the Australian Health Protection Principal Committee (AHPPC) and Safe Work Australia will be implemented where reasonably possible
- children are protected from harm by ensuring relevant policies and procedures are followed regarding health and safety within the Vacation Care Service
- a staff immunisation record that documents each staff member's previous infection or immunisations (including dates) is developed and maintained
- the Public Health Unit is notified in the event of an outbreak of viral gastroenteritis. Management must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2 day period. (NSW Government- Health 2019)
- required enrolment information, including health and immunisation records of enrolled children is collected, maintained and appropriately and securely stored

In the event of a confirmed COVID-19 case the Public Health Unit and Regulatory Authority will be notified, and advice followed to ensure the safety of children, educators and visitors to the service. ([NQA ITS](#))

- the Department of Education, Skills and Employment in NSW is notified of a positive COVID-19
- directions from the PHU are followed to close the service and an industrial/deep clean of the service is conducted
- all families and staff are notified of the closure of the service if advised to do so by the PHU
- privacy and confidentiality laws are adhered to- the person who has the confirmed case of COVID-19 will be on a 'need to know' basis only
- information is provided to the PHU for contact tracing
- COVID-19 testing will be conducted for educators and staff at the Service
- COVID-19 testing will be required for all children and families as advised by PHU
- re-opening dates will be confirmed to the Regulatory Authority, DESE and families when advised by the PHU

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- a hygienic environment is promoted and maintained

- children are supported in their understanding of health and hygiene practices throughout the daily program and routine (hand washing, hand drying, cough and sneeze etiquette)
- educators and staff are aware of relevant immunisation guidelines for children and themselves
- an Immunisation History Statement for each child is requested on enrolment regarding the child's immunisation status (AIR) and any medical conditions
- families are provided with relevant sourced materials and information on infectious diseases, health, and hygiene including:
 - the current NSW Immunisation Schedule
 - exclusion guidelines in the event of a vaccine preventable illness at the Service for children that are not immunised or have not yet received all their immunisations
 - advice and information regarding any infectious diseases in general and information regarding any specific infectious illnesses that are suspected/present in the Service.
- families are provided with information about an infectious disease by displaying and emailing the Infectious Diseases Notification Form and details
- families are advised that they must alert the Service if their child is diagnosed with an Infectious Illness
- all educators are mindful and maintain confidentiality of individual children's medical circumstances
- that opportunities for educators to source pertinent up to date information from trusted sources on the prevention of infectious diseases and maintaining health and hygiene are provided
- that opportunities for staff, children, and families to have access to health professionals by organising visits/guest speakers to attend the service to confirm best practice are provided
- families are advised to keep children at home if they are unwell. If a child has been sick they must be well for 24hrs before returning to the Service. For example, if a child is absent due to illness or is sent home due to illness they will be unable to attend the next day as a minimum. **The Nominated Supervisor may approve the child's return to the Service if families provide a doctor's certificate/clearance certifying that the child is no longer contagious and is in good health. Please note; it is not always possible to obtain a doctor's certificate or clearance for suspected cases of an illness. The decision to approve a child's return is up to the Approved Provider/Nominated supervisor**
- to complete the register of *Incident, Injury, Trauma of Illness* and/or document incidents of infectious diseases no later than 24 hours of an illness or infectious disease occurring in the Service.
- educators or staff who have diarrhoea or an infectious disease do not handle food for others and are not to return to work until they have been symptom free for 48 hours

- any risk to a child or adult with complex medical needs is minimised in the event of an outbreak of an infectious disease or virus. This may require a risk assessment and decision-making regarding the suitability of attendance of the child or staff member during this time

Educators will ensure:

- that any child suspected of having an infectious illness is responded to and their health and emotional needs supported at all times
- any child suspected of having an infectious illness is isolated from other children and supervised whilst waiting for collection by parents or guardian
- that appropriate health and safety procedures are implemented when treating ill children
- families are aware of the need to collect their unwell child/ children as soon as practicable from the Service
- all resources or items touched by a child with a suspected illness are thoroughly cleaned and disinfected- (cushions, pillows, toys)
- their own immunisation status is maintained, and the Approved Provider/Nominated Supervisor is advised of any updates to their immunisation status
- opportunities are provided for children to participate in hygiene practices, including routine opportunities, and intentional practice such as hand washing, sneezing and cough etiquette
- consideration is given to the combination of children to decrease the risk of attaining an infectious illness when planning the routines/program of the day
- they adhere to the Service's health and hygiene policy including:
 - hand washing
 - daily cleaning of the Service
 - wearing gloves (particularly when in direct contact with bodily fluids)
 - appropriate and hygienic handling and preparation of food
- they maintain up-to-date knowledge with respect to Health and Safety through on-going professional development opportunities

Prevention strategies for minimising the spread of disease within our Service include all staff ensuring:

- full adherence to the NHMRC childcare cleaning guidelines
- to clean surfaces first with detergent and water before using disinfectants. Disinfectants cannot kill germs unless areas are clean

- mops used for toilet accidents are to be soaked in disinfectant in a bucket in the laundry sink and then air-dried.
- that a daily clean is carried out on other surfaces that may transmit germs such as high touch objects including doorknobs, tables, remotes, light switches, low shelving, etc. This will be increased, if an outbreak has been recorded in the Service or to minimise the risk of transmission of a virus such as COVID-19
- that if a child has a toileting accident, the items are placed in a plastic bag with the child's name on it. The plastic bag will be stored in a sealed container labelled 'soiled/wet clothing' for parents to take home.
- cloths are colour coded so that a separate cloth is used to clean floors, bathroom, art and craft, and meal surfaces
- all washable toys/equipment out on display for the children are to be washed on a weekly basis to decrease the risk of cross contamination and recorded with the date and a signature as evidence.
- toys and equipment (that are difficult to wash) will be washed with detergent (or soap and water) and air-dried in sunlight
- washable toys and equipment will be washed in detergent and hot water or the dishwasher and aired to dry (toys will not be washed in the dishwasher at the same time as dishes). All toys and equipment that have been cleaned will be recorded on the toy cleaning register.
- all cleaning procedures will be recorded on the Service's Cleaning Checklist.
- floor surfaces will be cleaned on a daily basis after each meal and at the end of each day
- toilets/bathrooms will be cleaned in the middle of the day, the end of the day and whenever needed throughout the day using disinfectant and paper towel.
- when cleaning up spills of faeces, vomit or urine off floors, bathrooms etc. educators will use disinfectant on the surface after cleaning it with detergent and warm water
- pregnant staff members should not assist in toileting or cleaning up toileting accidents to prevent unexpected cross contamination and risk of contracting Cytomegalovirus (CMV). (see *Pregnancy in Early Childhood Policy*)

FAMILIES WILL:

- adhere to the Service's policy regarding *Sick Children* and exclusion requirements
- adhere to the Service's restrictions of entry into the Service in the event of an outbreak of an infectious disease or virus
- adhere to the Service's policy regarding *Hand Washing*

- exclude their child from care if they display symptoms of an infectious illness or disease or in the event of a vaccine preventable disease occurs in the Service and their child is not immunised fully
- advise the Vacation Care Service of their child's immunisation status, by providing approved written documentation for the Service to copy and place in the child's file.
- advise the Vacation Care Service when their child's immunisation/medical condition is updated to ensure that immunisation and medical records are up to date.
- adhere to the Service's risk minimisation strategies if their child has complex medical needs in the event of an outbreak of an infectious disease or virus

Resources

[Gastro Pack NSW Health](#)

[Recommended exclusion periods- Poster Staying Healthy: Preventing Infectious diseases in early childhood education and care services](#)

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Government Department of Health *Health Topics* <https://www.health.gov.au/health-topics>

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Australian Government Department of Health Australian Health Protection Principal Committee (AHPPC)

Department of Human Resources: National Immunisation Program Schedule: <https://beta.health.gov.au/initiatives-and-programs/national-immunisation-program>

Early Childhood Australia Code of Ethics. (2016).

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[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Guide to the National Quality Standard. (2020)

Medicare Australia (Department of Human Services): <https://www.humanservices.gov.au/individuals/medicare>

National Health and Medical Research Council (NHMRC): <https://www.nhmrc.gov.au/>

National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

NSW Government Department of Health. Vaccination requirements for child care:

https://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx

NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>

Public Health Act 2010

Public Health Amendment Act 2017

Public Health Regulation 2012

Public Health and Wellbeing Regulations 2019 Victoria

Revised National Quality Standard. (2018).

Safe Work Australia

REVIEW

REVIEWED : NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER 2021
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DENTAL HEALTH POLICY

Good oral health is important for good general health and wellbeing for children. It allows children to eat, speak, socialise and learn without pain or discomfort. Early Childhood Services and Out of School Hours Care Services are ideal settings for promoting the importance of good dental health to children and families.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.

EDUCATION AND CARE SERVICES NATIONAL REGULATION	
92	Food and beverages
87	Incident, injury, trauma and illness record

RELATED POLICIES

Administration of First Aid Policy Health and Safety Policy	Incident Illness Accident and Trauma Policy Nutrition and Food Safety Policy
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PURPOSE

We aim to promote children’s general wellbeing by creating an environment that supports healthy dental and oral health habits and practices that can be maintained throughout the child’s life. Our Vacation Care Service will ensure that drinking water is always available.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service

IMPLEMENTATION

We believe it is important for all children to practice a high level of dental hygiene. We follow the guidelines of the Australian Dental Association and State Government Health Departments when caring for children's teeth.

We provide information and guidelines on good dental health practices, which are implemented into the daily routine, including swish and swallow after mealtimes, providing information about brushing teeth and tooth friendly snacks and drinks, and going to the dentist.

To minimise the risk of cavities forming we encourage children to eat nutritious foods and to avoid sticky and sugary foods. Children will be encouraged to drink water.

MANAGEMENT/NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL:

- ensure that food and drinks provided by the Service adhere to recommendations from organisations such as *Munch and Move* and *Get Up and Grow*, and recognised authorities. The Royal Children's Hospital of Melbourne recommends that children should avoid foods and drinks such as:
 - Chocolate
 - Lollies
 - Sweetened breakfast cereals
 - Biscuits
 - Fruit bars
 - Dried fruit
 - Muesli bars
 - Soft drink
 - Flavoured milk
 - Juice
 - Sports drinks
 - Cordial
 - Flavoured water
- always ensure children have access to safe drinking water
- ensure the routine incorporates 'swish and swallow' after each meal or snack time where possible
- provide information to families about the Child Dental Benefits Schedule (CDBS)
- ensure enrolment form contains up to date information about each child's family dentist (in case of emergency).

EDUCATORS WILL:

- provide opportunities to discuss dental health education and food and drink choices to support dental health with children
- provide resources to support dental health learning such as books, posters, 'giant' teeth and toothbrushes, etc.
- pay particular attention to meal and snack times to ensure healthy food is being eaten.
- encourage 'swish and swallow' after each mealtime
- provide dental care information to families through newsletters, posters, web links and brochures
- promote Dental Health Week with children and families each year.

DENTAL EMERGENCIES:

It is important for Educators to be aware of how to manage dental accidents and emergencies. Our Vacation Care Service will:

- ensure there is an Educator on duty with current first aid qualifications to follow dental accident procedures
- ensure procedures for Adminstrating First Aid are adhered to (including completing an Illness, Accident or Trauma record)
- ensure families are notified of any injury as soon as is reasonably practicable
- ensure that the phone number of an emergency dentist is easily accessible.
- ensure children are supervised at all times to minimise accidents and incidents.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Dental Association <https://www.ada.org.au/Dental-Health-Week-2020>

Australian Government Services Australia *Child Dental Benefits Schedule*

<https://www.servicesaustralia.gov.au/individuals/services/medicare/child-dental-benefits-schedule>

Dental Health Services Victoria: <https://www.dhsv.org.au/oral-health-programs/achievementprogram/early-childhood-education>

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Guide to the National Quality Framework. (2017). (amended 2020)

National Childcare Accreditation Council (NCAC) (2006). Ask a child care adviser: Dental health. *Putting Children First*, 18, 10-12.

Raising Children Network: www.raisingchildren.net.au

Revised National Quality Standard. (2018).

REVIEW

<i>POLICY REVIEWED: NOVEMBER 2020</i>	<i>NEXT POLICY REVIEW DATE: NOVEMBER 2021</i>
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DIABETES MANAGEMENT POLICY



Diabetes in children can be a diagnosis that has a significant impact on families and children. It is imperative that educators and staff within the Vacation Care Service understand the responsibilities of diabetes management to reduce the risk of emergency situations and long-term complications. Most younger children will require additional support from the service and educators to manage and monitor their diabetes whilst in attendance however, older children may be working towards independence and learning to self-monitor blood glucose and insulin injecting.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement— anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First aid qualifications

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Incident, Illness, Accident, Trauma Policy	Medical Conditions Policy Supervision Policy
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PURPOSE

Our Vacation care Service is committed to providing a safe and healthy environment that is inclusive for all children, staff, visitors, and family members. The aim of this policy is to minimise the risk of a diabetic medical emergency occurring for any child whilst at our Service by supporting young people with diabetes, working in partnership with families and health professionals, and following the child's Medical Management Plan.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

DESCRIPTION

- **Type-1 diabetes** is an autoimmune condition, which occurs when the immune system damages the insulin producing cells in the pancreas. This condition is treated with insulin replacement via injections or a continuous infusion of insulin via a pump. Without insulin treatment, Type-1 diabetes is life threatening.
- **Type-2 diabetes** occurs when either insulin is not working effectively (insulin resistance) or the pancreas does not produce sufficient insulin (or a combination of both). Type-2 diabetes accounts for between 85 and 90 per cent of all cases of diabetes and usually develops in adults over the age of 45 years but is increasingly occurring at a younger age. Type-2 diabetes is unlikely to be seen in children under the age of 4 years old.

DUTY OF CARE

Our Vacation Care Service has a legal responsibility to take reasonable steps to ensure that the health needs of all children enrolled in the service are met. This includes our responsibility to provide

- a safe environment and
- adequate supervision at all times.

Our Vacation Care service will ensure all staff members, including relief staff, have adequate training and knowledge about diabetes and know what to do in an emergency to ensure the health and safety of children (especially in regard to hypoglycaemia and safety in sport).

IMPLEMENTATION

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Vacation Care Service will adhere to privacy and confidentiality procedures when dealing with individual health needs.

A copy of all medical conditions policies will be provided to all educators, volunteers, and families of the Vacation Care Service. It is important that communication is open between families and educators so that management of diabetes is effective.

Children diagnosed with diabetes will not be enrolled into the Vacation Care Service until the child's Medical Management Plan is completed and signed by their medical practitioner or diabetes team and the relevant staff members have been trained on how to manage the individual child's diabetes. A Risk Minimisation and Communication Plan must be developed with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

It is imperative that all educators and volunteers at the Vacation Care Service follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

MANAGEMENT, NOMINATED SUPERVISOR / RESPONSIBLE PERSON WILL ENSURE THAT:

- before the child's enrolment commences, the family will meet with the Service and its educators to begin the communication process for managing the child's medical condition in adherence with the registered medical practitioner or health professional's instructions
- parents/guardians of an enrolled child who is diagnosed with diabetes are provided with a copy of the *Diabetes Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- each child with type-1 diabetes has a current individual diabetes Medical Management Plan prepared by the child's diabetes medical specialist team, at or prior to enrolment
- discussions occur regarding authorisation for children to carry diabetes equipment with them and the self-administration of Blood Glucose testing and insulin injecting. Any authorisations for self-

administration must be documented in the child's Medical Management Plan and approved by the vacation care service, parents/guardian and the child's medical management team.

- a child's diabetes Medical Management Plan is signed by a registered Medical Practitioner or Paediatrician and inserted into the enrolment record for each child. This will include all information on how to manage the child's diabetes on a day to day basis as well as the emergency management of the child's medical condition. Information may include:
 - blood glucose testing- BG meter
 - insulin administration
 - food, carbohydrate counting
 - how to store insulin correctly
 - how the insulin is delivered to the child- as an injection or via an insulin pump/
Continuous Glucose Monitoring CGM
 - oral medicine the child may be prescribed
 - managing diabetes during physical activities and excursions
 - permission for the child to self-administer blood glucose testing and insulin injecting
- a Communication Plan is developed for staff and parents/guardians encouraging ongoing communication between parents/guardians and staff regarding the management of the child's medical condition, the current status of the child's medical condition, and this policy and its implementation within the Service prior to the child starting at the Vacation Care Service
- all staff members including volunteers are provided with a copy of the *Diabetes Management Policy* and the *Medical Conditions Policy* which are reviewed annually
- a copy of this policy is provided and reviewed during each new staff member's induction process
- all staff members have completed first aid training approved by the Education and Care Services National Regulations at least every 3 years and that this is recorded, with a copy of each staff members' certificate held on the Vacation Care Service's premises
- when a child diagnosed with diabetes is enrolled, all staff attend regular professional training on the management of diabetes and, where appropriate, emergency management of diabetes
- at least one staff member who has completed accredited training in emergency diabetes first aid is present in the Service at all times whenever a child /child with diabetes are in attendance at the Service
- there is a staff member who is appropriately trained to perform finger-prick blood glucose or urinalysis monitoring and is aware of the action to be taken if these are abnormal
- consideration is given as to how and where insulin is stored and the safety of sharps disposal

- the family supplies all necessary glucose monitoring and management equipment, and any prescribed medications prior to the child's enrolment
- the Risk Minimisation Plan will cover the child's known triggers and where relevant other common triggers which may lead to a diabetic emergency
- all staff members are trained to identify children displaying the symptoms of a diabetic emergency and are aware of the location of the diabetic Medical Management Plan, required insulin/food as well as the Risk Minimisation and Emergency Action Plan
- all staff, including casual and relief staff, are aware of children diagnosed with diabetes attending the Vacation Care Service, their individual symptoms of low blood sugar levels, and the location of their Medical Management Plans and Risk Minimisation and Communication Plans.
- individual child's Medical Management and Emergency Action Plan will be displayed in key locations throughout the Service
- a staff member accompanying children outside the Vacation Care Service to attend excursions or any other event carries the appropriate monitoring equipment, any prescribed medication, a copy of the diabetes Medical Management Plan and Emergency Action Plan for children diagnosed with diabetes
- the programs delivered at the Vacation Care Service are inclusive of children diagnosed with diabetes and that children with diabetes can participate in activities safely and to their full potential
- all staff and volunteers at the Service are aware of the strategies to be implemented for the management of diabetes at the Service in conjunction with each child's diabetes Medical Management Plan
- updated information, resources and support is regularly given to families for managing childhood diabetes
- meals, snacks and drinks that are appropriate for the child and are in accordance with the child's diabetes Medical Management plan are available at the Service at all times
- eating times are flexible and children are provided with enough time to eat
- Diabetes Australia are contacted for further information to assist educators to gain and maintain a comprehensive understanding about managing and treating diabetes
- applications for additional funding opportunities are made if required to support the child and educators.

EDUCATORS WILL:

- read and comply with the *Diabetes Management Policy, Medical Conditions Policy and Administration of Medication Policy*.

- know which children are diagnosed with diabetes, and the location of their monitoring equipment, diabetes Medical Management and Action Plans and any prescribed medications
- perform finger-prick blood glucose or urinalysis monitoring as required and will act by following the child's diabetes Medical Management Plan if these are abnormal
- communicate with parents/guardians regarding the management of their child's medical condition as per their Communication Plan
- ensure that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the Vacation Care Service
- follow the strategies developed for the management of diabetes at the Vacation Care Service
- follow the Risk Minimisation Plan for each enrolled child diagnosed with diabetes
- ensure a copy of the child's diabetes Medical Management Plan is visible and known to staff within the Service
- take all personal Medical Management Plans, monitoring equipment, medication records, Emergency Action Plans and any prescribed medication on excursions and other events outside the Service
- recognise the symptoms of a diabetic emergency and treat appropriately by following the Diabetes Medical Management Plan and the Emergency Action Plan.
- a suitably trained and qualified Educator will administer prescribed medication if needed according to the Emergency Action Plan and in accordance with the *Service's Administration of Medication Policy*
- record any medication in the *Administration of Medication Record*
- identify and where possible minimise possible triggers as outlined in the child's Medical Management Plan and Risk Minimisation Plan
- increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties and family days, as well as during periods of high-energy activities
- ensure appropriate supplies of insulin administration equipment, carbohydrate and hypo food are taken on excursions, including back-up supplies in the event of delays
- maintain a record of the expiry date of the prescribed medication relating to the medical condition so as to ensure it is replaced prior to expiry
- ensure the location is known of glucose foods or sweetened drinks to treat hypoglycaemia (low blood glucose), e.g. glucose tablets, glucose jellybeans, etc.

FAMILIES WILL ENSURE THEY PROVIDE THE SERVICE WITH:

- details of the child's health condition, treatment, medications, and known triggers

- their doctor's name, address and phone number, and a phone number for an authorised nominee and/or emergency contact person in case of an emergency
- a Medical Management Plan and Emergency Action Plan following enrolment and prior to the child starting at the Service is completed by their child's diabetes team (paediatrician or endocrinologist, general practitioner and diabetes educator). The plan should include:
 - when, how, and how often the child is to have finger-prick or urinalysis glucose or ketone monitoring
 - what meals and snacks are required including food types/groups amount and timing
 - what activities and exercise the child can or cannot do
 - whether the child is able to go on excursions and what provisions are required
 - what symptoms and signs to look for that might indicate hypoglycaemia (low blood glucose) or hyperglycaemia (high blood glucose)
 - what action to take in the case of an emergency
 - an up to date photograph of the child
- the appropriate monitoring equipment needed according to the diabetes Medical Management Plan- blood glucose meter with test strips, insulin pump consumables and hypo treatment foods/drinks
- an adequate supply of emergency insulin for the child at all times according to the Emergency Action Plan.
- information regarding their child's medical condition and provide answers to questions as required and pertaining to the medical condition and management of their condition
- any changes to their child's medical condition including the provision of a new diabetes Medical Management Plan to reflect these changes as needed
- all relevant information and concerns to staff, for example, any matter relating to the health of the child that may impact on the management of their diabetes

DIABETIC EMERGENCY

A diabetic emergency may result from too much or too little insulin in the blood. There are two types of diabetic emergency.

- a) very **low** blood sugar (hypoglycaemia, usually due to excessive insulin), and
- b) very **high** blood sugar (hyperglycaemia, due to insufficient insulin).

The more common emergency is hypoglycaemia. This can result from:

- too much insulin or other medication

- not having eaten enough carbohydrate or other correct food
- a meal or snack has been delayed or missed
- unaccustomed or unplanned physical exercise or
- the young person has been more stressed or excited than usual

In the event that a child suffers from a diabetic emergency the Service and staff will:

- Provide adult supervision at all times
- Follow the child's diabetic Emergency Action Plan
- If the child does not respond to steps within the diabetic Action Plan, immediately dial 000 for an ambulance
- Continue first aid measures and follow instructions provided by emergency services
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the regulatory authority within 24 hours

SIGNS & SYMPTOMS

HYPOGLYCAEMIA (HYPO)

If a child is wearing a CGM device, it will sound an alert when they are below their target range. Symptoms can vary between each young person.

If caused by low blood sugar, the child may:

- feel dizzy, weak, tremble and feel hungry
- look pale and have a rapid pulse (palpitations)
- sweat profusely
- feel numb around lips and fingers
- change in behaviour- angry, quiet, confused, crying
- become unconsciousness or have a seizure

HYPERGLYCAEMIA (HYPER)

If caused by high blood sugar, the child may:

- feel excessively thirsty
- have a frequent need to urinate

- feeling tired or lethargic
- feel sick
- be irritable
- complain of blurred vision
- lack concentration
- have hot dry skin, a rapid pulse, drowsiness
- have the smell of acetone (like nail polish remover) on the breath
- become unconsciousness

For more information, contact the following organisations:

Diabetes Australia

<https://www.diabetesaustralia.com.au/contact-us>

Juvenile Diabetes Research Foundation: www.jdrf.org.au

National Diabetes Services Scheme- An Australian Government Initiative <https://www.ndss.com.au/living-with-diabetes/about-you/young-people/living-with-diabetes/school/>

State and Territory specific information

Diabetes NSW & ACT: <https://diabetesnsw.com.au/>

Diabetes Victoria: <https://diabetesvic.org.au/>

Diabetes South Australia: <https://www.diabetessa.com.au/>

Diabetes Queensland: <https://www.diabetesqld.org.au/>

Diabetes Western Australia: <https://diabeteswa.com.au/>

Healthy Living, Northern Territory: <https://healthylivingnt.org.au/our-services/diabetes/>

Diabetes Tasmania: <https://www.diabetestas.org.au/>

Source

As 1 Diabetes (2017) - <http://as1diabetes.com.au/>

Australian Children's Education & Care Quality Authority. (2014).

Early Childhood Australia Code of Ethics. (2016).

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National Diabetes Services Scheme (NDSS). *Mastering diabetes in preschools and schools*. (2020).

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Revised National Quality Standard. (2018).

Siminerio, L., Albanese-O'Neill, A., Chiang, J. L., Hathaway, K., Jackson, C. C. (2014). Care of young children with diabetes in the child care setting: A position statement of the American Diabetes Association. *Diabetes Care*, 37, 2834-2842. Retrieved from <http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/ps-care-of-young-children-with-diabetes-in-child-care-setting.pdf>

REVIEW

POLICY REVIEWED: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBE 2021
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EXCURSION POLICY

Excursions/incursions enhance children's learning by providing them the opportunity to participate in curriculum planned activities and experiences to extend on their skills and knowledge in the current interest topic. Our Service recognises that excursions provide opportunities for children to explore the wider community as a group and extend on the educational program provided.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
2.2	Safety	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.1	Supervision	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.2	Incident and emergency management	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
4 (1)	Definition regular outing
89	First Aid Kits
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursion
123	Educator to child ratios-centre-based services
136	First Aid qualifications
161	Authorisations to be kept in enrolment record

168	Policies and Procedures are required
170	Policies and procedures to be followed

RELATED POLICIES

Administration of Medication Policy Administration of First Aid Policy Code of Conduct Policy Educational Program Policy Emergency Evacuation Policy Family Communication Policy Incident, Illness, Accident and Trauma Policy	Interaction with Children, Family and Staff Policy Orientation of New Families Policy Privacy and Confidentiality Policy Respect for Children Policy Safe Transportation Policy Supervision Policy Water Safety Policy
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PURPOSE

To ensure that all excursions and incursions undertaken by the Outside School Hours Care Service are planned and conducted in a safe manner, maintaining children’s health, safety and wellbeing at all times in accordance with National Legislation. We believe excursions/incursions provide the children with the opportunity to expand and enhance their skills and knowledge gaining insight into their local and the wider community.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Excursions will be conducted with the children’s safety and wellbeing in mind at all times. We will regularly schedule incursions and visitors to our Vacation Care Service however, if we feel an excursion will benefit the children and offer a valuable experience, we will adhere to the National Regulations and Service policies and procedures to plan and manage an experience that is enjoyable for children. This policy relates to excursions that may be a ‘regular outing’ or a one-off excursion for a particular purpose.

DEFINITIONS (Effective 1 October 2020)

Excursion: means an outing organised by an education and care service or family day care educator but does not include an outing organised by an education and care service provided on a school site if-

(a) a child or children leave the education and care service premises in the company of an educator and

(b) the child or children do not leave the school site

Regular outing: in relation to an education and care service, means a walk, drive or trip to and from a destination

- (a) that the service visits regularly as part of its educational program; and
- (b) where the circumstances relevant to the risk assessment are *substantially* the same on each

CONSIDERATIONS FOR EXCURSIONS

The purpose of the excursion should be clearly identified by staff providing information on how the excursion or incursion supports the educational program and contributes to the outcomes for children.

Excursions/incursions should be planned in advance and consideration given to the:

- time away from the Vacation Care service
- availability of toilet and washing facilities
- access to safe drinking water
- adequate health and hygiene practices
- possible risk to children (identified in risk assessment)
- accessibility for all children
- transportation
- cost
- weather- wet weather arrangements
- teaching children safety procedures and responsibilities whilst on an excursion
- communication with parents and families
- Risk Assessment documentation provided by the excursion venue

EDUCATION RISK ASSESSMENT:

The Approved Provider or Nominated Supervisor must conduct a risk assessment which reflects regulation 101 before an authorisation is scheduled under regulation 102 to determine the safety and appropriateness of the excursion/incursion. If the excursion involves transporting children, the risk assessment must adhere to **all** components of regulations 101 and 102 (effective 1 October 2020).

The Vacation Care Service/Nominated Supervisor will ensure:

- an *Excursion/Incursion Risk Assessment* is developed prior to any excursion or incursion
- a responsible person (or coordinator) is appointed to oversee the organisation of the excursion

- families are notified about the excursion using an *Excursion Permission* letter and written authorisation must be provided by a parent or other person named in the child's enrolment record
- families have a right to view the risk assessment prior to the excursion/incursion upon request in which the Service must comply with ensuring all information is available
- the risk assessment must
 - identify and assess possible risks that the excursion/incursion may pose to the health, safety and wellbeing of any child being taken on the excursion
 - specify how the identified risks will be managed and minimised
 - consider the proposed route and destination for the excursion and
 - identify any water hazards
 - reflect on any risks associated with water-based activities
 - consider the transport to and from the proposed destination for the excursion
 - consider the duration of the transportation
 - consider any requirements for seatbelts or safety restraints under a law for our **state/territory** jurisdiction
 - the process for entering and exiting the education and care service premises and the pick-up location or destination (as required)
 - procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking
 - consider the ratio of adults to children involved in the excursion
 - consider the risks posed by the excursion/incursion, the number of educators or other responsible adults required to provide supervision, and whether any adults with specialised skills are required to ensure children's safety (eg: lifesaving skills)
 - consider the planned activities
 - determine the duration of the excursion
 - consider items that should be taken on the excursion (mobile phone, emergency contacts, first aid kit, medical plans, etc.).
 - consider strategies to ensure supervision is consistent at all times during the excursion-transitions, toileting, departure from the service and conclusion of the excursion

If the excursion is a *regular excursion* or '*regular outing*' a risk assessment authorisation is only required to be carried out once in a 12-month period however must be regularly reviewed. If circumstances around the excursion change, a new risk assessment is required.

PARENT AUTHORISATION

The Nominated Supervisor must ensure:

- that a child is not taken outside the Vacation Care Service premises on an excursion unless written authorisation has been provided
- the authorisation must be given by a parent or other authorised person named in the child's enrolment record as having authority to authorise transportation of a child
- the authorisation form must state:
 - the child's name
 - the reason the child is to be taken outside the premises
 - the reason the child is to be transported (if transportation is included in the excursion)
 - if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outing
 - the date the child is to be taken on the excursion and transported (unless the authorisation is for a regular outing)
 - a description of the proposed pick-up location destination for the excursion
 - the method of transport to be used for the excursion
 - the proposed activities to be undertaken by the child during the excursion
 - the period the child will be away from the premises
 - the period of time during which the child is to be transported
 - the anticipated number of children likely to be attending the excursion
 - the anticipated educator to child ratio attending the excursion to the anticipated number of children attending the excursion
 - the anticipated number of staff members and any other adults who will accompany and supervise the children on the excursion
 - any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported
 - that a risk assessment has been prepared and is available at the Service
 - that written policies and procedures for transporting children are available at the Service
- if the excursion is a regular outing, the authorisation is only required to be obtained once in a 12-month period.

STAFFING ARRANGEMENTS

The Nominated Supervisor will ensure that:

- educator to child ratios are no less than the prescribed ratios as per National Regulations

- additional educators/staff are engaged to provide care and support to children with additional needs
- educators are aware of their responsibility to provide supervision to other responsible adults or volunteers assisting on the excursion
- educators are aware the procedures to follow in the event of an emergency
- at least one educator or the nominated supervisor must hold current First Aid qualification, approved emergency Asthma management and approved anaphylaxis management training

PARENT AND VOLUNTEER PARTICIPATION

The Nominated Supervisor will ensure parents and volunteers:

- are encouraged/invited to participate in excursions when possible
- cannot be counted as part of the educator to child ratio
- cannot be left alone with a child/children and must be supervised by an educator at all times
- are briefed prior to participating on an excursion about the risk assessment, emergency procedures, supervision, photograph policy for privacy and confidentiality and use of mobile phone
- are aware that smoking is not permitted
- are aware of need to wear appropriate clothing and footwear.

ITEMS TO BE TAKEN ON AN EXCURSION

The Nominated Supervisor must ensure that the following items are taken on all excursions, as per the risk assessment:

- appropriate number of suitably equipped first aid kits
- fully charged and operating mobile phone
- emergency contact information details for all children participating on the excursion
- medication for children requiring medical and relevant medical management plans
- items required for excursion circumstances- such as sunscreen, hats, other equipment

TRANSPORTATION FOR EXCURSION

It is a requirement of the National Regulation that the means of transport is stated on the risk assessment record and parent authorisation record. Information must be included in the risk assessment about the process for embarking and disembarking the means of transport, including how each child is to be accounted for.

The *means of transport* may mean:

- **Walking**

Educators must ensure children and adults use the safest footpaths and safe crossings where possible, such as pedestrian crossings and traffic lights

Educators will ensure all children and adults obey road rules

Educators will ensure children follow the 'stop, look, listen and think' process when walking near roads

Educators will remain vigilant that no child runs ahead or lags behind the group

- **Bus**

the Nominated Supervisor must ensure that the seating capacity as displayed on the compliance registration is not exceeded. All children must sit on seats, preferably with, or close to an adult. Any requirements for seat belts or safety restraints under law must be followed depending on the vehicle used. If the bus has seat belts, they must be worn at all times.

- **Train**

the Nominated Supervisor will be required to contact the local station prior to the excursion to inform them of the time you will be travelling, the destination, and the number of children and adults who will be travelling.

Provisions should be made to ensure children have ample time to board the train safely and in an unhurried way. This will allow the station to inform the train guard so that they can hold the train for the period of time for safe boarding and disembarkment. All children should be seated at all times, with an adult close by. All children should be seated in the one carriage if possible- and not in a Quiet Carriage.

- **Car**

Any motor vehicle that is used to transport children on an excursion (other than a motor vehicle seating more than nine persons) must be fitted with child restraints and/or seatbelts that are appropriate for the age and weight of each child, that conform to the Australian Standards, and are professionally installed or checked by an authorised restraint fitter.

The vehicle must be registered and free of any defects that could put any passenger at harm.

All children must be fastened in the vehicle according to National Child Restraint Laws for Vehicles (below). The process for entering and exiting the Service premises safely must be considered at all times.

CHILD RESTRAINT LAWS FOR VEHICLES

- children aged from four years old but under seven years old cannot travel in the front seat of a vehicle with two or more rows, unless all other back seats are occupied by children younger than seven years in an approved child restraint or booster seat.
- children aged from seven years old but under 16 years old who are too small to be restrained by a seatbelt properly adjusted and fastened are strongly recommended to use an approved booster seat.
- children in booster seats must be restrained by a suitable lap and sash type approved seatbelt that is properly adjusted and fastened, or by a suitable approved child safety harness that is properly adjusted and fastened.

Source: NSW Government Centre for Road Safety, 2017.

INSURANCE

Management must review their insurance policy prior to the excursion/incursion to ensure liability is protected by the OSHC Service. A copy of the insurance policy should be kept within the service's vehicle at all times.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).
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 Guide to the National Quality Framework. (2018). (Amended 2020).
 Kidsafe Victoria *Road Safety* <https://www.kidsafevic.com.au/road-safety/>
 Kids and Traffic Early Childhood Road Safety Education Program (NSW)
 NSW Government Centre for Road Safety. (2017):
<https://roadsafety.transport.nsw.gov.au/stayingsafe/children/childcarseats/index.html>
 Road Transport (Safety & Traffic Management) Act 1999.
 Revised National Quality Standard. (2018).
 Victoria State Government Education and Training *Early Childhood Professionals*

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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FURNITURE & EQUIPMENT SAFETY POLICY



Under National Law we have a responsibility to protect the health and safety of children enrolled at our Vacation Care Service. Whilst risk management is included in our health and safety policies, we understand our responsibility in providing a safe environment for all children and the need to check all equipment and furniture regularly to minimise risks to all those entering the Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
174	Time to notify certain circumstances to the Regulatory Authority
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Health and Safety Policy Incident, illness, accident and Trauma Policy Physical Environment Policy	Supervision Policy Work Health and Safety Policy
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PURPOSE

Management and Educators have a responsibility and duty of care to ensure the building, furniture, grounds, and equipment are safe and hygienic. We aim to ensure that all furniture and equipment at the Vacation Care Service adheres to recognised safety standards and is age appropriate for the children.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Service understands the importance of children experiencing and learning about risk through safe and creative play. The provision of safe environments for children is essential to prevent injury and enable them to explore and develop new skills. Our Vacation Care Service will only use furniture and equipment that has been made in accordance with Australian design standards.

MANAGEMENT WILL ENSURE:

- a proactive process of risk management is implemented, and clear processes are in place for the identification of hazards, risk minimisation and other control measures
- daily/weekly routine visual inspections are made to identify obvious hazards in surfacing, fixed and mobile equipment, moving parts, swings, ropes, chains, tyres, fences, sandpits
- a qualified person is employed to complete comprehensive inspections of outdoor equipment.
- records are kept of inspections and maintenance of furniture, playgrounds and equipment
- educators and staff are aware of their responsibility to identify hazards and potential risks, conduct safety checks of all equipment and furniture and abide by Work Health and Safety requirements
- mandatory Australian Safety Standards are always adhered to when
 - purchasing new equipment or furniture
 - installing equipment
- the equipment and furniture used in providing education and care at the Service is safe, clean and in good repair
- National Law and the Education and Care Services National Regulations and licensing requirements that relate to the safety of children at the Service are adhered to
- there is sufficient furniture and developmentally appropriate equipment so each child can take part in the educational program depending on their interests, ages and abilities
- educators are aware of appropriate instructions for use and supervision for all equipment and furniture
- furniture in the Service is securely built so it will not collapse, is easy to clean, and non-toxic.
- entrapment hazards are identified; it is easy for small fingers and limbs to get caught in gaps. Head and upper body entrapments can cause death by asphyxiation. (Be aware that fingers can get caught in holes or openings between 5-12mm, limbs in gaps between 30-50mm and heads in gaps over 85mm.)

- to implement recommendations from organisations, such as Kidsafe, on fall zones and suitable heights of furniture, equipment and playground equipment
- all equipment and furniture are kept in a clean and hygienic state, particularly before and after food service
- furniture and equipment do not contain any lead. This is most likely to occur with second-hand furniture
- the Regulatory Authority is notified of any serious incident involving serious injury or trauma to a child within 24 hours.

EDUCATORS WILL:

- provide effective supervision of children at all times to minimise the risk of accidents and injuries that could result from the furniture and equipment within the learning indoor and outdoor learning environment
- regularly check furniture and equipment for stability and wear and tear- (corners, surface- splinters, missing bike handle grips, faulty cleats in boards or ladders, heavy objects on climbing frames that destabilise the equipment)
- keep records of daily/weekly inspection of indoor/outdoor equipment
- keep an accurate record of any furniture or equipment that needs maintenance in the *Equipment and Maintenance Record* and ensure this is reported to management
- carefully consider all aspects regarding the use of furniture and equipment and how it suits the age and stage of the children's development
- ensure the furnishings and equipment within the program support and stimulate children's leisure and development
- reflect on common accidents and incidents in the learning environment and implement an action plan to ensure the safety of children and minimise accidents at the Vacation Care Service.
- provide a safe physical environment that allows children to play safely.
- remain up to date with health and safety changes within the early childhood sector by attending appropriate professional development.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Competition & Consumer Commission. (n.d.). Product safety Australia: Mandatory standards: <https://www.productsafety.gov.au/product-safety-laws/safety-standards-bans/mandatory-standards>

Australian Government Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020).

Kidsafe NSW Inc. Home and community safety information sheets: <https://www.kidsafensw.org/information-sheets/home-and-community-safety/>

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT POLICY REVIEW: DECEMBER 2021
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FURNITURE & EQUIPMENT SAFETY AUDIT

DATE:		EDUCATORS NAME:	
Vacation Care:			

AUDIT	YES/NO	ACTION PLAN
The furniture and equipment used in the indoor environment is safe and well maintained?		
The furniture and equipment used in the outdoor environment is safe and well maintained?		
Are indoor and outdoor safety checks conducted each day?		
Are educators aware of safety standards when setting up the environment?		
Do educators need training in appropriate use of furniture and equipment in the Vacation Care Service?		
Are there hazards regarding any safety issues?		
Is all furniture and equipment compliant with Australian Standards? Where is this evident?		

ARRIVAL AND DEPARTURE POLICY

Arrival and departure times are planned to promote a smooth transition between home and our Service for before and after school care, and vacation care. The opportunity to build secure, respectful and reciprocal relationships between children and families is promoted during arrival and departure times where educators have the opportunity to engage in conversations with families and support each child's well-being. To ensure the health and safety of children at our Service, our *Arrival and Departure Policy* is strictly adhered to, allowing only nominated authorised persons to collect children at any time throughout the day. The daily sign in and out register is not only a legally required document to record children's attendance as per National Law and Regulations but is also used as a record of the children on the premises should an emergency evacuation be required to be implemented.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
99	Children leaving the education and care service premises
157	Access for parents
158	Children's attendance record to be kept by approved provider
160	Child enrolment records to be kept by approved provider and family day care educator
173	Prescribed information to be displayed

176	Time to notify certain information to Regulatory Authority
177	Prescribed enrolment and other documents to be kept by approved provider
S162 (A)	Persons in day to day charge and nominated supervisors to have child protection training

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of Medication Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Control of Infectious Diseases Policy Coronavirus (COVID-19) Management Policy Emergency Evacuation Policy	Enrolment Policy Handwashing Policy Orientation of New Families Policy Privacy and Confidentiality Policy Sick Children Policy Termination of Enrolment Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure the protection and safety of all children, staff members, and families accessing the Service. Educators and Staff will only release children to an authorised person as named by the parent/guardian on the individual child's enrolment form.

SCOPE

This policy applies to children, families, staff, management, and visitors of the OSHC Service.

IMPLEMENTATION

Guidelines for delivery and collection of children are put in place to ensure the health, safety and wellbeing of each individual child.

As part of our Risk Management process, our Service *may* introduce explicit control measures to minimise the risk of spreading infectious diseases/viruses such as coronavirus (COVID-19). Our risk assessment may result in changes to our *Arrival and Departure Policy* and are based on mitigating risks following the recommendations made by the Australian Health Protection Principal Committee (AHPPC), Safe Work Australia and the Department of Health. Control measures and changes to policies are reviewed in consultation with staff members and communicated clearly to parents, families and visitors.

ARRIVAL AT SERVICE

Our Service has an obligation to ensure the health and safety of employees, children and visitors in our workplace, so far as reasonably practicable. Our Service has implemented the following measures:

- any person visiting our Service- including families 'dropping off' children, must sign a Parent/Visitor Health Declaration confirming that they have not
 - been in *close contact* with anyone with a positive COVID-19 diagnosis in the past 14 days
 - returned from a state or territory where self-isolation border measures are in place
- any person who is displaying symptoms such as: fever, coughing, sore throat, fatigue and shortness of breath should not attend our Service under any circumstance. (Any person displaying these symptoms should be tested for COVID-19 by visiting a free respiratory clinic or contacting their GP.)
- parents and visitors are currently NOT permitted to enter our Service unless this is prearranged with the Approved Provider/Nominate Supervisor (collection of a sick child; interview for enrolment)
- a designated area for drop off/ pick up will be clearly indicated
- signage clearly indicates the requirement of all adults to adhere to physical distancing requirements (1.5 metres)
- children will be pre-screened upon arrival by having their temperature taken by an infrared thermometer
- any child who has a temperature over 37.5°C will not be permitted entry to care (unless there is another logical explanation for their higher-than-normal temperature reading)
- children will be welcomed outside our Service by an educator and a non-contact device used to sign their child into the Service or parents are asked to bring their own pen to sign their child into the service
- the device will be disinfected between use
- all children need to be signed in by an authorised person. Note: the signing in of a child is verification of the accuracy of the record. Information required on the register includes the time and the signature of the person dropping off the child
- children are required to wash their hands upon arrival or use the hand sanitiser provided
- the parent/authorised nominee must also advise staff who will be collecting the child/children
- families will be reminded to sign their child/children into the Service and will be encouraged to do so immediately upon arrival to avoid forgetting.
- should families forget to sign their child/children in, National Regulations require the Nominated Supervisor to sign the child in
- sign in sheets are to be used as a record in the case of an emergency to account for all children

- children are to be sighted by an educator before the parent or person responsible for the child leaves. This ensures that the educator is aware that the child has arrived and is in the building.
- a child's medication needs, or any other important or relevant information should be passed on to one of the child's educators by the person delivering the child
- the educator will check that the family has completed an *Administration of Medication Record* and store the medication appropriately, away from children's reach
- in order for children to feel secure and safe, it is important that children and families are greeted upon arrival by a member of staff and have the chance to say goodbye to the person dropping them off
- a locker or shelf space will be made available to children and their families. A sign is posted above the lockers nominating a symbol for each child.
- in the case of a separated family, either biological parent is able to add a contact in writing unless a court order is provided to the Nominated Supervisor stating that one parent has sole custody and responsibility.

DELIVERY TO SCHOOL

Educators and staff will ensure:

- all children and adults wash their hands as per our *Handwashing Policy* prior to leaving the service
- children will be signed out of the OSHC Service and escorted to the designated before-school play area where the teacher on playground duty will be advised of their arrival
- social distancing requirements between adults will be adhered to
- all Kindergarten children and children with additional needs (as required) will then be escorted to their classroom and supported as required to put their bag away and prepare for the day (lunches, homework etc. in the designated place)
- children will not be escorted to school until a teacher is on playground duty

COLLECTION FROM SCHOOL

- an educator will collect all Kindergarten children and children with additional needs (as required) from their classroom and advise the classroom teacher/s that they have been collected, before escorting them to the Service and signing them in
- children in first to sixth grade will make their way to the designated collection point and be signed in by educators
- the educator/s collecting children from school classrooms will carry a mobile phone and a copy of the children's emergency contact details

- all children will be required to wash their hands upon arrival into the Service
- in the case of an emergency, where the parent or a previously authorised contact is unable to collect the child, the parent or person responsible for the child (as listed on enrolment form as having a parenting role) may telephone the service and arrange an alternative person to pick up the child. This contact must then be confirmed in writing to the Service.

ABSENT OR MISSING CHILDREN

- parents must advise Service staff as early as possible of their child/children's absence from school
- if a child has not arrived at the Service and the parent has not contacted the Service to advise of the child/children's absence **15 minutes** prior to children being escorted to school, an educator will contact the parent to clarify and confirm the situation
- if a child is collected from the school early due to illness or other reasons the parent must notify the Service, using the Service's telephone message bank if the Service is unattended
- if a child does not arrive at the Service at the expected time an educator will:
 - ask children in the school playground if they have seen the child or know where he/she is (phone parents to confirm if children say the child left school early)
 - ask the child's teacher and/or office staff if they know of the child's whereabouts
 - ring the child's parent/s to enquire if they know of their child's whereabouts
 - if parents believe the child should be at school, educators will search the school classrooms and premises with the assistance and permission of classroom teachers and any available authorised persons
 - the educator will immediately contact the school principal or delegate
 - if the child cannot be found during this search, the child must be considered missing.
 - *if the parents have been contacted and the child is subsequently found, the educator must immediately contact the parents to let them know.*

MISSING CHILDREN

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling **000**
- Contact the child's parents
- Contact the school to inform them of the missing child
- Ensure that other children waiting to be transported to the Service remain appropriately supervised
- Notify the regulatory authority within 24 hours of becoming aware of a serious incident

DEPARTURE FROM SERVICE

- consideration should be given for outdoor programs each afternoon to allow families to pick up children outside due to COVID-19 physical distancing requirements and hygiene procedures
- parents are to advise their child's educator if someone different is picking up their child, both verbally and on the sign in/out sheet. This person is to be named on the enrolment form or added in writing to Management as an authorised nominee for the child.
- photo identification must be sighted by a Primary Contact Educator before the child is released. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- all children must be signed out by their parent (or a person authorised by the parent-authorised nominee) when the child is collected from our Service. If the parent or other person forgets to sign the child out, they will be signed out by the Nominated Supervisor
- tablets used to sign children out of the service must be disinfected between use/ pens must be wiped with a disinfectant wipe between uses or parents are requested to use their own pen
- children must be signed out on the same sheet that they were signed in on
- educators must use hand sanitiser between child collections
- in the case of an emergency, where the parent or a previously authorised nominee is unable to collect the child, the parent or person responsible for the child (as listed on enrolment form as having a parenting role) may telephone the service and arrange an alternative person to pick up the child. This contact must then be confirmed in writing to the Service (email, text, or letter)
- parents are requested to arrive to collect their child/children by 6.00pm
- no child will be withheld from an authorised contact or biological parent named on the enrolment form unless a current court order is on file at the Service
- in the case of a particular person (including a biological parent) being denied access to a child, the service requires a written notice (court order) from a court of law.
 - educators will attempt to prevent that person from entering the service and taking the child; however, the safety of other children and educators must be considered
 - educators will not be expected to physically prevent any person from leaving the service
 - in such cases, the parent with custody will be contacted along with the local police and appropriate authorities
 - where possible the educator will provide police with the make, colour, and registration number of the vehicle being driven by the unauthorised person, and the direction of travel when they left the Service
 - a court order overrules any requests made by parents to adapt or make changes

- in the case of a serious incident occurring, as described above, the regulatory authority must be notified within 24 hours through the [NQA IT System](#)
- nominated supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow anyone **under the age of 16** to collect children.
- if the person collecting the child appears to be intoxicated or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
 - discuss their concerns with the person, without the child being present if possible, and
 - suggest they contact another parent or authorised nominee to collect the child
 - follow procedures to protect the safety of children and staff of the education and care service as per Child Protection Law and Child Protection Policy
 - contact the Police and other regulatory authorities (Child Protection Hotline 132 111)
 - if an authorisation to collect a child is refused by the Service, it is best practice to document the actions for evidence to authorities (refer to *Refusal of Authorisation Record*).
- at the end of each day educators will check indoor and outdoor premises including all rooms and storage rooms, beds and cots, and storage sheds to ensure that no child remains on the premises after the service closes
- children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy*.
- details of absences during the day will be recorded.

DELIVERY AND COLLECTION OF CHILDREN DURING VACATION CARE

During periods of Vacation Care, policies and procedures will be followed as per *Arrival at Service*, and *Departure from Service*.

VISITORS

- to ensure we can meet Work Health and Safety requirements and ensure a child safe environment, individuals visiting our Service must sign in when they arrive at the service and sign out when they leave. It is also a requirement of the National Regulations that Visitors are not left alone with children at any time.
- **to minimise the risk of exposure to COVID-19, our service may restrict the number of visitors to our service including students on work placements, volunteers, additional family members, delivery of goods or contractors**
- signage will clearly indicate who is permitted to enter the service

- signage will alert all adults to adhere to physical distancing requirements
- all visitors must adhere to our *Handwashing Policy* and wash their hands upon arrival and departure of the service

LATE COLLECTION OF CHILDREN

- if there are children still present at the Service upon closing, **it is best practice to ensure a minimum of two Educators are present remain until all children are collected.**
- instruction to parents; *“Please remember that our Educators have families to go home to and their own children to collect by a designated time. If you are late to collect your child two Educators have to stay behind and therefore both have to be paid overtime. To cover this, a late fee of **\$15 per 15 minutes or part thereof** will be charged (e.g. if you are **5 minutes** late you will be charged for a **15-minute block**. If you are **20 minutes** late you will be charged for **two 15-minute blocks**, etc.)”.*
- if parents/guardians know that they are going to be late, they must notify the Service. If possible, they should make arrangements for someone else to collect their child
- if they have not arrived by **6:00pm** the Service will attempt to contact them via phone. If parents/authorised persons are unable to be contacted the Nominated Supervisor will call alternative contacts as listed on the enrolment form to organise collection of the child
- due to licensing and insurance purposes, if by **6pm** neither the parent or any of the authorised contacts are available or contactable, the Service may need to contact the police and other relevant authorities
- if the child is taken to an alternative safe location for example: Police Station, a sign will be displayed at the Service notifying parents/guardian of the child’s whereabouts. If this occurs, the Service will be obligated to contact relevant Child Protection Agencies and notify the Regulatory Authority.
- where families are continually late to collect children, a *Late Collection of Children letter* will be presented to parents/guardians
- should this non-compliance continue, the service reserves the right to terminate a child’s enrolment.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education Skills and Employment. *My Time, Our Place. Framework for School Aged Care in Australia.* (2011).

Australian Government Department of Health *Australian Health Protection Principal Committee (AHPPC)* Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations.](#) (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020).

National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

Revised National Quality Standard. (2018).

Safe Work Australia (2020)

REVIEW

POLICY REVIEWED	JANUARY 2021	NEXT REVIEW DATE	JANUARY 2022
MODIFICATIONS	<ul style="list-style-type: none"> • review of policy regarding COVID-19 restrictions/guidelines for ECEC services- statements in red may be adjusted to suit individual services in each state/territory • sources checked for currency • minor editing 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JUNE 2020	<ul style="list-style-type: none"> • addition to introduction of policy • updated to include risk mitigation measures for arrival and departure due to COVID-19 • additional hygiene procedures added- re handwashing • additional related policies 	JANUARY 2021	
JANUARY 2020	<ul style="list-style-type: none"> • Additional relevant regulations added • Related policies updated • Late Collection information added and reworded • Sources checked for currency 	JANUARY 2021	
JANUARY 2019	<ul style="list-style-type: none"> • Introductory statement added • Additional information added to points. • Duplicated information deleted. • Rearranged the order of points for better flow • Points added (Highlighted). • Sources/references alphabetised. 	JANUARY 2020	
JANUARY 2018	<ul style="list-style-type: none"> • Minor changes made to support compliance • Related policy section added 	JANUARY 2019	

HAND WASHING POLICY

Having and encouraging good hygiene practices in Out of School Hours Care Services is essential for reducing the risk of infection. Helping children to develop appropriate personal hygiene habits will become embedded as they grow and develop. It is important to work with families to ensure children follow simple hygiene rules by incorporating good hygiene strategies in both the Service and home environment.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, Hygiene and safe food practices
88	Infectious diseases
93	Administration of medication
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
168	Education and care service must have policies and procedures

RELATED POLICIES

Administration of Medication Policy	Incident, Illness, Accident & Trauma Policy
Animal and Pet Policy	Pregnancy in Early Childhood Policy
Control of Infectious Disease Policy	Sick Children Policy
Coronavirus (COVID-19) Management Policy	Supervision Policy
Health & Safety Policy	Work Health and Safety Policy

PURPOSE

Our Vacation Care Service is committed to ensuring the health and safety of all educators, staff, volunteers, families, and children by providing a safe and healthy environment. Effective hand hygiene significantly reduces the risk of infection and is therefore of the utmost importance. We aim to implement specific hand washing hygiene practices regularly to minimise the risks associated with cross infection of viral and bacterial borne diseases.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Infection can be spread through direct physical contact between people, airborne droplets from coughing and sneezing or from contact with surfaces and objects. Children come into contact with a large number of other children and adults, play equipment, eating utensils and other resources whilst being cared for in Out of School Hours Care services. This high degree of physical contact with people and the environment creates a higher risk of children being exposed to and spreading infectious illnesses. Whilst it may not be possible for services to prevent the spread of all infections, we aim to create a hygienic environment to minimise the spread of diseases and infections.

Effective hand washing is a vital strategy in the prevention of spreading many infectious diseases.

Research emphasises effective and frequent handwashing as the single most important way to reduce the spread of bacteria, germs, viruses, and parasites that may infect educators, staff and children in school aged care services and in our general population.

Micro-organisms such as bacteria, germs, viruses, and parasites are present on the hands at all times and live in the oil that is naturally produced on your hands. The use of soap or detergent and water remove most of these organisms and decreases the risk of cross infection.

Our Vacation Care Service will adhere to National Regulation requirements, standards, and guidelines to support the effectiveness of our hand washing policy. We aim to educate and encourage children to wash their hands frequently and effectively which will help to reduce the incidence of infectious diseases, adhering to guidelines provided in *Staying healthy: Preventing infectious diseases in early childhood education and care services* and recommendations from the Department of Health- Australian Health Protection Principal Committee (AHPPC) to guide best practice.

To ensure the greatest level of personal hygiene our Vacation Care Service will ensure:

- all employees, parents, children and visitors wash their hands with soap and water for at least 20 seconds upon arrival to the Service or, use the alcohol-based sanitiser under adult supervision
- hands are thoroughly dried using hand towel and disposed of in the bin provided
- disposable tissues are used to wipe noses, eyes or mouths and disposed of in the bin provided immediately after use
- hands are washed following the use of tissues
- hands are washed thoroughly using soap and water before and after using the toilet
- signage is provided to prompt visitors and children to wash their hands regularly and effectively when visiting our Service.

The Nominated supervisor/Responsible person will ensure:

- all staff wash their hands with soap and water for at least 20 seconds regularly
- all staff wash their hands
 - before and after eating and handling food
 - before and after applying sunscreen or other lotions to children
 - after using the toilet
 - after blowing their own nose
 - after supervising children near toilet facilities
 - after touching animals
 - after cleaning high touch surfaces- (tables, light switches, door handles, computers, iPads)
 - after cleaning or mopping floors
 - after changing learning environments – outdoor play area, indoor learning
 - whenever their hands are visibly dirty (after gardening, painting)
 - before leaving the Vacation Care Service at the end of the day
- educators and staff adhere to effective food preparation and food handling procedures
- educators and staff wash hands before and after wearing disposable gloves when:

- preparing food
- administering medication
- administering first aid
- cleaning spills- faeces, vomit or blood
- cleaning with disinfectant or chemicals
- after handling garbage and/or contaminated materials

Educators will ensure:

- children are explicitly taught the correct process of hand washing
- children are carefully supervised when handwashing
- children are reminded to wash their hands frequently throughout the day
- they model effective handwashing procedures
- the required equipment and resources are easily accessible and appropriate to use- liquid soap, running water, paper towel

We believe the hygiene practices of children being cared for should be as rigorous as those of staff and educators. Our environment supports the creation of appropriate healthy hygiene habits to ensure lifelong healthy decisions and actions.

Strategies educators will use to encourage effective hand hygiene practices include:

- talking about the importance of hand hygiene
- talking about when hand washing is appropriate and why
- singing a song or rap as a guide to how long it should take to wash hands
- using a clear visual poster with step by step instructions
- using positive language
- ensuring equipment is accessible (liquid soap, hand towels)
- ensuring adequate supervision and assistance is available when required
- use STEM opportunities to teach about germs and prevention (ie: pepper and soap experiment)

Hand Drying

Effective hand drying is just as important as comprehensive hand washing. Research states that wet hands can pick up and transfer up to 1000 times more bacteria than dry hands. Drying hands thoroughly also helps remove any germs that may not have been rinsed off.

Our Vacation Care Service provides children, staff, and educators with disposable paper towel to ensure effective hand hygiene.

Hand washing procedure

Wet hands with clean, running water, turn off the tap.

Rub soap all over your hands

Rub hands together for as long as it takes to sing “Happy Birthday” twice

Don’t forget the backs of your hands, your wrists, between your fingers and under your fingernails

Rinse the soap off your hands under running water

Dry your hands using paper towel or under a hand dryer.

Alcohol-based hand sanitizer

Where possible, staff will use soap and water to clean their hands however, if this is not possible and hands are not greasy or visibly dirty, an alcohol-based hand sanitiser may be used.

Hand sanitiser must be kept out of reach of children at all times as it can be very dangerous if swallowed.

Directions should be followed on how to use the sanitiser correctly. The effectiveness of an alcohol-based hand sanitiser to kill microorganisms or prevent their growth should be at least 60% alcohol.

As per National Regulations, a safety data sheet will be kept on file for any alcohol-based hand sanitiser used in the Service.

Hand sanitizer procedure

Apply liquid to the palm of one hand

Rub it all over both hands until the sanitiser dries

This takes about 20 seconds

Be careful not to wipe the sanitizer off before it is dry.

Related information/Resources

Be a Soapy Hero! <https://www.betterhealth.vic.gov.au/campaigns/soapy-hero>

Child Care Centre Desktop- Handwashing posters

Department of Health [Good Hygiene is in your hands](#)

[Teaching washing your hands with pepper experiment](#)

SOURCE:

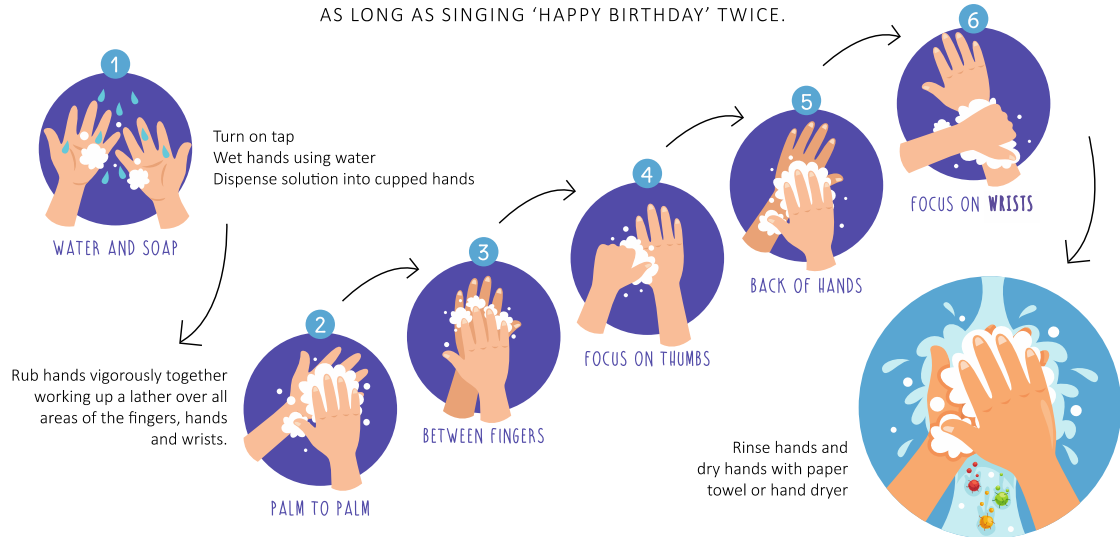
Australian Children’s Education & Care Quality Authority. (2014).
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 National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.
 Revised National Quality Standard. (2018).
 Safe Work Australia
 Victoria State Government Better Health Channel

REVIEW

POLICY REVIEWED: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER: 2021
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WASH YOUR HANDS

WASHING AND RINSING HANDS SHOULD TAKE ABOUT AS LONG AS SINGING 'HAPPY BIRTHDAY' TWICE.



Childcare Centre Desktop ©2019 – Hand Washing Procedure



Sanitise your hands on entry – Thank You.

HOW TO USE SANITISER CORRECTLY

Dispense 1-2 pumps, rub vigorously palm to palm, rub with interlocked fingers, rub palm over back of each hand, cover tips and bottoms of fingers to each palm, include thumbs, and wrists, rub until dry.



HEAD LICE POLICY

Head lice continue to cause concern and frustration for families, educators and children. Although head lice are not considered a health hazard, and do not spread disease, infestations can cause anxiety for all stakeholders. Head lice affect all socioeconomic groups and are not a sign of poor hygiene. They have no preference for ethnic background, hair colour, hair type or age. This policy is intended to outline roles, responsibilities and expectations of the Service to assist with early identification, treatment and control of head lice in a consistent and coordinated manner.

Whilst families have the primary responsibility for the detection and treatment of head lice our Service will work in a cooperative and collaborative manner to assist all families to manage head lice effectively.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
88	Infectious Diseases
168	Education and care service must have policies and procedures

RELATED POLICIES

Family Communication Policy Health and Safety Policy Privacy and Confidentiality Policy	Respect for Children Work Health and Safety Policy
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PURPOSE

To ensure parents, staff and educators are well informed about the early identification of head lice and managing infestations through effective treatment and communication with families.

OUR VACATION CARE SERVICE AIMS TO:

- outline the roles and responsibilities of families, educators and management who are involved in detection, treatment and control of head lice
- document effective treatment and management strategies and
- provide information and support for families.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

HEAD LICE

Pediculus Capitis or head lice are insects that live in hair and suck blood from the scalp, usually causing itching of the scalp. Female head lice lay their eggs and glue them to the base of hair shafts. The eggs are pale cream to yellowish brown in colour and hatch after 7–10 days. The immature lice grow into adults over 6–10 days and start biting the scalp to feed on blood. Adult lice mate, the females lay more eggs, and the cycle continues.

People get head lice from direct head to head contact with another person who has head lice. This can happen when people play, cuddle or work closely together. Head lice do not have wings or jumping legs so they cannot fly or jump from head to head. They can only crawl.

Head lice do not live or breed on animals, bedding, furniture, carpets, clothes or soft toys. They are rarely spread by sharing hats.

While head lice are not known to carry disease, they are a nuisance for parents and children. The social stigma associated with head lice infestation can affect children's comfort and confidence.

Head lice can be controlled through a consistent, systematic community approach.

FINDING HEAD LICE

Head lice do not necessarily cause an itch, and may be difficult to observe. Look for eggs by shining a strong light on the hair near the scalp, or by using the conditioner and combing technique. (See Treatment section below).

Head lice are found on the hair shaft itself and move to the scalp to feed. They can be brown or grey in colour. Head lice have six legs, which end in a claw, and they rarely fall from the head. Louse eggs (also called nits) are laid within 1.5cm of the scalp and are firmly attached to the hair. They resemble dandruff, but can't be brushed off.

IMPLEMENTATION

Responsibilities of Management, Nominated Supervisor, Responsible Person and Educators:

If one child at the Vacation Care Service has head lice, it is likely that several others also have them. To help prevent the spread of head lice, our Service will:

- remind parents to be vigilant in checking for head lice weekly
- confidentially notify the parent/caregiver of a child who is suspected of having live head lice and request that the child is treated before returning to the Service the following day
- keep families informed if there is someone at the Vacation Care Service with head lice, ensuring confidentiality is not breached by discloses the child's name who has head lice.
- reduce head-to-head contact between all children when the Service is aware that someone has head lice
- support parents and children who have head lice by providing factual information, reducing parental anxiety and not singling out individual children with head lice
- ensure that the child or children with head lice are not isolated or excluded from learning
- provide families with suggestions of effective treatment for head lice
- encourage parents to tie back children's hair when attending the Service
- record all cases confidentially so an outbreak can be avoided or minimised
- encourage children to learn about head lice so as to help them understand the issue and how to prevent further outbreaks- eg: avoid sharing hairbrushes and hats

RESPONSIBILITIES OF FAMILIES:

- Check your child's head once a week for head lice
- Notify the Service immediately if head lice are found on your child's head.
 - Ensure you check all members of your family if one person has head lice (there is no need to treat the whole family, unless they also have head lice)
- Ensure your child does not attend the Service with untreated head lice. If you find any live lice or eggs, begin treatment immediately and notify the Service if your child is affected so the Service can monitor the number of cases and act responsibly.
- Check for effectiveness of the treatment every 2 days until no live lice are found for 10 consecutive days. Remove eggs (nits) from your child's hair using the conditioner method and head lice comb.
- Once treatment has started, your child can attend the Service
- If your child has long hair, ensure this is tied back
- Families will only use safe and recommended practices to treat head lice.
- Families will maintain a sympathetic attitude and avoid defaming/blaming families who are experiencing difficulty with control measures.

TREATMENT

The two most common methods used for the treatment of head lice are the conditioner/combing technique and chemical treatments.

Conditioner and Combing Technique

Conditioner stuns lice and blocks their breathing pores. This, together with the slippery effect of the conditioner, makes it easier to mechanically remove the lice.

1. Untangle dry hair with an ordinary comb.
2. Apply hair conditioner to dry hair (white conditioner makes it easier to see the eggs). Use enough conditioner to cover the whole scalp and all the hair from roots to tips.
3. Use an ordinary comb to evenly distribute the conditioner, and divide the hair into four or more sections using hair clips.
4. Starting with a section at the back of the head, place the teeth of a head lice comb flat against the scalp. Comb the hair from the roots through to the tips.
5. Wipe the comb clean on a tissue after each stroke and check for head lice or eggs on the tissue.
6. Comb each section twice until you have combed the whole head. If the comb becomes clogged, use an old toothbrush, dental floss or a safety pin to remove the head lice or eggs.

7. Wash out the conditioner.
8. Clean the comb using hot soapy water and rinse off with hot water.
9. Repeat the conditioner and combing method after seven days to ensure that any immature head lice that have hatched are removed before they can lay more eggs.

Chemical treatments

There are four main categories of head lice products available in Australia which may include an active compound which kills head lice and some eggs (nits). Any head lice treatment product used should carry an Australian Registered (AUST R) number on the outer packaging indicating the product is accepted by the Therapeutic Goods Administration for supply in Australia. No treatment kills all eggs so the hair must be retreated after 7 to 10 days to kill any head lice that may have hatched or survived the first treatment.

There are many different chemical products available to use for children aged over six months- check with a pharmacist to help choose a product. No single chemical treatment will work for everyone and lice can develop resistance to the chemicals.

JURISDICTION SPECIFICATIONS FOR EACH STATE (DELETE NON-APPLICABLE STATES)

AUSTRALIAN CAPITAL TERRITORY (ACT)

- ACT Government
- <https://www.health.act.gov.au/media/232>

NEW SOUTH WALES (NSW)

- NSW Department of Education
- <https://education.nsw.gov.au/student-wellbeing/health-and-physical-care/health-care-procedures/conditions/head-lice>

NORTHERN TERRITORY (NT)

- Northern Territory Health
- <https://nt.gov.au/wellbeing/health-conditions-treatments/parasites/head-lice>

QUEENSLAND (QLD)

- Education Queensland
- <https://education.qld.gov.au/students/student-health-safety-wellbeing/student-health/head-lice>

TASMANIA (TAS)

- Department of Education Tasmania
- <https://documentcentre.education.tas.gov.au/Documents/Infosheet-Health-Headlice.pdf>

VICTORIA (VIC)

- Victoria State Govt. Health Vic.
- <https://www2.health.vic.gov.au/public-health/infectious-diseases/head-lice>

WESTERN AUSTRALIA (WA)

- Department of Health WA
- http://healthywa.wa.gov.au/Articles/F_1/Head-lice

SOUTH AUSTRALIA (SA)

- South Australia Department of Health
- <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/public+health/public+health+pest+management/head+lice%2c+management+guidelines+for+schools>

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Better Health Channel. (2019). Head lice (nits) [Fact Sheet].

<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/head-lice-nits?viewAsPdf=true>

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2017).

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Privacy Act 1988.

Revised National Quality Standard. (2018).

SA Health. (2019). Head lice, management guidelines for schools:

United Nations Convention on the Rights of the Child

REVIEW

POLICY REVIEWED: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER 2021
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HEALTH AND SAFETY POLICY

Our Vacation Care Service has a responsibility of providing a healthy and safe environment for children so that they can explore, discover and learn. We are committed to maintaining a safe and healthy environment through comprehensive policies and procedures and managing risks and hazards appropriately and effectively.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
82	Tobacco, drug and alcohol-free environment

86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises
102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing and security
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements—indoor
108	Space requirements—outdoor space
109	Toilet and hygiene facilities
110	Ventilation and natural light
111	Administrative space
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision
156	Relationships in groups
158	Children’s attendance records to be kept by approved provider
168	Policies and procedures are required in relation to enrolment and orientation
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of Medication Policy Arrival and Departure Policy Child Protection Policy Clothing Policy Control of Infectious Diseases Policy Emergency Evacuation Policy Governance Policy Hand Washing Policy Incident, Illness, Accident and Trauma Policy	Orientation of New Families Policy Physical Environment Policy Safe Storage of Hazardous Chemicals Policy Sick Children Policy Supervision Policy Sun Safety Policy Transportation Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

We aim to protect the health, safety and welfare of the children attending the Vacation Care Service by complying with current health and safety laws and legislation.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

New work health and safety (WHS) laws have commenced in the following States and Territories, using consistent WHS legislation instead of previous OH&S laws:

- Commonwealth
- Australian Capital Territory
- New South Wales
- Northern Territory
- Queensland
- Tasmania
- South Australia

Victoria and Western Australia are yet to develop new legislation to reflect WHS terminology.

(Victoria- Occupational Health and Safety Regulations, 2017

Western Australia- Occupational Safety and Health Act and Regulations)

The National Quality Framework establishes the standards and learning frameworks to provide high quality inclusive education and care in early and middle childhood settings, which can only occur in a safe and healthy work environment. The NQF makes few references to work, health and safety legislation as it underpins this framework. *Quality Area 2.... reinforces children’s right to experience quality education and care in an environment that provides for their health and safety.”* p: 138, 2020.

Thorough work health and safety policies, procedures and practices ensure that:

- coordinators and Nominated supervisors fulfil their responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees;
- employees meet their health and safety obligations and are safe in the workplace; and
- the work environment supports quality education and care.

We are dedicated to ensuring that all health and safety needs are met through the implementation of a high standard of hygiene practices to control the spread of infectious diseases, the prevention and management of injuries and illness, and to provide a safe and secure physical environment for children. In any occurrences where children show any signs of illness, accident, injury or trauma, educators will refer to the *Incident, Illness, Accident and Trauma Policy*.

The importance of children’s nutritional and physical health needs will be promoted by educating children about a healthy lifestyle which will be reinforced through the everyday routine and experiences. Information on health, hygiene, safe food, and dental care principles and practices will be displayed at the Service to provide families with further information.

We believe in quality education and care in an environment that provides for all children’s protection through adequate supervision, safe experiences and environments, and vigilance to potential risks. Educators at the Service are dedicated to understanding their legal and ethical responsibility to protect the children enrolled at the Service.

Our *Work Health and Safety Policy* provides further detail about Hazard Reduction and Risk Minimisation.

CHOOSING APPROPRIATE RESOURCES AND EQUIPMENT

- The Approved Provider will be ultimately responsible for any purchases of equipment.
- Educators will document any equipment that needs maintenance on a prioritised basis in the maintenance register.
- Resources and equipment will be chosen to reflect the cultural diversity of the Service’s community and the cultural diversity of contemporary Australia.
- The Service will actively pursue the contribution of families regarding toys and equipment at the service.
- All new equipment will be checked against Australian Safety Standards.
- Children will be introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Equipment that should only be used under supervision will be stored in a safe place out of children’s reach.
- The use of pools and toys or equipment, which involves the use of water, will be used under the direct supervision of educators. All equipment will be emptied of water when not in use, and stored in such a manner that it cannot collect water.
- Equipment will be checked regularly by the educators to ensure it is in a clean and safe condition which will be recorded on the appropriate indoor and outdoor safety checklist.
- The Approved Provider will advise educators and parents about the purchase of new equipment and ensure a risk assessment has been conducted if required.

THE CHILDREN'S LEARNING ENVIRONMENT

- The Service will keep a record of any changes that is made to the physical environment of the Service, such as rearranging of rooms etc. to show continuous improvement.
- The Service will document the links between the arrangements and choice of resources and equipment and the children's learning in the program.

ON-GOING MAINTENANCE

- The Service will reflect on the environment and establish a plan ensuring that the environment continuously complies with our philosophy of providing a safe and secure environment, that is stimulating and engaging for all who interact with it.
- The Approved Provider/Nominated Supervisor will also ensure that the Service and its grounds comply with Local Government regulations, and regulations regarding fire protection, ventilation, natural and artificial lighting.
- Should the Service undertake major renovations, management plans will be put in place to ensure that the safety of educators, children, families and others at the service is not compromised.

SAFETY CHECKS

Prior to children arriving at the Vacation Care, a daily inspection of the premises will be undertaken which will include the:

- Service Perimeters
- Fences/Fence Line
- Buildings
- All rooms accessible by children
- Fixed equipment

This must be done in order to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals.

In the event of a sharp object being found (for example a syringe) educators will wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council.

Similarly, trees in the grounds must be checked regularly for overhanging, dead or dangerous looking branches as well as checked for any infestations or nests.

The Service will have regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any findings from the pest control check will be carried out in line with the recommendation of the pest control company.

The *Indoor and Outdoor Daily Safety Checklists* will be used as the procedure to conduct these safety checks. A record of these will be kept by the Service. Any required maintenance will immediately be reported to the Approved Provider/Nominated Supervisor who will make the appropriate arrangements to have repairs carried out.

The following can be used as a guideline to produce Checklists for the service's individual needs.

CHECKLIST: OUTDOORS

- Building maintenance** – regularly maintain and check for hazards, check building is in a safe, clean and hygienic condition. Records of any damages and subsequent repairs are kept.
- Doors** –have finger jam protectors.
- Fences**- securely and effectively fence all sides of outdoor play areas from roads, water hazards, and driveways and are of appropriate height. *Childproof self-locking devices are installed on gates.*
- Maintain fences to ensure they have correct height. *Note: Fencing regulations do not apply to services that only care for school-age children.*
- Garbage** – safe and prompt disposal. Use lidded secure bins that prevent child access and maintain in a clean and safe condition. Encourage recycling.
- Garden** and renovation debris removed. Regularly trim branches and bushes.
- Garages and sheds** - keep locked.
- Heating, cooling, ventilation, lighting** – comfortable, safe, maintained, guarded and are kept out of reach of children.
- Non-slip** stairs, steps, and ground surfaces.
- Renovation** dangers e.g. lead, asbestos, holes and excavations – reduce risks.
- Pesticide** residue - dangerous chemicals should not be used to remove vermin.
- Safety glass** is installed according to the Australian Standards on all glass doors and windows accessible to children, and safety decals on both sliding doors and plate glass doors at child and adult eye level.
- Security** - minimising unauthorised access with appropriate fencing and locks.
- Under Service access** (including buildings on stilts and footings) – lock or block access.
- Window fly screens** securely fitted, maintained and permanent.

- ❑ **Hazards and driveways.** Maintain fences, have correct height (as applicable in the regulations), install childproof self- locking devices on gates.
- ❑ **Bikes and wheeled toys** – it is recommended that correctly fitted helmets be worn every time children use ‘bikes’ and wheeled toys.
- ❑ **Centre car park** – ensure family members are aware of pedestrian safety rules such as holding their child’s hand and alighting children from the safety door. Encourage families to always supervise their children in the car park to prevent accidents and injuries, which could occur as a result of reversing vehicles.
- ❑ **Finger entrapment** – all holes or openings in playground equipment must be between 8-25 mm.
- ❑ **First aid kit is approved**, maintained, and accessible throughout outdoor play.
- ❑ **Hazardous Plants** – identify and remove or make inaccessible to children.
- ❑ **Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tools or machinery are stored securely and are inaccessible to children.
- ❑ **Pet and animal droppings cleared** or inaccessible to children in outdoor areas, exclude dogs from children’s play areas, finger proof pet enclosures, supervise pet interactions with children.
- ❑ **Pool safety, fencing and gate** compliance, paddling pools emptied immediately after use, turn upside down, disinfected if soiled.
- ❑ **Safe play rules and adequate safe play areas** - talk with children about how to play safely. Maintain safe layouts for outdoor play areas to avoid collisions between children.
- ❑ **Sandpits** - cover when not in use, regularly clean, rake, and remove sand soiled by faeces or blood. Hose sandpits at end of day after removing contaminated sand and material.
- ❑ **Soft fall** - appropriate ground cover under outdoor climbing and play equipment, meets standards.
- ❑ **Sun protection clothing, hats, and sunscreen, for unshaded areas** - minimise play at peak sun exposure times. Install a sunshade over sandpits and play areas.
- ❑ **Ensure children are visible and supervised at all times.** High-risk areas and climbing and other outdoor play equipment. Make hazardous equipment, machinery, chemicals, and any other materials inaccessible to children.
- ❑ **Water hazards** are supervised directly at all times
- ❑ **Water troughs** or containers will only be filled to a safe level and emptied immediately after use. Water troughs are supervised at all times.
- ❑ **Play equipment** that is higher than 50cm must have soft fall installed underneath at least 25cm in depth under and 1.9m from the perimeter of the equipment. Place outdoor play equipment away from paths and solid garden edging.

- Surfacing** used underneath and around equipment complies with Australian and New Zealand Standards AS/NZS 4422, 1996, and is maintained regularly; materials may need to be raked, redistributed and checked weekly for spiders, sharp objects or animal litter.

CHECKLIST: INDOORS

- Access for children and adults with disability** - ensure safe access into, within and out of the Service, security, toilet and washing facilities, and check for hazards for wheelchairs and people with impaired sight, hearing or mobility.
- Children at risk** – maintain extra security and supervision for children at special risk.
- Decorations and children’s artwork** – do not place near ceiling fans, air conditioners or heaters. Avoid use of tacks, pins, and staples.
- Emergency evacuation** – develop an evacuation plan and emergency contact numbers display, inform families, and practice evacuation procedures. Ensure exit pathways are kept clear at all times.
- Fire** – fire blanket, extinguisher, fire exits, smoke detectors, electrical safety switch are easily accessible and regularly serviced.
- First aid kit** with approved contents is maintained and accessible. Ensure First Aid certificates are current for relevant educators.
- Furniture** - stable, maintained and meets Australian safety standards.
- Guard and make inaccessible to children:** heaters, coolers, fireplaces, stoves, microwaves, power points, and office equipment.
- Hazardous indoor and outdoor plants** identify, remove or make inaccessible to children.
- Heaters** – ensure that children cannot come in contact with hot surfaces. It is preferable to use heating where combustion products are ducted outside. If gas heating is used ensure there is adequate ventilation while the heater is operating.
- Hot water** - ensure the hot water supply is regulated so as to keep it below the temperature at which a child can be scalded (the current KidSafe recommendation is below 45°C).
- Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tool or machinery are stored securely and are inaccessible to children.
- Noise** – reduce excessive exposure.
- Non-slip, non-porous** floors, stairs.
- Spills** – clean away as they occur.
- Pets and animals** – inform families of pets being kept on premises and plans to obtain new pets. Ensure pets are vaccinated, wormed, don’t have fleas, and are clean, and healthy. Keep pet

accessories such as pet food, litter boxes, pet toys away from children. Exclude dogs from children's play areas. Keep children-pet interactions minimal and supervise interaction times.

- Record details** and notify parents of any child accident.
- Safe play rules and adequate play spaces:** discourage running indoors and safe furniture layout to avoid collisions.
- Safety glass used and installed** according to Australian Standards, and Australian Building Codes on all glass doors and windows accessible to children, safety decals on sliding doors and plate glass doors at child and adult eye level.
- Security** – ensure all entry doors are locked at all times and place bells on doors.
- Smoke and drug free environment** in all areas at all times
- Educators personal items** – ensure educator's personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children.
- Stairways**, ramps, corridors, hallway, external balcony must be enclosed to prevent a child falling.
- Store in locked cabinet** any unsafe items, e.g. chemicals, medicines, razors, knives and electrical equipment.
- Supervision and visibility of children** – ensure children are visible and supervised at all times.
- Toys** – meet safety standards, age appropriate, maintained, and non-toxic.

CLEANING OF BUILDINGS, PREMISES, FURNITURE AND EQUIPMENT

GENERAL CLEANING

- The Service will use structured cleaning schedules to ensure that all cleaning is carried out regularly and thoroughly.
- To minimise our staff and children's exposure to infectious diseases or viruses such as coronavirus (COVID-19) our Service will adhere to all recommended guidelines from the Australian Health Protection Principal Committee (AHPPC) and the National Health and Medical Research Council (NHMRC)
- high touch surfaces will be cleaned and disinfected at least twice daily
- cleaning contractors will hygienically clean the Service to ensure risk of contamination is removed as per [Environmental Cleaning and Disinfection Principles for COVID-19](#)
- Educators will clean the Service at the end of each day and throughout the day as needed
- Accidents and spills will be cleaned up as quickly as possible to ensure that the Service always maintains a high level of cleanliness, hygiene, and safety.

When purchasing, storing and/or using any dangerous chemicals, substances, medicines or equipment, our Service will:

- adhere at all times to manufacturer's advice and instructions when using products to clean furniture and equipment at the Service
- store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times.
- ensure any substance found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where appropriate will not be used under any circumstances.
- ensure containers should be disposed of correctly following local council guidelines, and not reused under any circumstances.
- ensure all dangerous chemicals, substances and equipment is stored in a locked place or facility which is labelled, secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges and toiletries.
- follow the instructions of manufacturers, particularly of any product which may need to be stored in a refrigerated environment.
- refrigerate any substance that must be stored in a labelled, child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children
- ensure all hazardous chemicals must be supplied with a Safety Data Sheet (SDS) formerly called a Material Data Safety Sheet. Our Service will adhere to the manufacturer's instructions for use, storage, and first aid instructions recorded on the SDS
- ensure there is a register of all hazardous chemicals, substances and equipment used at the Service. Information recorded should include where they are stored, their use, any risks, and first aid instructions and the current SDS. The register will be readily accessible.
- ensure appropriate personal protective clothing should be worn in accordance to the manufacturer's instructions when using and disposing of hazardous substances or equipment
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on 13 11 26, or call an Ambulance on 000.
- ensure emergency medical and first aid procedures are carried out, with relevant notification given to the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.

- o In any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard, call the emergency services, dial 000 and notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- o the Poison Safety Checklist will be used in order to ensure we are consistently meeting requirements.

HAND WASHING

Effective handwashing is the best way to prevent the transmission of infectious diseases. Our Service will ensure [signs and posters](#) remind employees and visitors of the importance of handwashing to help stop the spread of COVID-19 and other infectious diseases. Adults and children should wash their hands thoroughly with soap and water and/or alcohol-based sanitiser:

- upon arrival at the Service
- when hands are visibly dirty
- when coming inside from being outside
- before eating
- before putting on disposable gloves
- before preparing food items
- after touching raw meats such as chicken or beef
- before and after toileting children and coming into contact with any body fluids such as blood, urine or vomit
- after touching animals or pets
- after blowing your nose or sneezing and after assisting a child to blow their nose
- after meals
- after going to the toilet
- before and after administering first aid
- before and after administering medication
- after removing protective gloves
- after using any chemical or cleaning fluid

MINIMISING POTENTIALLY DANGEROUS SUBSTANCES

Our Vacation Care Service minimises the use of potentially dangerous substances. Ordinary detergents will be used to help remove dirt from surfaces. Colour-coded sponges (e.g. green for the kitchen, red for the bathroom) will be used in order to eliminate cross contamination. Different rubber gloves will also be

used in each room then hung out to air-dry. Before returning to the children educators will wash and dry hands.

DISINFECTANTS

Disinfectants are usually unnecessary as very few germs can survive exposure to fresh air and natural light. In an outbreak situation, such as gastroenteritis or other infectious virus (COVID-19), the Public Health Unit or SafeWork Australia, may specify the use of a particular disinfectant and increased frequency of cleaning. In this situation, for the disinfectant to work effectively, there still needs to be thorough cleaning using a detergent beforehand.

Essentially, there is no ideal disinfectant. Disinfectants cannot kill germs if the surface is not clean. It is more important to ensure that surfaces have been cleaned with detergent and warm water than to use a disinfectant.

In the event of an outbreak of gastroenteritis, a disinfectant such as bleach solution may be used following the manufacturer's directions- eg: White King Bleach (sodium hypochlorite 42g/L) diluted part bleach (25mL) in 40 parts water (1L) to make 0.1% solution Gloves must be worn at all times when handling and preparing bleach.

To kill germs, any disinfectant needs:

- A clean surface to be able to penetrate the germ.
- To be able to act against those particular germs.
- To be of the right concentrate.
- Enough time to kill the germs, which is generally at least 10 minutes.

DETERGENTS

To work in accordance with *Staying healthy: Preventing infectious diseases in early childhood education and care services*, proper cleaning with detergent and warm water, followed by rinsing and air-drying kills most germs from surfaces as they are unable to multiply in a clean environment. Cleaning equipment should be stored and taken care of so it can dry between uses and not allow germs to multiply.

ARRANGEMENTS FOR LAUNDERING OF SOILED ITEMS

Soiled clothing will be returned to a child's home for laundering. Educators will remove soiled content prior to placing clothing into a plastic bag and securely storing these items in a sealed container, not placed in the child's bag.

CLOTHING

- Educators clothing should be washed daily.
- Educators should also have a change of clothes available in case of accidents.
- Dress-up and play clothes should be washed once a week.

EQUIPMENT AND TOY CLEANING

Educators are required to clean the children's equipment and toys on a regular basis in order to minimise cross contamination and the spread of illnesses. Educators will wash a toy or piece of equipment immediately if it has been sneezed on and/or soiled or if it has been discarded after play by a child who has been unwell. The Service will have washable toys for the younger children. Toys and equipment must be cleaned more often in the event of an infectious disease or virus is present in the service or community- (COVID-19)

Educators will be required to keep a cleaning register documenting when toys and equipment have been cleaned.

RECOMMENDED CLEANING MATERIALS:

- Most toys can be washed with normal dishwashing liquid and rinsed with clean water.
- Get into corners with a toothbrush and allow to air dry (if possible, in the natural sunlight).
- Leaving items such as LEGO and construction blocks to drain on a clean tea-towel overnight is ideal.

PLAY DOUGH

Our Vacation Care Service will reduce the risk of the spread of disease when playing with play dough by:

- encouraging hand washing before and after using play dough
- storing the play dough in a sealed container in the refrigerator between uses
- making a new batch of play dough each week, and
- if there is an outbreak of vomiting and/or diarrhoea, discarding the playdough at the end of each day during the outbreak.

PUZZLES AND GAMES

- Wooden puzzles – wipe over with a damp cloth- do not immerse in water as this can destroy the equipment.
- Cardboard should be wiped over with a slightly damp cloth.

SUN PROTECTION

Our Vacation care Service will work in compliance with the NSW SunSmart Program to ensure children’s health and safety is maintained at all times whilst at the Vacation Care Service. SunSmart recommends that all early childhood education and care services have a SunSmart Policy to reduce UV damage to those in care, including Educators.



1. OUTDOOR ACTIVITIES

Sun protection is required when UV levels reach level 3 or above. Our Vacation Care Service will monitor UV levels daily through one of the following methods:

- using smart phone SunSmart app
- viewing Bureau of Meteorology website www.bom.gov.au

visiting www.myuv.com.au

The Vacation Care Service will use a combination of sun protection measures whenever **UV Index levels reach 3 and above.**

- Care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.
- Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.
- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions and incursions.

2. SHADE

The Service will provide and maintain adequate shade for outdoor play. Shade options can include a combination of portable, natural and built shade. Regular shade assessments should be conducted to monitor existing shade structures and assist in planning for additional shade.

3. HATS

Educators and children are required to wear sun safe hats that protect their face, neck and ears. A sun safe hat is:

- legionnaire hat
- bucket hat with a deep crown and brim size of at least 5cm (adults 6cm)
- broad brimmed hat with a brim size of at least 6cm (adults 7.5cm)
- approved school hat from the child's school.

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not recommended. Children without a sun safe hat will be asked to play in an area protected from the sun (e.g. under shade, veranda or indoors) or can be provided with a spare hat.

4. CLOTHING

When outdoors, educators and children who are not wearing school uniforms will wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- Loose fitting shirts and dresses with sleeves and collars or covered neckline.
- Longer style skirts, shorts and trousers.
- Children who are not wearing sun safe clothing can be provided with spare clothing.

Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended.

5. SUNSCREEN

As per Cancer Council Australia recommendations: All educators and children will apply SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours (during vacation care). Sunscreen is stored in a cool, dry place and the use-by-date monitored.

6. ROLE MODELLING

Educators will act as role models and demonstrate sun safe behaviour by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- wearing sunglasses that meet the Australian Standard 1067 (optional)

Families and visitors are encouraged to role model positive sun safe behaviour.

DELIVERY AND COLLECTION OF CHILDREN

The following procedure must be adhered to at all times to ensure the safety of the children.

ARRIVAL

- All children must be signed in by their parent or person who delivers the child to our Service.
- An educator is to check the sign in sheet ensuring families have signed their child in. If families have not signed the child in, the nominated supervisor will sign the child in, complying with Regulation 158.
- An educator will greet and receive each child to ensure the child is cared for at all times.

MISSING CHILDREN:

If a child is considered missing, an educator or staff member will:

- Contact the police by dialling **000**.
- Contact the child's parents.
- Ensure that other children remain appropriately supervised.

DEPARTURE FROM SERVICE:

- All children must be signed out by their parent or person who collects the child from our Vacation Care Service. If the parent or other person forgets to sign the child out, they will be signed out by the nominated supervisor or an educator.
- Children can only be collected by a parent, an authorised nominee named on their enrolment record, or a person authorised by a parent or authorised nominee to collect the child. Children may leave the premises if a parent or authorised nominee provides written authorisation for the child to leave the premises.
- Photo identification must be sighted by a Primary Contact Educator before the child is released. If educators cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.
- Children will not be released into the care of a person not authorised to collect the child e.g. court orders concerning custody and access. If an unauthorised person is not willing to leave the premises without the child the educator will call the police.
- Nominated Supervisors will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow anyone **under the age of 16** to collect children.

- No child will be released into the care of anyone not known to educators. Parents must give prior notice where:
 - the person collecting the child is someone other than those mentioned on the enrolment form (e.g. in an emergency) or
 - there is a variation in the persons picking up the child, including where the child is collected by an authorised nominee who is unknown to educators.
- If educators do not know the person by appearance, the person must be able to produce some photo identification. If educators cannot verify the person's identity, they may be unable to release the child into that person's care.
- If the person collecting the child appears to be intoxicated, or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
 - discuss their concerns with the person, if possible, without the child being present
 - suggest they contact another parent or authorised nominee to collect the child.
 - if the person insists on taking the child, Educators will inform the police of the circumstances, the person's name and vehicle registration number.
 - Educators cannot prevent an incapacitated parent from collecting a child but must consider their obligations under the relevant child protection laws.
- At the end of each day educators will check the premises including outdoors and indoors to ensure that no child remains on the premises after the Vacation Care Service closes.
- Children may leave the premises in the event of an emergency, including medical emergencies as outlined in our *Emergency Evacuation Policy*.
- Details of absences during the day will be recorded.

DELIVERY AND COLLECTION OF CHILDREN DURING VACATION CARE

During periods of vacation care, policies and procedures will be followed as per *Arrival at Service*, and *Departure from Service*.

VISITORS

To ensure we can meet Work Health and Safety requirements and ensure the safety of our children, individuals visiting our Vacation Care Service must sign in when they arrive at the Service and sign out when they leave. Refer to our *Arrival and Departure Policy* and procedure for more detailed information.

WATER SAFETY

Regulations state that services in **New South Wales** are not permitted to have pools unless they existed on the premises before 6 November 1996.

However, to stop accidents and illnesses relating to swimming pools, wading pools, water troughs and other water situations our Vacation Care Service will:

- remove any items or objects that could be used to climb into the fenced area of a pool, trough, or water storage unit e.g. chairs, bins, bikes, any overhanging trees
- make sure no child swims in any water without:
 - written permission from family member to learn water safety and swimming
 - appropriate educators/child ratios in place
 - having sufficient numbers of educators present who have first aid or recognised water safety and rescue procedures.
- at all times children near water are closely supervised. A child will never be left unattended near any water
- ensure that all water containers are made inaccessible to children and also make sure children's play areas are safely fenced off from water hazards such as rivers, dams, creeks, lakes, irrigation channels, wells etc.
- immediately empty all wading pools/water troughs etc. after every use, storage should prevent the collection of water e.g. upright/inverted, also check grounds after rain or watering and empty water that has collected in holes or containers
- Ensure wading/water trough are hygienically cleaned, disinfected and chlorinated appropriately:
 - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant
 - wash away disinfectant before filling trough

KITCHENS

- Children must not gain access to any harmful substance, equipment or amenity.
- The kitchen door remains locked at all times to prevent unsupervised entry by younger children into the kitchen.

MONITORING AND REVIEWING HAZARDS

Risk management is an ongoing process. Risks must be systematically monitored, and management strategies reviewed to ensure that they continue to be effective and contribute to a safe and healthy

work environment. New hazards can emerge over time resulting in control strategies becoming ineffective and therefore may require updating.

Hazard identification, Risk Management and Hazard Reduction is specifically addressed within our *Work Health and Safety Policy*.

BACK CARE AND MANUAL HANDLING

- Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.
- Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee.
- Manual handling injuries also include overuse injuries or, as a result of falling during manual handling, bruising or laceration.

(See our *Work Health and Safety Policy* for further information and recommendations for back care and manual handling).

FURTHER RESOURCES

ACT: WorkSafe ACT provides information for work health and safety
<https://www.accesscannberra.act.gov.au/app/home/workhealthandsafety>

Northern Territory: NTWorkSafe assists businesses and workers understand their obligations under work health and safety. <https://worksafe.nt.gov.au/home>

NSW: SafeWork NSW administers the Work Health and Safety legislation, and has several codes of practice on specific work safety issues which are available online at <https://www.safework.nsw.gov.au/>

Queensland: Workplace Health and Safety Queensland oversees the Queensland Work Health and Safety Act 2011 <https://www.worksafe.qld.gov.au/>

South Australia: SafeWork SA provides work health and safety services across South Australia
<https://www.safework.sa.gov.au/>

Tasmania: WorkSafe Tasmania is the state's health and safety regulator:
<https://worksafe.tas.gov.au/home>

Victoria: WorkSafe Victoria is the state's health and safety regulator see:
<https://www.worksafe.vic.gov.au/early-childhood-education-and-care-safety-basics>

Western Australia: WorkSafe Western Australia regulates and promotes occupational safety and health regulations in the workplace <https://www.commerce.wa.gov.au/worksafe>

For further information see: <https://www.safeworkaustralia.gov.au/>

[Australian Government Department of Health Australian Health Protection Principal Committee \(AHPPC\) Children in early childhood and learning centres](#)

SOURCE:

Australian Children’s Education & Care Quality Authority. (2014).

Cancer Council NSW. Early childhood and care sun protection policy: <http://www.sunsmartnsw.com.au/wp-content/uploads/2015/11/Childcare-policy1.pdf>

Cancer Council SunSmart <https://www.sunsmart.com.au/communities/early-childhood-schools/resources-schools-early-childhood/early-childhood-resources/family-notice-info-sheets-ec>

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020)

KidSafe Australia: <https://kidsafe.com.au>

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

Revised National Quality Standard. (2018).

Standards Australia. AS 1851-2005 (incorporating Amendment No. 1). Maintenance of fire protection systems and equipment: [https://www.saiglobal.com/PDFTemp/Previews/OSH/as/as1000/1800/1851-2005\(+A1\).pdf](https://www.saiglobal.com/PDFTemp/Previews/OSH/as/as1000/1800/1851-2005(+A1).pdf)

Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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IMMUNISATION POLICY

When groups of children are together, illness and disease can spread rapidly. Preventable diseases such as measles and whooping cough can have serious health consequences for children, and especially young children. Staff members who work in school aged care services are also at increased risk of contracting certain infectious illnesses due to the close proximity of working with children. Immunisation is therefore an important health measure and an effective way of protecting children and adults from harmful diseases by reducing the spread of disease.

(Australian Government Department of Education, Skills and Employment, 2020)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
88	Infectious diseases
90	Medical conditions policy
162	Health information to be kept in enrolment record

MY TIME, OUR PLACE: FRAMEWORK FOR SCHOOL AGE CARE IN AUSTRALIA

3.2	Children take increasing responsibility to for their own health and physical wellbeing
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RELATED POLICIES

Enrolment Policy Family Communication Policy Orientation of New Families Policy Record Keeping and Retention Policy	Incident, Injury, Trauma and Illness Policy Infectious Disease Policy Work Health and Safety Policy
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PURPOSE

The purpose of this policy is to provide information to manage and prevent the spread of infectious illnesses and diseases. Our Vacation Care Service has a duty of care to ensure that all children, families, and educators are protected from infectious diseases whilst at the Service. Along with maintaining a clean and hygienic environment, this also includes notifying families and educators when an excludable illness or disease is present in the Vacation Care Service, maintaining a record of children’s and educators’ immunisation status, complying with relevant health department exclusion guidelines, and increasing educators’ awareness of cross-infection.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacarion Service.

IMPLEMENTATION

Immunisation is a reliable way to prevent many childhood diseases. Immunisation works by giving the person a vaccine (weakened or killed disease-causing bacteria or virus), against a particular disease. This makes the person’s immune system respond in a similar way to how it would respond if they actually had the disease, but with less severe, or possibly no symptoms. The vaccine therefore leads to the creation of antibodies that provide future protection if the person comes into contact with the disease.

Immunisation also protects other people who are not immunised, such as children who are too young to be immunised, or people whose immune systems did not respond to the vaccine. This is because the more people who are immunised against a disease, the lower the chance that a person will ever come into contact with someone who has the disease. The chance of an infection spreading in a community

therefore decreases if a large proportion of people are immunised, because the immune people will not become infected and can protect the vulnerable people; this is known as 'herd immunity'.

Enrolment in an early education and care service requires parents to provide an *Immunisation History Statement* as recorded on the Australian Immunisation Register (AIR) to prove that their child is up to date with their scheduled vaccinations. This documentation also is required to be updated as per the childhood immunisation schedule.

When enrolling a child in an Out of School Hours Care service, parents will be asked to provide an Immunisation History Statement. Should a child not be fully immunised according to the National Immunisation Program Schedule, they will not be prevented from enrolling.

Children without proof of recommended immunisation for their age will be excluded from attending the service during an outbreak of a vaccine preventable disease.

MANAGEMENT/ NOMINATED SUPERVISOR WILL:

- request families to provide an AIR Immunisation History Statement or an AIR Immunisation History Form (for a child on an approved catch-up-schedule) prior to enrolment
- record in the immunisation register, children as 'unimmunised' if an AIR is not provided
- advise parents and families about the [National Immunisation Program \(NIP\)](#)
- review children's immunisation regularly, updating the child's records kept at the Vacation Care Service
- develop a staff immunisation record that documents each staff member's previous infection or immunisation
- require all new and current staff to complete the staff immunisation record.
- update staff immunisation records as staff become vaccinated
- provide staff and families with information about vaccine-preventable diseases
- take all reasonable steps to encourage non-immune staff to be vaccinated
- document advice given to educators and other staff, and any refusal to comply with vaccination requests
- notify the Public Health Unit of any outbreak of vaccine preventable diseases (1300 066 055)
- notify families when an outbreak of a vaccine-preventable disease occurs
- exclude any child who is not immunised from the Vacation Care Service if and when an outbreak of a vaccine-preventable disease occurs to protect that child and to prevent further spread of infection. In

the instance of the child being immunised but the immunisation record has not been sighted by the Service, the child is to be considered as not being immunised.

- advise any staff members who fall pregnant to visit their GP immediately and have a test for Cytomegalovirus (CMV) to check their immunity. Any pregnant staff member who is at a heightened risk will not change nappies and will double glove when coming into contact with any body fluids, including saliva.

FAMILIES WILL BE REQUESTED TO:

- Provide the Vacation Care Service with a copy of one or more of the following documents upon enrolment
 - an Australian Immunisation Register (AIR) Immunisation History Statement which shows that the child is up to date with their scheduled vaccinations; or
 - an AIR Immunisation History Form on which the immunisation provider has certified that the child is on a recognised catch-up schedule; or
 - an AIR Immunisation Medical Exemption Form which has been certified by a GP
- Provide the Vacation Care Service with an updated copy of their child's current immunisation record when the next scheduled immunisation has been completed
- Complete their child's immunisation schedule
- Support their child's exclusion from the Service if there is an outbreak of a vaccine preventable disease at the Vacation Care Service or if they come into contact with a person with a vaccine preventable disease, even if there is no outbreak at the Service or Primary School.

RESOURCES

AIR General Enquiries line 1800 653 809

Australian Government Department of Health *Get the facts on childhood immunisation-help protect your community* <https://campaigns.health.gov.au/immunisationfacts>

Australian Government Services Australia *Australia Immunisation Register*

<https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register>

Sharing Knowledge About Immunisation. (2020). < <http://talkingaboutimmunisation.org.au/>

New South Wales (NSW)

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portrait>

- NSW Health Phone number: 02 9391 9000
- Local NSW Public Health Unit Contact Details:
<http://www.health.nsw.gov.au/Infectious/Pages/default.aspx>
- Immunise Australia National Hotline: 1800 671 811
- Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Note homeopathic immunisation is not recognised

SOURCE:

Australian Children's Education & Care Quality Authority. (2014).

Australia Childhood Immunisation Register:

<https://www.humanservices.gov.au/customer/services/medicare/australian-childhood-immunisation-register>

Australian Government Department of Education, Skills and Employment, (2020) *Child Care Subsidy immunisation requirements* <https://docs.education.gov.au/documents/immunisation>

Australian Government – Department of Human Services: <https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Australian Government Department Of Health National Immunise Program: <https://www.health.gov.au/initiatives-and-programs/national-immunisation-program>

Early Childhood Australia Code of Ethics. (2016).

Federal Register of Legislation *Privacy Act 1988*.

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Guide to the National Quality Standard. ~~(2017)~~–(2020)

National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

NSW Public Health Act- NSW Government October 2017:

http://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx#15

Revised National Quality Standard. (2018).

Sharing Knowledge About Immunisation. (2020). < <http://talkingaboutimmunisation.org.au/>

REVIEW

POLICY REVIEWED: DECEMBER 2020

NEXT REVIEW DATE: DECEMBER 2021

INCIDENT, ILLNESS, ACCIDENT & TRAUMA POLICY



The health and safety of all staff, children, families and visitors to our Service 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 early 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. Our Service aims to minimise illnesses by adhering to all recommended guidelines from relevant government authorities regarding the prevention of infectious diseases and adhere to exclusion periods recommended by public health units.

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

In the event of an incident, illness, accident or trauma, all staff will implement the guidelines set out in this policy to adhere to National Law and Regulations and inform the regulatory authority as required.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident

85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
97	Emergency and evacuation procedures
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
174	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Control of Infectious Disease Policy COVID-19 Management Policy Diabetes Management Policy Epilepsy Policy	Family Communication Policy Handwashing Policy Health and Safety Policy Immunisation Policy Medical Conditions Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Sick Children Policy Work Health and Safety Policy
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PURPOSE

Educators have a duty of care to respond to and manage illnesses, accidents, incidents, and trauma that may occur at the Service to ensure the safety and wellbeing of children, educators and visitors. This policy will guide educators to manage illness and prevent injury and the spread of infectious diseases.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Carex Service.

IMPLEMENTATION

Our Service implements risk management planning to identify any possible risks and hazards to our learning environment and practices. Where possible, we have eliminated or minimised these risks as is reasonably practicable.

We are committed to minimise the spread of infectious diseases such as coronavirus (COVID-19) by implementing recommendations provided by the [Australian Government- Department of Health and Safe Work Australia](#).

Our Service implements procedures as stated in the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) developed by the Australian Government National Health and Medical Research Council as part of our day-to-day operation of the Service.

We are guided by explicit decisions regarding exclusion periods and notification of any infectious disease by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction under the Public Health Act.

Identifying signs and symptoms of illness

Educators and Management are not doctors and are unable to diagnose an illness or infectious disease. To ensure the symptoms are not infectious and to minimise the spread of an infection, medical advice is required to ensure a safe and healthy environment.

Recommendations from the [Australian Health Protection Principal Committee and Department of Health will be adhered to minimise risk where reasonably practicable](#).

During a pandemic, such as COVID-19, risk mitigation measures may be implemented within the service to manage the spread of the virus. These measures may include but are not limited to the following:

- exclusion of unwell staff, children and visitors (symptoms may include fever, coughing, sore throat, fatigue or shortness of breath)
- taking children's temperature prior to entry into the Service and excluding anyone who has a temperature above 38°C
- notifying vulnerable people within the workplace of the risks of the virus/illness including:
 - o people with underlying medical needs
 - o children with diagnosed asthma or compromised immune systems
 - o Aboriginal and Torres Strait Islander people over the age of 50 with chronic medical conditions

- requesting any person visiting our service to sign a Health Declaration form confirming they have not been in close contact with anyone with a positive COVID-19 diagnosis or travelled overseas within the past 14 days
- restrict the number of visitors entering the Service
- request parents to drop off and collect children from designated points outside the service
- enhanced personal hygiene for children, staff and parents (including frequent handwashing)
- full adherence to the NHMRC childcare cleaning guidelines and cleaning and disinfecting high touch surfaces at least twice daily
- avoid any situation when children are required to queue- using the bathroom for handwashing or toileting, waiting their turn to use a piece of equipment etc.
- cancelling excursions to local parks, public playgrounds and incursions during a pandemic
- recommending influenza vaccination for children, staff and parents

Children who appear unwell at the Service will be closely monitored and if any symptoms described below are noticed, or the child is not well enough to participate in normal activities, parents or an emergency contact person will be contacted to collect the child as soon as possible. A child who is displaying symptoms of a contagious illness (vomiting, diarrhoea) will be moved away from the rest of the group and supervised until he/she is collected by a parent or emergency contact person.

Symptoms indicating illness may include:

- behaviour that is unusual for the individual child
- high temperature or fevers
- loose bowels
- faeces that are grey, pale or contains blood
- vomiting
- discharge from the eye or ear
- skin that display rashes, blisters, spots, crusty or weeping sores
- loss of appetite
- dark urine
- headaches
- stiff muscles or joint pain
- a stiff neck or sensitivity to light
- continuous scratching of scalp or skin
- difficulty in swallowing or complaining of a sore throat

- persistent, prolonged or severe coughing
- difficulty breathing

As per our *Sick Child Policy* we reserve the right to refuse a child into care if they:

- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature/fever, or vomiting in the last 24 hours
- have had diarrhoea in the last 48 hours
- have been given medication for a temperature prior to arriving at the Service
- have started a course of anti-biotics in the last 24 hours or
- if we have reasonable grounds to believe that a child has a contagious or infectious disease (this includes COVID-19)

High temperatures or fevers

Children get fevers or temperatures for all kinds of reasons. Most fevers and the illnesses that cause them last only a few days. However sometimes a fever will last much longer and might be the sign of an underlying chronic or long-term illness or disease.

Recognised authorities suggest a child's normal temperature will range between 36.0°C and 37.0°C, but this will often depend on the age of the child and the time of day.

Any child with a high fever or temperature reaching 38°C or higher will not be permitted to attend the Vacation Care Service until 24 hours after the temperature/fever has subsided.

When a child develops a high temperature or fever whilst at the Vacation Care Service

- Educators will closely monitor the child focusing on how the child looks and behaves and be alert to the possibility of vomiting, coughing or convulsions.
- Educators will notify parents when a child registers a temperature of 38°C or higher.
- The child will be cared for in an area that is separated from other children in the service to await pick up from their parent/carer.
- The child will need to be collected from the Vacation Care Service and will not be permitted back for a further 24 hours
- Educators will complete an *Illness, Accident & Trauma* record and note down any other symptoms that may have developed along with the temperature (for example, a rash, vomiting, etc.).

Methods to reduce a child's temperature or fever

- Encourage the child to drink plenty of water (small sips), unless there are reasons why the child is only allowed limited fluids.
- Remove excessive clothing (shoes, socks, jumpers, pants etc.) Educators will be mindful of cultural beliefs.
- If requested by a parent or emergency contact person, staff may administer paracetamol or ibuprofen (Panadol or Nurofen) in an attempt to bring the temperature down. However, a parent or emergency contact person must still collect the child.
- Parental written permission to administer paracetamol or ibuprofen should be provided during enrolment and filed in the child's individual record
- Before giving any medication to children, the medical history of the child must be checked for possible allergies
- The child's temperature, time, medication, dosage, and the staff member's name will be recorded in the Illness Folder. Parents will be requested to sign the Medication Authorisation Form for the administration of Panadol or Nurofen when collecting the child.

Dealing with colds/flu (runny nose)

It is very difficult to distinguish between the symptoms of COVID-19, influenza and a cold. If any child, employee or visitor has any infectious or respiratory symptoms (such as sore throat, headache, fever, shortness of breath, muscle aches, cough or runny nose) they are requested to either stay at home or be assessed/tested for COVID-19. If a child, employee or visitor is tested for COVID-19, they are required to self-isolate until they receive notification from the Public Health Unit of their test results.

see: Australian Government [Identifying the symptoms](#)

Colds are the most common cause of illness in children and adults. There are more than 200 types of viruses that can cause the common cold. Symptoms include a runny or blocked nose, sneezing and coughing, watery eyes, headache, a mild sore throat, and possibly a slight fever.

Nasal discharge may start clear but can become thicker and turn yellow or green over a day or so. Up to a quarter of young children with a cold may have an ear infection as well, but this happens less often as the child grows older. Watch for any new or more severe symptoms—these may indicate other, more serious infections. It is not unusual for children to have five or more colds a year, and children in education and care Services may have as many as 8–12 colds a year.

As children get older, and as they are exposed to greater numbers of children, they get fewer colds each year because of increased immunity.

Management have the right to send children home if they appear unwell due to a cold or general illness. Children can become distressed and lethargic when unwell. Discharge coming from a child's nose and coughing can lead to germs spreading to other children, educators, toys, and equipment.

Management will assess each individual case prior to sending the child home.

Diarrhoea and vomiting (gastroenteritis)

Gastroenteritis (or 'gastro') is a general term for an illness of the digestive system. Typical symptoms include abdominal cramps, diarrhoea, and vomiting. In many cases, it does not need treatment, and symptoms disappear in a few days.

However, gastroenteritis can cause dehydration because of the large amount of fluid lost through vomiting and diarrhoea. Therefore, if a child does not receive enough fluids, he/she may require fluids intravenously.

If a child has diarrhoea and/or vomiting whilst at the Vacation Care Service, Management will notify parents or an emergency contact to collect the child immediately. In the event of an outbreak of viral gastroenteritis, management will contact the local public health unit on 1300 066 055 (NSW).

[Public Health Unit- Local state and territory health departments](#)

Management must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2 day period. (NSW Government- Health 2019)

Children that have had diarrhoea and/or vomiting will be asked to stay away from the Vacation Care Service for **48 hours** after symptoms have ceased to reduce infection transmission as symptoms can reappear after 24 hours in many instances.

Infectious causes of gastroenteritis include:

- Viruses such as rotavirus, adenoviruses and norovirus
- Bacteria such as Campylobacter, Salmonella and Shigella
- Bacterial toxins such as staphylococcal toxins
- Parasites such as Giardia and Cryptosporidium

Non-infectious causes of gastroenteritis include:

- Medication such as antibiotics
- Chemical exposure such as zinc poisoning
- Introducing solid foods to a young child
- Anxiety or emotional stress

The exact cause of infectious diarrhoea can only be diagnosed by laboratory tests of faecal specimens. In mild, uncomplicated cases of diarrhoea, doctors do not routinely conduct faecal testing.

Children with diarrhoea who also vomit or refuse extra fluids should see a doctor. In severe cases, hospitalisation may be needed. The parent and doctor will need to know the details of the child's illness while the child was at the education and care Service.

Children, educators and staff with diarrhoea and/or vomiting will be excluded until the diarrhoea and/or vomiting has stopped for at least **48 hours**.

Please note: If there is a gastroenteritis outbreak at the Vacation Care Service, children displaying the symptoms will be excluded from the Service until the diarrhoea and/or vomiting has stopped and the family are able to get a medical clearance from their doctor.

Preventing the spread of illness

To reduce the transmission of infectious illness, our Service implements effective hygiene and infection control routines and procedures as per the *Australian Health Protection Principal Committee* guidelines.

If a child is unwell or displaying symptoms of a cold or flu virus, parents are requested to keep the child away from the Service. Infectious illnesses can be spread quickly from one person to another usually through respiratory droplets or from a child or person touching their own mouth or nose and then touching an object or surface.

Prevention strategies

Practising effective hygiene helps to minimise the risk of cross infection within our Service.

Signs and posters remind employees and visitors of the risks of infectious diseases, including COVID-19 and the measures necessary to stop the spread.

Educators model good hygiene practices and remind children to cough or sneeze into their elbow or use a disposable tissue and wash their hands with soap and water for at least 20 seconds after touching their mouth, eyes or nose.

Handwashing techniques are practised by all educators and children routinely using soap and water before and after eating and when using the toilet and drying hands thoroughly with paper towel. (See Handwashing Policy).

All surfaces including cushions and pillows used by a child who is unwell, will be cleaned with soap and water and then disinfected.

Cleaning contractors hygienically clean the service to ensure risk of contamination is removed as per [Environmental Cleaning and Disinfection Principles for COVID-19](#)

Parents, families and visitors are requested to wash their hands upon arrival and departure at the Service or use an alcohol-based hand sanitizer. (Note: alcohol-based sanitizers must be kept out of reach of children and used only with adult supervision.)

Parents will be notified of any outbreak of an infectious illness (eg: Gastroenteritis) within the Service via our notice board, online app or email to assist in reducing the spread of the illness.

The Public Health Unit (PHU) will notify the Approved Provider of the service in the event of a positive COVID-19 diagnosis of a child, employee, parent or visitor and conduct contact tracing. Any decision to close the Service and other directions will be provided by the PHU and regulatory body. The Approved Provider will notify the [Regulatory Authority](#) within 24 hours of any closure due to COVID-19 via the [NQA IT System](#).

Exclusion periods for illness and infectious diseases are provided to parents and families and included in our Parent/Family Handbook and Sick Children Policy.

Serious injury, incident or trauma

In the event of any child, educator, staff, volunteer or contractor having an accident at the Service, an educator who has a First Aid Certificate will attend to the person immediately.

Adequate supervision will be provided to all children.

Procedures as per our *Administration of First Aid Policy* will be adhered to by all staff.

DEFINITION OF SERIOUS INCIDENT:

Regulations require the Approved Provider or Nominated Supervisor to notify Regulatory Authorities **within 24 hours of any serious incident at the Vacation Care Service** through the [NQA IT System](#)

a) The death of a child:

- (i) while being educated and cared for by an Vacation Care Service or
- (ii) following an incident while being educated and cared for by an Vacation Care Service.

(b) Any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Vacation Care 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 Vacation Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)

(d) Any circumstance where a child being educated and cared for by an Vacation Care Service

- (i) appears to be missing or cannot be accounted for or
- (ii) appears to have been taken or removed from the Vacation Care Service premises in a manner that contravenes these regulations or
- (iii) is mistakenly locked in or locked out of the Vacation Care Service premises or any part of the premises.

A serious incident should be documented as an incident, injury, trauma and illness record as soon as possible and within 24 hours of the incident, with any evidence attached.

Trauma is defined as the impact of an event or a series of events during which a child feels helpless and pushed beyond their ability to cope. There are a range of different events that might be traumatic to a child, including accidents, injuries, serious illness, natural disasters (bush fires), assault, and threats of violence, domestic violence, neglect or abuse and wars or terrorist attacks. Parental or cultural trauma can also have a traumatising effect on children. This definition firmly places trauma into a developmental context:

“Trauma changes the way children understand their world, the people in it and where they belong”

(Australian Childhood Foundation, 2010).

Trauma can disrupt the relationships a child has with their parents, educators and staff who care for them. It can transform children’s language skills, physical and social development and the ability to manage their emotions and behaviour.

Behavioural responses for pre-school aged children who have experiences trauma may include:

- new or increased clingy behaviour such as constantly following a parent, carer or staff around
- anxiety when separated from parents or carers
- new problems with skills like sleeping, eating, going to the toilet and paying attention
- shutting down and withdrawing from everyday experiences
- difficulties enjoying activities
- being jumpier or easily frightened
- physical complaints with no known cause such as stomach pains and headaches
- blaming themselves and thinking the trauma was their fault.

Children who have experienced traumatic events often need help to adjust to the way they are feeling. When parents, educators and staff take the time to listen, talk, and play they may find children begin to say or show how they are feeling. Providing children with time and space lets them know you are available and care about them.

It is important for educators to be patient when dealing with a child who has experienced a traumatic event. It may take time to understand how to respond to a child’s needs and new behaviours before parents, educators and staff are able to work out the best ways to support a child. It is imperative to realise that a child’s behaviour may be a response to the traumatic event rather than just ‘naughty’ or ‘difficult’ behaviour.

Educators can assist children dealing with trauma by:

- observing the behaviours and expressed feelings of a child and documenting responses that were most helpful in these situations.
- creating a ‘relaxation’ space with familiar and comforting toys and objects children can use when they are having a difficult time
- having quiet time such as reading a story about feelings together

- trying different types of play that focus on expressing feelings (e.g. drawing, playing with play dough, dress-ups and physical games such as trampolines)
- helping children understand their feelings by using reflecting statements (e.g. ‘you look sad/angry right now, I wonder if you need some help?’)

There are a number of ways for parents, educators and staff to reduce their own stress and maintain awareness, so they continue to be effective when offering support to children who have experienced traumatic events.

Strategies to assist Families, Educators and Staff to cope with children’s stress or trauma may include:

- taking time to calm yourself when you have a strong emotional response. This may mean walking away from a situation for a few minutes or handing over to another educator or staff member if possible
- planning ahead with a range of possibilities in case difficult situations occur
- remembering to find ways to look after yourself, even if it is hard to find time or you feel other things are more important. Taking time out helps adults be more available to children when they need support.
- using supports available to you within your relationships (e.g., family, friends, colleagues).
- identifying a supportive person to talk to about your experiences. This might be your family doctor or another health professional.
- accessing support resources- BeYou, Emerging Minds.

Living or working with traumatised children can be demanding so it is important to be aware of your own responses and seek support from management when required.

MANAGEMENT, NOMINATED SUPERVISORS, RESPONSIBLE PERSON, AND EDUCATORS WILL ENSURE:

- Vacation Care Service policies and procedures are adhered to at all times
- parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring
- parents are advised to keep the child home until they are feeling well, and they have not had any symptoms for at least 24-48 hours.
- an illness, accident or trauma record is completed accurately and in a timely manner as soon after the event as possible (within 24 hours)

- first aid qualified educators are present at all times on the roster and in the Vacation Care Service
- first aid kits are suitably equipped and checked on a monthly basis (see First Aid Kit Record)
- first aid kits are easily accessible when children are present at the Vacation Care Service and during excursions
- first aid, emergency anaphylaxis management training, and asthma management training is current and updated as required
- adults or children who are ill are excluded for the appropriate period (see *Sick Children Policy*)
- educators or staff who have diarrhoea or an infectious disease do not prepare food for others
- cold food is kept cold (below 5 °C) and hot food, hot (above 60°C) to discourage the growth of bacteria
- if the incident, situation or event presents imminent or severe risk to the health, safety and wellbeing of any person present at the Vacation Care Service, or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident
- parents are notified of any infectious diseases circulating the Vacation Care Service within 24 hours of detection
- children are excluded from the service if staff feel the child is too unwell to attend or is a risk to other children
- staff and children always practice appropriate hand hygiene and cough and sneezing etiquette
- Appropriate cleaning practices are followed.
- toys and equipment are cleaned and disinfected on a regular basis which is recorded in the toy cleaning register or immediately if a child who is unwell has used toys or resources.
- additional cleaning will be implemented during any outbreak of an infectious illness or virus
- All illnesses are documented in the service *Incident Illness Accident and Trauma Record*

FAMILIES WILL:

- provide up to date medical and contact information in case of an emergency
- provide the Vacation Care Service with all relevant medical information, including Medicare and private health insurance
- provide a copy of their child's Medical Management Plans and update annually or whenever medication/medical needs change
- adhere to recommended periods of exclusion if their child has a virus or infectious illness.

RESOURCES

[beyou Bushfire resource](#)

[Emerging Minds Community Trauma Toolkit](#)

[Fever in children- \(health direct.gov.au\)](#)

Staying Healthy: Preventing infectious diseases in early childhood education and care services

[Recommended exclusion periods- Poster](#)

[Stopping the spread of childhood infections \(NSW Health\)](#)

[Minimum periods for exclusion from childcare services \(Victoria\)](#)

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Beyond Blue: <https://beyou.edu.au/resources/news/covid-19-supporting-schools>

BeYou (2020) *Bushfires response* <https://beyou.edu.au/bushfires-response>

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First Aid Workplace: <http://sydney.edu.au/science/psychology/whs/COP/First-aid-workplace.pdf>

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Guide to the National Quality Standard. (2020)

Health Direct <https://www.healthdirect.gov.au/>

National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*. Fifth Edition (updated 2013).

NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>

Policy Development in early childhood setting

Raising Children Network: <https://raisingchildren.net.au/guides/a-z-health-reference/fever>

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SafeWork Australia: <https://www.safeworkaustralia.gov.au/first-aid>

The Sydney Children’s Hospitals network (2020). <https://www.schn.health.nsw.gov.au/search/site?query=fever>

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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LOCKDOWN POLICY

Our Vacation Care Service is committed to the ongoing safety and wellbeing of children, staff, families and visitors. To achieve this, we will implement a clear plan to manage all emergency situations, including a plan for emergencies that may require our Service to go into lockdown and ensure our educators and staff are well equipped with the knowledge and expertise to respond effectively when required.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
85	Incident, injury, trauma and illness policies and procedures
97	Emergency and evacuation procedure
168	Education and Care Services must have policies and procedures

RELATED POLICIES

Emergency Evacuation Policy Acceptance and Refusal Authorisation Policy Arrival and Departure Policy Incident, Illness, Accident and Trauma Policy	Family Communication Policy Supervision Policy Health and Safety Retention of Records Policy
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PURPOSE

We aim to minimise the risk of harm, ensuring the safety of children, Educators, families and visitors of the Vacation Care Service in the event of a threatening situation.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Vacation Care Service has set procedures to follow in the event of any emergency requiring evacuation or lockdown. These procedures comply with regulatory requirements and are consistent with recommendations by recognised authorities. They are designed to ensure an efficient, safe, and calm procedure for all children, staff, families, and visitors.

Whilst many emergency situations will require staff and children to evacuate from the Service, there are potential situations that will require the Service to go into 'lockdown'.

Within early childhood services there are three types of lockdown that may be required:

- **'External threat'** - indicating that there is a potential threat outside that you wish to prevent from entering the building. For example:
 - Unidentified dangerous animal or insects.
- **'Shelter-in-place'** - generally will be required when there is a real or perceived threat to health or safety. For example:
 - Severe storms
 - Extreme smoke from a local or distant bushfire
 - Chemical or hazardous substance spill
 - Gas leak / atmospheric hazardous substance
 - Flood
- **'Full lockdown'** - for situations that involve serious threats such as:
 - Potentially dangerous unwanted or uninvited intruder
 - Potentially dangerous person due to intoxication or substance abuse

- Receiving an emergency services warning about a reported incident or civil disturbance

Lockdown means that all windows and external doors are locked, and where possible internal doors are locked and blinds closed.

For a 'Shelter-in-place' or 'External threat' lockdown, children are able to participate in the usual experiences and activities. However, for a 'Full lockdown' children and adults must be moved to a room/position that does not allow them to be viewed.

Where possible, access should be maintained to a bathroom and enough space should be available for children to be comfortably involved in quiet activities. It is therefore vital that appropriate spaces have been identified and displayed on an **Emergency Lockdown Procedure**. This information can be displayed on the back of the Evacuation Plan, which can then be quickly taken from the wall when required. This act will ensure that in a situation involving unwanted visitors, *or* previous visitors that have now returned with malicious intent, that the plan is not visible or available.

MANAGEMENT/NOMINATED SUPERVISOR WILL:

- Develop, and review annually, a risk assessment to identify potential emergencies that may require the service to go into lockdown
- Engage relevant stakeholders/authorities to improve risk assessments for lockdown situations
- Ensure emergency evacuation plans are displayed in prominent positions near each exit and in the indoor and outdoor learning environments (Lockdown information should be displayed on the back of this plan)
- Nominate the person/people with authority to manage the lockdown
- Determine communication channels
- Determine how the different type of lockdown alert signal will be given
- Design a movement and wellbeing plan to follow if not in the classroom/indoor learning area
- Develop an effective strategy for checking the roll and communicating with children, educators, families, and visitors of the Service
- Document roles and responsibilities of staff and Educators
- Plan to maintain children's safety
- Ensure all children, staff, families, and visitors of the Service remain inside
- Ensure lockdown drills are practiced every three months at different times to ensure all staff and children have the opportunity to participate

- Ensure lockdown drills are reviewed and reflected upon each time they occur and are adequately documented.
- Communicate with families about lockdown procedures and drills

IN THE EVENT OF A LOCKDOWN, EDUCATORS WILL:

- Immediately lock doors and windows
- Close all blinds/curtains
- Ensure all children are accounted for
- Ensure all children remain inside the classroom (or are accompanied by an educator/staff member if going to the bathroom)
- Ensure children remain in a confined area, (or out of sight for a 'full lockdown' – see below) during the lockdown period
- Ensure children to remain calm: Except for 'full lockdown' arrange activities to engage them.
- Remain in lockdown until the all-clear signal is given
- Complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children

ADDITIONALLY, DURING A SHELTER-IN-PLACE LOCKDOWN, THE EDUCATORS WILL:

- Use any available linen to block gaps around doors or window to minimise the entry of smoke/hazardous chemicals

ADDITIONALLY, DURING A FULL LOCKDOWN, MANAGEMENT, NOMINATED SUPERVISORS and EDUCATORS WILL:

- Implement lockdown procedure
- Alert staff using agreed signal for immediate lockdown
- Contact emergency services (000) for assistance
- Remove the evacuation plan from the walls of the Service
- Move children to a secure lockdown location
- Turn off all lights
- Clear any room/hallway that cannot be secured
- Silence televisions and radios/CD players

- Silence mobile devices such as phones
- Ensure all children remain low away from doors and windows
- Encourage all children to remain quiet: Have books ready for children to look at to assist with engaging them during the lockdown
- Ensure all children and persons in the room remain out of sight of external windows and glass doors, and internal viewing windows
- Complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children
- Provide opportunities for debriefing and counselling to families and children

SOURCE

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REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW: DECEMBER 2021
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MEDICAL CONDITIONS POLICY

To support children's wellbeing and manage specific healthcare needs, allergy or relevant medical condition our Vacation Care Service will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
86	Notification to parent of incident, injury, trauma or illness
87	Incident, injury, trauma and illness record
90	Medical Conditions Policy
90 (1) (a)	The management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication

94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First Aid qualifications
162(c) and (d)	Health information to be kept in enrolment record
168(2)(d)	Policies and procedures are required in relation to dealing with medical conditions in children, including the matters set out in regulation 90
170	Policies and procedures are to be followed

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of Medication Policy Asthma Management Policy Anaphylaxis Management Policy Celebrations Policy Child Safe Environment Policy Diabetes Management Policy Enrolment Policy	Epilepsy Management Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Privacy & Confidentiality Policy Sick Children Policy Work Health and Safety Policy
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PURPOSE

We aim to efficiently respond to and manage medical conditions, health care needs or allergies of children and staff ensuring the safety and wellbeing of all children, staff, families and visitors at our Vacation Care Service.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Vacation Care Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions. There are a number of concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the service. Key procedures and strategies must be in place prior to the child commencing at the Service to ensure their individual health, safety and wellbeing.

The Approved Provider/Management will ensure:

- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- existing enrolment forms are reviewed, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents are provided with a copy of the Service's *Medical Conditions Policy when required*
- a child is not enrolled at, nor will attend the Vacation Care Service without a medical management plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis or diabetes must be provided to the service each day [e.g. asthma inhalers, adrenaline auto injection devices or insulin]
- educators, staff and volunteers have knowledge and access to this policy and relevant health management policies (*Asthma Management Policy/ Anaphylaxis Management Policy/Diabetes Management Policy*)
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature
- new staff members are provided with induction and ongoing training to assist managers, educators and other staff effectively
- all aspects of operation of the service must be considered to ensure inclusion of each child into the program
- communication between families and educators is on-going and effective
- staff are provided with annual ASCIA anaphylaxis e-training to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis
- at least one staff member or nominated supervisor is in attendance at all times with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA)
- educators and staff have a clear understanding about their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition
- families provide required information on their child's health care need, allergy or relevant medical condition, including:
 - medication requirements
 - allergies
 - medical practitioner contact details
 - medical management plan

- a medical management plan has been developed in consultation with parents and the child’s medical practitioner and provided to the service and/or
 - an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child’s medical practitioner e.g: (ASCIA) or National Asthma Council of Australia
 - an individual Diabetes Management Plan is developed in consultation with parents and the child’s medical practitioner
- a risk minimisation plan has been developed in consultation with parents and management prior to the child commencing at the service
- educators and staff will be informed immediately about any changes to a child’s medical management plan, risk management plan
- to record any prescribed health information and retain copies of medical management plan, anaphylaxis management plan or asthma management plan and risk minimisation plan in the child’s enrolment folder
- educators have access to emergency contact information for the child
- casual staff are informed of children and staff members who have specific medical conditions, food allergies, the type of condition or allergies they have, and the Service’s procedures for dealing with emergencies involving allergies and anaphylaxis
- a copy of the child’s medical management plan is visibly displayed (in an area not generally available to families and visitors) but known to staff in the OSHC Service
- procedures are adhered to regarding the administration of medication at all times
- administration of medication record is accurately completed and signed by the educator and witnesses
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child’s parent or other responsible person named and authorised in the child’s enrolment record to make decisions about the administration of medication

In the event that a high-risk scenario where a child suffers from a reaction, incident, situation, or event related to a medical condition the Service and staff will follow the child’s emergency medical management plan as per Regulation 90(1)(c)(ii)

- the first aid responder will commence first aid measures immediately as per the child’s medical management plan
- urgent medical attention from a registered medical practitioner is contacted if required
- an ambulance is called by dialling 000 if the child does not respond to initial treatment
- the nominated supervisor will contact the child’s parent/guardian or emergency contact when practicable, but as soon as possible

- the Director/Nominated Supervisor will ensure the *Incident, Injury, Trauma and Illness Record* is completed in its entirety
- the Director/Nominated Supervisor will notify the regulatory authority (within 24 hours) in the event of a serious incident.

Families will ensure

- the Vacation Care Service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they provide management with information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form and through verbal communication/meetings
- they provide the Vacation Care Service with a medical management plan prior to enrolment of their child
- they consult with management to develop a risk minimisation plan
- they acknowledge they have received/or are provided access to the Service's *Medical Conditions Policy and Administration of Medication Policy* at time of enrolment
- they notify the Vacation Care Service if any changes are to occur to the medical management plan
- notify the Vacation Care Service, verbally when children are taking any short-term medications AND whether or not these medications may be self-administered (only applicable for a child over preschool age)
- they provide adequate supplies of the required medication and medication authorisation on an Administration of Medication Record-e
- they provide an updated copy of the child's medical management plan annually or evidence from a Medical Practitioner to confirm the plan remains unchanged
- they provide written consent for their child's medical management plan to be displayed in the Vacation Care Service.

Self-Administration of Medication

A child over preschool age may self-administer medication under the following circumstances:

- a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication
- medication is stored safely by an educator, who will provide it to the child when required
- supervision is provided by an educator whilst the child is self-administering medication
- an accurate record is made in the medication record for the child that the medication has been self-administered.

MEDICAL MANAGEMENT PLAN

Any Medical Management Plan provided by a child's parents and/or registered medical practitioner should include the following:

- specific details of the diagnosed health care need, allergy or relevant medication condition
 - supporting documentation (if required)
 - a recent photo of the child
 - current medication and dosage prescribed for the child
 - if relevant, state what triggers the allergy or medical condition
 - first aid/emergency response that may be required
 - any medication that may be required to be administered in case of an emergency
 - further treatment or response if the child does not respond to the initial treatment
 - when to contact an ambulance for assistance
 - contact details of the medical practitioner ~~doctor~~ who signed the plan
 - the date of when the plan should be reviewed
- a copy of the medical management plan will be displayed for educators and staff to see to ensure the safety and wellbeing of the child, whilst ensuring the child's privacy by displaying only in an area generally only available to staff of the Vacation Care Service
 - the Vacation Care Service must ensure the medical management plan remains current all times
 - educators and staff are updated immediately about any changes to a child's medical management plan.

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place. (regulation 90(1)(c))

The Director/Nominated Supervisor will arrange a meeting with the parents/guardian as soon as the Vacation Care Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting a risk minimisation plan will be developed in consultation with the parent/guardian to ensure:

- that the risks relating to the child’s specific health care need, allergy, or medical condition are assessed and minimised.
- that practices and procedures in relation to the safe handling, preparation, serving, and consumption of food are developed and implemented.
- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented.
- practices are developed and implemented to ensure that all staff members and volunteers can identify the child, the child’s medical management plan and the location of the child’s medication.
- that the child does not attend the Service without medication prescribed by the child’s medical practitioner in relation to the child’s specific health need, allergy or medical condition
- risk minimisation plan(s) are reviewed at least annually and/or revised with each change in the Medical Management Plan in conjunction with parents/guardians.
- all relevant information pertaining to the child’s health and medical condition is communicated to parents at the end of each day by educators.
- parents are notified by educators in advance of any special activities taking place such as celebrations, sporting events or excursions so plans of safe inclusion can be developed.
- appropriate hygiene practices are followed by educators when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*.
- ~~○ risk minimisation plans are reviewed in collaboration with families every 6 months.~~

COMMUNICATION PLAN

The communication plan explains how relevant staff members and volunteers are informed about the medical management and risk management plans and how the parent of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after the meeting with the parents/guardian to ensure:

- all relevant staff members and volunteers are informed about the medical conditions policy, the medical management plan and risk minimisation plan for the child; and
- that an individual child communication book is created so that a parent can communicate any changes to the medical management plan and risk management plan for the child in writing.

At all times, families who have a child attending the OSHC Service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child’s health management and communication plans.

RESOURCES

[ASCIA anaphylaxis e-training for schools and early childhood education/care](#)

[ASCIA plans for Anaphylaxis](#)

[Coeliac Australia](#)

[Cystic Fibrosis Australia](#)

[Diabetes Australia](#)

[Epilepsy Foundation](#)

[National Asthma Australia](#)

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.

Australian Society of Clinical Immunology and Allergy. ascia. <https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (amended 2020).

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.). *Occupational Health and Safety Act 2004*.

Revised National Quality Standard. (2018).

Department of Education Victoria *Meeting children’s health needs* (2020).

REVIEW

Policy Reviewed:	Next Review Date:
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MOBILE DEVICE USAGE POLICY

All Out of School Hours Care services have an obligation under the ‘My Time, Our Place’ framework to provide a safe environment in which school age children are able to engage in a range of play activities and join in a variety of cultural, artistic and leisure experiences. Such experiences allow children to interact with friends, practice social skills and solve problems.

The use of mobile phones in primary schools has recently been a subject of much debate and educational review- for example: Centre of Education Statistics and Evaluation (CESE) and Review into the non-education use of mobile devices NSW- report (2018). There is a growing conversation raised by teachers, parents, educators and the media about the effect of non-educational uses of mobile digital devices on student learning and social interaction including cyberbullying, exposure to harmful material and mental and physical health. The research and review have led education ministers from both NSW, Victoria, Western Australia and Tasmania to introduce bans for the use of mobile devices in public primary schools.

We acknowledge the shared responsibility of supporting school policy and respect the collaborative partnerships we have formed with our feeder primary schools and families. Our Out of School Hours Care (OSHC) service will implement a mobile phone policy from 1st January 2021.

Educational jurisdictions in Queensland, Northern Territory and the ACT have not announced plans to ban the use of mobile devices. In South Australia the decision to ban mobile devices is left to individual principals of primary schools.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
155	Interactions with children

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Children’s Belongings Policy Cyber Safety Policy Behaviour Guidance Bullying Policy	Interactions with Children, Family and Staff Policy Orientation of Families Policy Photograph Policy Privacy and Confidentiality Policy
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PURPOSE

To ensure compliance with the National Quality Standard and National Regulations we aim to provide an environment that is safe for all students at all times. The outcomes of the ‘My Time, Our Place’ Framework are reflected in our policy to ensure the Vacation Care environment is supporting children’s emotional wellbeing, physical safety and cyber safety.

SCOPE

This policy applies to children, families, staff, and management of the Vacation Care Service.

IMPLEMENTATION

We understand and accept that parents often provide a mobile device for their child/ren to provide personal security and safety whilst they travel to and from school. Additionally, some schools have a Bring Your Own Device (BYOD) policy to provide opportunities for students to engage in the curriculum and therefore students *may* have a mobile device with them when they attend Vacation Care.

However, within our Service, mobile devices are **not** permitted to be utilised as we provide a balance of activities for students where a mobile device is not required. Some children with a

disability or health condition, may rely on the use of a mobile device for support needs will be exempt from this restriction. At times children's mobile phones may be used in conjunction with programming activities. Exemptions must be made by Management or the Approved Provider.

MANAGEMENT/NOMINATED SUPERVISOR/EDUCATORS WILL ENSURE:

- children, families and carers attending Vacation Care adhere to the policy
- any external communication is supervised and made using the Vacation Care registered phone
- parents/carers can access the Vacation Care phone number to make contact if required
- children do not use their mobile device whilst attending Vacation Care, including attending excursions and/or incursions, unless authorised by the Nominated Supervisor.
- the Vacation Care takes no responsibility for mobile devices that are brought to the Service (this includes if mobile device is lost or is damaged).
- all mobile devices must be clearly labelled with the child's name
- consultation will be made with management and parents of a child who requires access to a mobile phone due to their disability or medical condition.

Storage of mobile devices

If a child must bring a mobile device to Vacation Care for any reason, it will be stored in one of the ways listed below:

- stored in a locked cupboard within the Service and collected by parents/carers at the end of the day
- turned off and stored in the child's school bag

CONSEQUENCES

In the event of a child using their mobile device without permission, the child will be directed to place the device in a locked cupboard for the remainder of the session and returned to the parent/carer at the end of the day.

Should the child be accessing inappropriate content or using the camera on the device without permission, written notification will be provided to parents advising them of the incident. The letter may also outline future restrictions to be imposed on the student's eligibility to have their mobile phone at the Out of School Hours Service at any time.

Any intentional misuse of a mobile phone for the purpose of online bullying or image-based abuse will be investigated and reported to relevant child protection authorities such as the [eSafety Commissioner](#).

Educational jurisdictions Policy Information

New South Wales

<https://education.nsw.gov.au/about-us/strategies-and-reports/our-reports-and-reviews/mobile-devices-in-schools>

Tasmania

<https://www.education.tas.gov.au/2019/11/mobile-phone-ban-in-schools/>

Victoria

<https://www.education.vic.gov.au/parents/going-to-school/Pages/Mobile-phones-in-schools.aspx>

Western Australia

<https://www.education.wa.edu.au/mobile-phones>

eSafety Commissioner

<https://www.esafety.gov.au/report/cyberbullying>

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government: Department of Education, Skills and Employment. (2011). *My Time Our Place: Framework for School Age Care in Australia*.

Australian Government eSafety Commissioner

Centre of Education Statistics and Evaluation (2018) *Impact of mobile digital devices in schools*

Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2020).

NSW Department of Education *Review into the non-education use of mobile devices in NSW*. (2018).

Revised National Quality Standard. (2018).

Victorian Department of Education. (2019).

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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PHOTOGRAPH POLICY

Our Vacation Care Service is committed to creating and maintaining a child safe environment where children are safe and feel safe and their voices are heard about decisions that affect their lives. Child safety is embedded in our organisational leadership, governance, policies and procedures and culture. Children have the right to be protected from the misuse of photographic and video images whilst at the Service. To ensure the privacy of children and families is respected, our Vacation Care Service will only use photographs of children to support their learning and to record individual developmental progress with written authorisation from parents/guardians.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIP WITH FAMILIES AND COMMUNITIES		
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

181	Confidentiality of records kept by approved provider
183	Storage of records and other documents
184	Storage of records after service approval transfer

RELATED POLICIES

Child Safe Environment Policy Child Protection Policy Code of Conduct Policy Enrolment Policy	Social media Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

We aim to ensure the collection and use of photographs or video of children complies with privacy laws and legislation. We are committed to creating and maintaining a child safe environment by adhering to the Child Safe Standards.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

The displaying of photos provides children and families with a sense of belonging. Photographs allow children to see themselves at play, are a topic of conversation for children and parents, allow families to see their child at play, and convey the message to children that what they are doing is important. However, it is fundamental to respect the rights of all children and families to privacy and ensure child safety is embedded in our policies and procedures.

THE APPROVED PROVIDER AND NOMINATED SUPERVISOR WILL ENSURE:

- we are maintaining children's safety and respecting their right to privacy
- families provide written permission/consent for photographing or recording video of their child by the Service
- every child in our care is protected from any exploitation of photographic and video images of themselves taken whilst they attend the Service
- children participate in decisions affecting them including permission to have photographs taken of them
- personal information about the child's surname, age or any other information that reveals their identity is not published without written parental permission
- that photographs taken by educators support the children's learning and record children's individual progress

- photographs recorded at the Service as part of a normal day are taken using a digital camera or service owned mobile device and are only taken by members of the staff team, or by practicum students with written parental permission
- at no time are staff permitted to bring in a camera from home or use their mobile phone to take photographs, videos, or audio recordings of children whilst being educated and cared for
- that the Service seeks written permission from families for their child to be photographed when an outside photographer/agency is contracted to take photographs for marketing purposes or to take individual and group photos once a year. Only children who have written permission from their parent/carer will be included in any photography
- that the Service notifies parents of the purpose of taking photographs such as use on the Service's website, advertising flyers/brochure, parent handbook
- parents are aware that photographs or images may be taken of their children by other parents at various times of the year (e.g. during an end-of-year production or other event). Should parents **not** want their child photographed at any time, they must provide written notification to the Approved Provider or Nominated Supervisor at time of enrolment or if their decision for consent changes
- a record of all children who are NOT to be photographed will be developed, maintained and shared with educators and staff
- this record will remain private and confidential to staff only
- that the children of parents/carers who do not wish their child to be photographed or videoed are provided with other activities when an outside photographer/agency is engaged
- parents/carers have the choice to withdraw consent for their child to be photographed or filmed in certain circumstances
- photographs, video or other recordings of children are securely stored and disposed of when the child is no longer enrolled at the Service
- photographs/videos are taken to:
 - support the individual learning of each child for their formal record
 - record children's work and activities within the Service environment.

FAMILIES (Parents/carers)

- will be invited to record their child's inclusion in group events and celebrations through the use of photographs or video on the understanding that they will not publish any material on the Internet, including on their personal social media, as the Service has no control over these images once they are in the public domain. (*see Social Media Policy*)

- will be requested to provide written permission/consent for staff/educators, students or volunteers to take photos of their child/ren for assignments as part of their children services/university course
- will be requested to provide written permission/consent for individuals visiting the Service to take photographs of their child/ren (e.g. professional photography for marketing, school photos etc.)
- are required to provide written notification to the Nominated Supervisor if they do **NOT** want their child to be photographed or their photo published in any form. The Nominated Supervisor keep a record of children who are not to be photographed and notify relevant educators/staff.
- are aware they have the choice to withdraw consent for their child to be photographed or filmed in certain circumstances
- written notification is required if parents/families do **NOT** want their child included in photography opportunities which may include:
 - video of children taken for the children to be able to watch themselves at play. These videos may be made available to all families to view at various times.
 - when children are invited to take photographs or video either with digital cameras or tablets with story-making apps to support language and literacy development. Hard copies of these may be printed and made into a book produced by children. These will remain within the Service but may be viewed by families and visitors.

SOURCE

Byrnes, J., & Wasik, B. (2009). Picture this: Using photography as a learning tool in early childhood classrooms. *Childhood Education, 85*.

Child Protection Act, 1998.

Education and Care Services National Regulations. (2011).

Guide to the National Quality Framework. (2017). (Amended 2020).

Guide to the National Quality Standard. (2017).

NSW Government, Office of the Children’s Guardian *Child Safe Standards* (2020).

Privacy Act 1988

Revised National Quality Standards. (2018).

Victoria State Government Department of Education and Training (2020). *Child Safe Standards: Creating a safe environment*

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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PHYSICAL ENVIRONMENT POLICY

The physical environment can contribute to children's wellbeing, happiness, and creativity as well as promoting the development of independence. It can contribute to and make visible the quality of children's learning and involvement in experiences. The choices made in an OSHC service about resources, materials, spaces, layout, air, and light in combination with access to a range of experiences in the indoor and outdoor areas, have a direct impact on the quality of learning opportunities available to children.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.

3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
82	Tobacco, drug and alcohol -free environment
86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises
102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing and security
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements—indoor
108	Space requirements—outdoor space
109	Toilet and hygiene facilities
110	Ventilation and natural light
111	Administrative space
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision
123	Educator to child ratios- centre based services
156	Relationships in groups
168	Education and care service must have policies and procedures
171	Policies and procedures to be kept available

RELATED POLICIES

Animal and Pet Policy Environmentally Responsible Policy Programming Policy Work Health and Safety Policy Health and Safety Policy	Road Safety Policy Sleep and Rest Policy Sun Safety Policy Water Safety Policy
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PURPOSE

Our Vacation Care Service will ensure the environment is safe, clean, and well maintained for children, families, educators, and visitors. Children’s awareness of the environment and sustainable practice will be supported through daily practices, resources and interactions. The physical environment will support children’s participation and engagement, development, learning, and safety, and will provide supervised access to positive experiences and inclusive relationships.

SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

IMPLEMENTATION

Our Service is committed to providing an environment that promotes safety and enhances children’s learning and development by:

Choosing appropriate resources and equipment

- Appropriately sized furniture and equipment will be provided in both the indoor and outdoor environment for the age ranges represented in the service.
- The Approved Provider will be responsible for any large purchases of equipment. The Nominated Supervisor is responsible for consumables and the daily running purchases of the service.
- Educators will provide ideas for equipment and materials purchase based on the needs and interests of their classroom.
- Educators will complete a log for the Nominated Supervisor of equipment that needs maintenance on a prioritised basis.
- The Service will actively seek the input of parents/guardians regarding current interests of their children to purchase appropriate toys and equipment for the service.
- Resources and equipment will be chosen to reflect the cultural diversity of the Service’s community and the cultural diversity of contemporary Australia, including the incorporation of the Aboriginal and Torres Strait Islander community.

- Children will be provided with resources and equipment that encourages appropriate challenges and risk taking in accordance with their individual developmental level.
- The environment will be organised to ensure safety and minimal disruption for children whilst playing.
- Specific equipment requirements of children with additional needs will be catered for to ensure an inclusive environment.
- Frequent risk assessments of the indoor and outdoor environment will be conducted in order to minimise risk and hazard when required.
- An environment will be provided that allows different types of play to occur both in the indoor and outdoor areas (e.g. quiet play areas and loud play areas)
- A natural environment for children to explore and experience will be provided which may include plants, trees, gardens, rock, mud and/or water.
- Educators will participate in on-going professional development in order to enhance children's learning and ensuring a safe and educational environment.
- Our Service will work within our Sun Safety policies and procedures, providing adequate shade for children in accordance with the recommendations of relevant authorities.
- An environment that ensures children are appropriately supervised at all times will be provided.
- All required fencing will be maintained in good condition and is compliant with current regulations.
- A variety of indoor and outdoor experiences will be provided, catering for children's interests and abilities.
- Children will be supported to access appropriate furniture, resources, materials, toys and equipment. These resources will be adequate in number for the number of children attending our Service and be developmentally appropriate.
- A developmentally appropriate environment will be provided where children can explore, solve problems, create, construct and engage in critical thinking.
- An environment will be provided that permits children to participate in activities independently or in small groups, and access resources autonomously.
- The environment will incorporate commercial, natural, recycled, homemade, and real resources that can be used in a variety of ways to encourage children's learning and creativity.
- Sufficient and accessible hand-washing, toileting, and eating facilities will be available.
- Natural and artificial lighting, appropriate ventilation, heating, cooling and fresh air will be incorporated into the building.
- Appropriate areas for food preparation are provided.

- An area for managerial purposes, consultation with children's parents and for private conversations to occur is available.
- Power points not in use have safety caps, all double adaptors and power-boards are out of reach of children, and all electrical cords are secured and not dangling.
- Educators discuss the safety characteristics of using toys and equipment with children.
- Where appropriate children are involved in setting classroom guidelines.
- A maintenance log and register of toys and equipment is maintained.

Rearranging, Adding or Removing Furniture

- The Service will keep a record or photo evidence of any changes that is made to the physical environment of the Vacation Care Service, such as rearranging of rooms etc. to show continuous improvement.
- The Service will document the links between the arrangements and choice of resources and equipment and the children's learning in the program.

Ongoing Maintenance

- The Nominated Supervisor will document required maintenance in a maintenance plan/log for the Service as required. Repairs and maintenance will be conducted throughout the year according to priority including, hazard removal, safety precautions and any relevant policies.
- The Approved Provider/Nominated Supervisor will also ensure that the Service and its grounds comply with Local Government and BCA regulations in regard to fire-fighting requirements, ventilation, natural and artificial lighting, and safety glass.

Safety Checks

A weekly or when required inspection of the premises will be undertaken before children arrive. This inspection will include:

- Service perimeters
- Fences/Fence Line
- Gates
- Paths
- Buildings
- All rooms accessible by children
- Fixed equipment

This must be done to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals.

In the event of a sharp object being found (for example a syringe) educators will wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council.

Similarly, trees in the grounds must be checked regularly for overhanging, dead, or dangerous looking branches as well as checked for any infestations.

The Vacation Care Service will have regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any further recommended treatments as a result of the findings from the pest control check will be carried out in a timely manner.

The Indoor and Outdoor Daily Safety Checklists will be used as the procedure to conduct these safety checks. A record of these will be kept by the service. The Approved Provider/Nominated Supervisor will make the appropriate arrangements to have repairs carried out as soon as possible.

The following is a guideline:

Outdoor checklist that may include some or all of the following:

- Building maintenance** – regularly maintain and check for hazards, check building is in a safe, clean and hygienic condition. Records of any damage and subsequent repairs are kept.
- Doors** – have finger jam protectors.
- Dust mites, pet allergens** – regular dusting and vacuuming.
- Educator's personal items** – Educator's personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children.
- Ensure children are visible and supervised at all times.** High-risk areas and climbing and other outdoor play equipment are supervised at all times. Hazardous equipment, machinery, chemicals, and any other materials is inaccessible to children.
- Fences** – securely and effectively provide a suitable barrier to all sides of outdoor play areas from roads, water hazards, and driveways. Fences have correct height for the purpose. Childproof self-locking devices are installed on gates.
- Finger entrapment** – all holes or openings in playground equipment are between 8-25 mm to avoid finger entrapment.
- First aid kit** is approved, maintained, and accessible throughout outdoor play.
- Garbage** – safe and prompt disposal. Lidded secure bins are used that prevent child access and are maintained in a clean and safe condition. Our Service participates in a recycling program.
- Garden** and renovation debris removed. Branches and bushes are regularly trimmed.
- Garages and sheds** – are keep locked.

- Hazardous Plants** – are identified and removed or made inaccessible to children.
- Heating, cooling, ventilation, lighting** – is comfortable, safe, maintained, guarded and kept out of reach of children.
- Machinery, tools and equipment** –all engine operated or other hazardous equipment, tools or machinery are stored securely and are inaccessible to children.
- Non-slip floors, stairs, and steps** are used and nonporous indoor floors for easy cleaning.
- Renovation** - dangers e.g. lead, asbestos, holes and excavations –risks are minimised according to the situation.
- Pesticide residue** - dangerous chemicals are not be used to remove vermin.
- Pet and animal droppings** are cleared or inaccessible to children in outdoor areas, dogs are excluded from children’s play areas, pet interactions with children are supervised.
- Safe play rules and adequate safe play areas** – we talk with children about how to play safely. We maintain safe layouts for outdoor play areas to avoid collisions between children.
- Safety glass** is installed according to the Australian Standards on all glass doors and windows accessible to children, and safety decals on both sliding doors and plate glass doors at child and adult eye level.
- Sandpits** – are covered when not in use, regularly cleaned, raked, and sand soiled by faeces or blood is removed. Sandpits are hosed and disinfected after removing contaminated sand and material.
- Service car park** – we ensure family members are aware of pedestrian safety rules such as holding their child’s hand and alighting children from the safety door. Families must always supervise their children in the car park to prevent accidents and injuries, which could occur as a result of reversing vehicles.
- Spills** – are cleaned up as they occur
- Sun protection** - clothing, hats, and sunscreen, for un-shaded areas – we minimise play at peak sun exposure times. A sunshade or natural shade covers sandpits and play areas.

Checklist: Indoors

- Access for children and adults with disability** - safe access is provided into, within and out of the Service. Toilet and washing facilities, are checked for hazards for wheelchairs and people with impaired sight, hearing or mobility.
- Children at risk** – we maintain extra security and supervision for children at special risk.
- Decorations and children’s artwork** – are not placed near ceiling fans, air conditioners or heaters. The use of tacks, pins, and staples is avoided.
- Educator’s personal items** –Educator ‘s personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children.

- Emergency evacuations** –an evacuation plan and emergency contact numbers are displayed, families are informed, and evacuation procedures are regularly practiced.
- Fire** – fire blanket, extinguisher, fire exits, smoke detectors, electrical safety switch are checked regularly and serviced as required.
- First aid kit** with approved contents is maintained and accessible. First Aid certificates are current for relevant educators.
- Hazardous indoor plants** are identified or removed.
- Heaters** –children cannot come in contact with hot surfaces. It is preferable to use heating where combustion products are ducted outside. If gas heating is used ensure there is adequate ventilation while the heater is operating.
- Hot water** - the hot water supply is regulated so as to keep it below the temperature at which a child can be scalded (the current KidSafe NSW Inc. recommendation is below 43.5°C).
- Machinery, tools and equipment** – all office and classroom machinery, tools, and equipment is stored securely and inaccessible to children.
- Noise** – we reduce excessive exposure.
- Non-slip, non-porous** floors and stairs are in the building.
- Pets and animals** –families are informed of pets being kept on the premises and plans to obtain new pets. Pets are vaccinated, wormed, don't have fleas, are clean, and healthy.
- Record details** - Parents are notified of any child accident.
- Safe play rules and adequate play spaces:** we discourage running indoors and provide safe furniture layout to avoid collisions.
- Safety glass used and installed** according to Australian Standards, and Australian Building Codes on all glass doors and windows accessible to children, **safety decals** on sliding doors and plate glass doors at child and adult eye level
- Smoke free environment** in all areas.
- Store in locked cabinet** any unsafe items, e.g. chemicals, medicines, razors, knives and electrical equipment.
- Supervision and visibility of children** –children are visible and supervised at all times. High-risk areas requiring extra supervision include adventurous play experiences, playground equipment, ball sports. At least two educators are on the premises at all times within sight of each other and the children.
- Toys** – meet safety standards, age appropriate, maintained, and non-toxic.

Cleaning of Buildings, Premises, Furniture and Equipment

General Cleaning

- The Service will use cleaning schedules to ensure that all cleaning is carried out regularly and thoroughly.
- Educators will clean the Service at the end of each day and as needed.
- Accidents and spills will be cleaned up as quickly as possible to ensure that the Service maintains a high level of cleanliness and hygiene.

When purchasing, storing and/or using any dangerous chemicals, substances, medicines or equipment, our Service will:

- Always adhere to manufacturer's advice and instructions when using products to clean furniture and equipment at the service.
- Store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times.
- Any substance found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where applicable will not be used under any circumstances.
- Containers will be disposed of correctly following local council guidelines, and not reused under any circumstances.
- All dangerous chemicals, substances and equipment must be stored in a locked place or facility that is labelled, secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges and toiletries.
- Educators will follow the instructions of manufacturers, particularly of any product that may need to be stored in a refrigerated environment as per instructions.
- Any substances that need to be refrigerated must be stored in a labelled, child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children.
- All hazardous chemicals must be supplied with a **Safety Data Sheet** (SDS) formerly called a Material Data Safety Sheet. Our Service will adhere to the manufacturer's instructions for use, storage, and first aid instructions recorded on the SDS.
- The Service will keep a register of all hazardous chemicals, substances and equipment used at the Service. Information recorded should include where they are stored, their use, any risks, and first aid instructions and the current SDS. The register will be readily accessible.
- Appropriate personal protective clothing should be worn in accordance to the manufacturer's instructions when using and disposing of hazardous substances or equipment.
- Seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on **13 11 26**, who may advise you to call an Ambulance on **000**.

- In the case of any child or educator becoming injured by a chemical, substance, or equipment, the Service will initiate our emergency, medical and first aid procedures, immediately notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- In any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard, call the emergency services, dial 000 and notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.
- The **Poison Safety Checklist** will be used in order to ensure we are consistently meeting requirements.

Children's bathroom

- Children will be actively supervised whilst accessing toilet facilities to ensure other children are safe from harm.
- Educators will check the toilet facilities for safety and materials prior to commencement of daily program
- Educators and other staff will encourage children to follow appropriate hygiene practices- hand washing, not playing in bathrooms.
- Bathrooms will be cleaned at least daily and at other times as required.
- Bathroom floors will be mopped at least daily.
- Signage is to be used after mopping to ensure that children, educators and other staff and families are aware that the floor is wet.
- Educators are to ensure they follow the bathroom and toilet cleaning procedure.

Inspection and Testing of Electrical Equipment

- Our Vacation Care ensures that electrical equipment is regularly inspected and tested by an accredited person if the electrical equipment is supplied with electricity through an electrical socket and used in conditions where it could be damaged, including exposure to moisture, heat, vibration, mechanical damage, corrosive chemicals or dust.
- A record of all electrical testing and tagging must be attached and kept until the equipment is next tested or disposed of and must specify:
 - a) The name of the tester.
 - b) The date and outcome of the testing.
 - c) The date on which the next testing must be carried out.

Maintenance of Fire Equipment

- All fire equipment at our Service will be maintained as per the legal standards.
- External agencies will be employed to assist the Service with this maintenance if no currently employed staff or educators are qualified to complete the maintenance checks.

Sun Protection

Our Vacation Care Service implements the NSW SunSmart Program to ensure children's health and safety is maintained at all times whilst at the service. We will use the SunSmart UV Index tool to ensure we are protecting children and staff from UV radiation. Educators will document the UV rating each day to ensure the safety of children, staff, and Educators. The UV Index will be used when:

- Planning or participating in outdoor activities
- Undertaking recreational activities – for example munch and move.

1. Outdoor Activities

The Service will use a combination of sun protection measures whenever **UV Index levels reach 3 and above**. This will include:

- From October to March sun protection is required at all times. Extra sun protection is needed between 11am and 3pm and during this period outdoor activities should be minimised. Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.
- From April to September (excluding June and July) outdoor activity can take place at any time. However, from 10am – 2pm sun protection is required.
- In June and July when the UV index is mostly below 3, sun protection is not required. Extra care is needed for services in the far west and north of NSW and for all children who have very fair skin.
- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions.
- Educators will continue to check the UV rating prior to going outdoors and as the heat increases throughout the day.

2. Shade

The service will provide and maintain adequate shade for outdoor play. Shade options can include a combination of portable, natural and built shade. Regular shade assessments will be conducted to monitor existing shade structures and assist in planning for additional shade.

3. Hats

Educators and children are required to wear sun safe hats that protect their face, neck and ears. A sun safe hat is a:

- Legionnaire hat.
- Bucket hat with a deep crown and brim size of at least 5cm (adults 6cm).
- Broad brimmed hat with a brim size of at least 6cm (adults 7.5cm).

Please note - baseball caps or visors do not provide enough sun protection and therefore are not to be worn in this service.

Children without a sun safe hat will be asked to play in an area protected from the sun (e.g. under shade, veranda or indoors) or can be provided with a spare hat.

4. Clothing

When outdoors, educators and children will wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- Loose fitting shirts and dresses with sleeves and collars or covered neckline.
- Longer style skirts, shorts and trousers.
- Enclosed shoes and socks to protect children's feet

Children who are not wearing sun safe clothing can be provided with spare clothing.

Please note: midriff, crop or singlet tops do not provide enough sun protection and therefore are not to be worn by children nor staff.

5. Sunscreen

All Educators and children will apply SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours. Sunscreen is stored in a cool, dry place and the use-by-date monitored.

6. Role Modelling

Educators will act as role models and demonstrate sun safe behaviour by:

- Wearing a sun safe hat (see Hats).
- Wearing sun safe clothing (see Clothing).
- Applying SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors.
- Setting up experiences in shaded areas.
- Wearing sunglasses that meet the Australian Standard 1067 (optional).

Families and visitors are encouraged to role model positive sun safe behaviour.

7. Education and Information

Sun protection will be incorporated regularly into learning programs. Sun protection information will be promoted to educators, families and visitors. Further information, support and free resources are available from the Cancer Council website www.cancercouncil.com.au/sunsmart or call the SunSmart Information Line on 02 9334 1761.

8. Policy Availability

The sun protection policy, updates and requirements (including hat, clothing and sunscreen) will be made available to educators and staff, families and visitors.

9. Review

Our Service will monitor and review the effectiveness of our sun protection policy regularly, at least once every 12 months.

Water Safety

- Make sure no child swims in any water without:
 - Written permission from family member to learn water safety and swimming.
 - Appropriate educators/child ratios in place.
 - Having sufficient numbers of educators present who have first aid or recognised water safety and rescue procedures.
- At all times children near water are closely supervised. A child will never be left unattended near any water.
- Staff will ensure that all water containers are made inaccessible to children and also make sure children's play areas are safely fenced off from water hazards such as rivers, dams, creeks, lakes, irrigation channels, wells etc where necessary.
- All wading pools/water troughs etc. will be immediately emptied after every use: storage will prevent the collection of water e.g. upright/inverted. The grounds will also be checked after rain or watering and water that has collected in holes or containers will be emptied/removed.
- Wading/water troughs, slipping slides are hygienically cleaned, disinfected, and chlorinated appropriately:
 - On a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant.
 - Wash away disinfectant before filling trough.

Service Closure

- Educator/s are to check the entire premises to ensure that all children and families have departed by checking sign in and out sheets for all rooms.
- Educator/s must sign the sign in and out sheets confirming all children are signed out.
- Educator/s are to follow Service-closing procedures each night.
- In the case where a parent has omitted to sign their child out, and the Educators did not witness the child leave the Service, the Educator/s must take every step to get in contact with the parent to ensure the child has safely left the Service.
- If unable to contact the family, the Educators are to contact other Educators present on that day for confirmation that the child has been collected. The Nominated Supervisor is to then be notified before leaving the Service.
- Individuals visiting our Service must also sign in when they arrive at the Service and sign out when they leave.

Source

Australian Children's Education & Care Quality Authority. (2014).

Cancer Council NSW: <https://www.cancercouncil.com.au>

Cancer Council Australia: <https://www.cancer.org.au>

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2017)-(2020)

National Health and Medical Research Council. (2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

NSW Sample Sun Protection Policy: <https://www.cancercouncil.com.au/wp-content/uploads/2010/09/Final-Activated-PDF-Workplace-sun-protection-policy-general-November-2013.pdf>

Red nose Safe environment <https://rednose.org.au/section/safe-environment>

Revised National Quality Standard. (2018).

Swimming Pools Act 1992

Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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ROAD SAFETY POLICY

Traffic related injuries remain one of the leading, preventable causes of death and serious injury for young children. Driveways, car parks, unfenced yards, private roads, and farms are particular danger areas and many young children, predominantly toddlers, are killed or injured each year in their own home driveway (Kids and Traffic, 2014; Kidsafe, 2018).

Our duty of care as an Out of School Hours Care (OSHC) Service, is to provide children with an adequate level of care and protection to safeguard their health, safety and wellbeing at all times. Our Vacation Care Service is committed to providing road safety education to help children become responsible road users as pedestrians, passengers and users of bikes, scooters, skateboards and other wheeled toys.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursions
101	Conduct of risk assessment for excursions
102	Authorisation for excursions
102A	Transportation of children other than as part of an excursion

102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
136	First Aid qualifications
s165	Failure to adequately supervise children
s167	Failure to take reasonable precautions to protect children from harm and hazards

RELATED POLICIES

Arrival and Departure Policy Acceptance and Refusal Policy Child Safe Environment Policy Death of a Child Policy Excursion Policy	Incident, Injury, Trauma and Illness Policy Safe Transportation Policy Supervision Policy
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PURPOSE

Our Vacation Care Service will ensure best practice guidelines are implemented to ensure that children are kept safe whilst travelling as pedestrians, cyclists, and passengers in vehicles. As educators, we encourage families to participate in road safety education with their children to support them to become safe and responsible on and around roads.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

To comply with National Law and Regulations Early Childhood Services are required to protect children from harm and hazards likely to cause injury. To ensure compliance, management and educators of the Service will ensure best practice is adhered to, maintaining children’s health and safety.

MANAGEMENT WILL ENSURE:

- regular discussions are held with feeder schools to ensure consistency in road safety education and procedures between schools and our Vacation Care Service
- a comprehensive risk assessment is conducted at least annually for ‘regular transportation’ of children including the safest route for travel, method of travel, type of vehicle, required restraints,

proposed pick up and destination, process of embarking the means of transport including how each child is to be accounted for upon embarking and disembarking the vehicle

- adequate supervision is provided at all times children are transported
- every reasonable precaution is taken to protect students from harm and hazards likely to cause injury
- written parental consent for regular transportation of children to and from school is provided during the enrolment process as part of our *Safe Transportation Policy*
- all risk assessments are regularly assessed and evaluated as to facilitate continuous improvement in our service
- educators only allow a child to participate in an excursion with the written authorisation of a parent/guardian, in accordance with National Regulations (*Refer to Excursion policy*).
- road safety education is embedded in the program supporting children's understanding and knowledge
- educators have access to regular professional development and training in road safety, complying with National Regulations and standards
- parents and guardians are provided with specific road safety information, including:
 - parking safely
 - locking their car
 - local area speed limits.
- parents are provided with general road safety information about transporting children to and from the Service, including:
 - driveway safety
 - child restraint information
 - using the kerb side door to access the car and
 - the importance of role modelling safe road and car park use.
- parents have a clear understanding about our policies in order to keep children safe
- the Educational Leader educates staff about the importance of road safety
- any educator responsible for driving a vehicle for the Service holds a current Australian Drivers licence
- the vehicle/bus used to transport children is registered and maintained (tyres, engine) and has correctly fitted child restraints and seat belts
- the vehicle used to transport children has enough fuel to complete the journey
- the regulatory authority is notified within 24 hours of becoming aware of a serious incident (Reg.12).

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- risk assessments are carried out prior to seeking written parental authorisation for transporting children for regular transportation
- written parental permission for regular transportation at least every 12 months
- a risk assessment is completed prior to any excursions to ensure the safest route and minimise or manage any potential risks
- children participate in excursions only if they have written parent permission
- children are adequately supervised at all times
- compliance with first aid requirements of Regulation 136 are met at all times
- every reasonable precaution is taken to protect students from harm and hazards likely to cause injury
- adequate supervision is provided
- educator to child ratio requirements are maintained at all times, including when children are being transported as part of the service activity
- children's attendance is checked against an accurate attendance record showing when children are within the care of the Vacation Care Service. The record of attendance must record the time that the child arrives and departs the Vacation Care Service and signed by the nominated supervisor or educator
- educators remain current with roads and traffic professional development
- educators have a clear understanding and comprehension of National Regulations and Standards in regard to keeping children safe in and around traffic
- road safety is embedded into the program, supporting children's understanding and knowledge
- appropriate road safety expectations are discussed with families including:
 - not leaving children in the car
 - intoxication whilst driving
 - child restraints are fitted correctly for the size and age of their child
- educators are aware of their duty of care obligations and understand how to address a situation where they observe parents/families putting children at risk of harm or injury due to unsafe practices for road/car safety-
 - travelling in a car unrestrained
 - parent appears unfit to drive (intoxicated, drug affected)
 - children riding a bike without a helmet
 - parent not supervising children crossing roads

EDUCATORS WILL:

- take every reasonable precaution to protect children from harm and from any hazard likely to cause injury
- communicate excursion requirements with the Nominated Supervisor and Management to ensure they have a clear understanding about policy and procedures
- have a comprehensive understanding of the National Regulations and Standards
- educate children about the importance of road safety, obeying the rules, listening to families, holding hands, pedestrian safety, car safety etc.
- embed road safety guidelines into the program for children to gain a clear understanding and knowledge required to stay safe around roads and traffic.
- discuss road safety expectations and guidelines with families, including making families aware of young children's limited capacity to judge distances and speeds of travelling vehicles
- follow appropriate procedures in the event of a vehicle accident including children, educators or families, including informing management at the earliest possible convenience
- adhere to their duty of care to protect children from harm and keep children safe
- follow guidelines/procedures for discussing concerns with parents/families or reporting this concern to the Approved Provider or Police (see below)

NOTIFICATION

Parents will be notified as soon as practicable but within 24 hours if their child is involved in an accident at the Vacation Care Service or whilst under our service care. Details of the incident/accident will be recorded on an *Incident, Injury, Trauma and Illness Record* and parents will be required to acknowledge the details upon collection of their child.

If the incident/accident, situation or event presents imminent or severe risk to the health, safety and wellbeing of the child, or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours by the Nominated Supervisor or Approved Provider.

PARENTS/FAMILIES ARE RESPONSIBLE FOR:

- reading, signing and dating permission forms prior to excursions to confirm they agree to the excursion conditions
- providing written authorisation for their child to be transported to and from the Vacation Care Service as 'regular transportation' at least annually

- ensuring their child/children travels in an appropriate and approved restraint suitable for their age and weight
- being aware of and complying with road and car park safety requirements when arriving and departing from the Service
- never leaving a child/children and/or animal in the car alone at any time
- using the 'safety door' (closest to the kerb) when arriving and departing the Service
- being aware of the Service policy relating to the safe transportation of children to and from the Vacation Care Service (see: Safe Transportation Policy)
- communicating any concerns relating to their child's wellbeing or safety to an educator or Nominated Supervisor.

DUTY OF CARE

All educators have a duty of care to ensure the safety of children at all times. Where a parent or guardian is observed demonstrating unsafe behaviour such as: not securing a child in a suitable restraint (under 7 years of age), parking incorrectly or driving erratically, not providing a bike helmet for the child to wear on a bike or scooter, crossing roads incorrectly, educators should-

- talk to the parent about their concerns calmly
- provide a copy of this policy to the parent
- provide information to the parent about safe transportation of their child
- provide information about the use of helmets when riding to the parent
- inform the Nominated Supervisor or Approved Provider

If the parent/guardian arrives at the Service and does not appear fit to take care of the child (intoxicated or under the influence of drugs), educators should:

- discuss their concerns with the parent
- suggest that another parent or authorised nominee collects the child
- contact an authorised nominee to collect the child
- notify the police or child protection if they have any concern for the child's safety
- contact the Nominated Supervisor and/or Approved Provider
- document the actions for evidence

(see: Acceptance and Refusal Policy; Arrival and Departure Policy)

USEFUL RESOURCES

Child Road Safety: www.childroadsafety.org.au

Kids and Traffic: <http://www.kidsandtraffic.mq.edu.au/>

Kidsafe Inc: www.kidsafensw.org/road-safety/

[Kids and Traffic- Early Childhood Road and Safety Education Program](#)

Road Safety Education Victoria Teaching Resources Early Childhood

<http://www.roadsafetyeducation.vic.gov.au/teaching-resources/early-childhood>

Transport for NSW Centre for Road Safety

<https://roadsafety.transport.nsw.gov.au/aboutthecentre/resources/index.html>

Transportation of children with Additional Needs ELAA <https://ela.org.au/wp-content/uploads/2016/10/Safe-transport-for-children-with-additional-needs.pdf>

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education, Skills and Employment. (2011). *My Time Our Place: Framework for School Age Care in Australia*.

Early Learning Association Australia

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Kids and Traffic: Early Childhood Road Safety Education Program. (2014): <http://www.kidsandtraffic.mq.edu.au/>

Kidsafe: Child Accident Prevention Foundation of Australia. (2018): <https://kidsafe.com.au/statistics-2/>

Revised National Quality Standard. (2018).

Road Transport (Safety & Traffic Management) Act 1999.

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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SAFE STORAGE OF HAZARDOUS CHEMICALS POLICY

By maximising awareness of the potential hazards of chemicals and equipment, we aim to minimise the risk of harm to staff, educators, children and families by ensuring hazardous products are safely stored, handled, and controlled.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
Section 167	Offence relating to protection of children from harm and hazards
82	Tobacco, drug and alcohol-free environment
85	Incident, injury, trauma and illness policies and procedures
97	Emergency and evacuation procedure
106	Laundry and hygiene facilities

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Environmentally responsible policy Health and Safety Policy	Incident, Injury, Trauma and Illness Policy Work, Health, and Safety Policy
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PURPOSE

Our Vacation Care Service aims to protect children, families and visitors from hazard and harm at all times. We promote the use of environmentally friendly products where possible and ensure we provide a safe environment where chemicals and hazardous products and equipment are safely stored and managed away from children and are handled appropriately.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

MANAGEMENT WILL ENSURE:

- that every practical measure is taken to protect children being educated and cared for by the Service from harm and any hazard likely to cause injury
- a smoke free environment is provided to children, staff, families and visitors at all times
- all dangerous goods and hazardous substances are identified within the Service and included in the chemical register
- a risk assessment has been conducted in consultation with the Health and Safety Representative prior to using any potentially dangerous or hazardous substance
- educators adhere to the Service procedures for dealing with and handling chemicals
- Safety Data Sheets (SDS) and the Chemical Register is readily available and regularly updated
- appropriate training and Personal Protective Equipment (PPE) is provided for employees who may be exposed to dangerous goods and/or hazardous substances
- relevant signage is displayed highlighting the hazardous nature of chemicals used or stored in the Service (e.g. Caution- Chemical Storage Area; Danger; Hazardous Chemicals)
- there are emergency procedures and practices for accidental spills and/or contamination and corresponding first aid plans for all dangerous goods handled and stored in the Service
- action is taken to remove any pests or vermin by a licensed exterminator, who will provide the Service with a certificate of currency. Initially, using non-chemical methods such as physical removal, maintaining a clean environment, and use of any non-toxic products will be implemented.

THE NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- at least one educator/staff member is in attendance on the premises with ACECQA approved first aid qualifications at all times

- all staff are made aware of correct storage and usage procedures for potentially hazardous materials during their initial orientation at the Service
- there are appropriate and lockable storage facilities in the Service in which dangerous products are stored
- dangerous products will be stored in areas of the Service that are not accessible to children or in cupboards fitted with key
- a hazardous substances register is used and regularly updated when required
- a risk assessment for any dangerous materials stored in bulk within the education and care premises has been carried out and is regularly updated when required
- Safety Data Sheets (SDS) are maintained at the Service. Safety Data Sheets must be kept on all chemicals used on the premises. Work Health and Safety (WH&S) officers are to keep this information up to date at all times, with a review of the folder annually. No SDS is to be more than 5 years old.
- chemicals in spray bottles are clearly labelled with contents and are not used with children in the immediate vicinity
- in the event of any incident involving accidental exposure to chemicals or other hazards or incident involving possible poisoning, an *Incident, Injury, Trauma and Illness Record* will be completed
- if a serious incident occurs involving the need for medical intervention or emergency services, notification is made to the Regulator Authority within 24 hours

EDUCATORS WILL:

- seek medical advice if needed by contacting the **Poisons Information Line (13 11 26)** or by calling 000
- wear Personal Protective Equipment (PPE) when handling dangerous substances or materials.
- not use spray bottles containing chemicals in the immediate vicinity of any child or children
- read the label before using any cleaning material, sprays or chemicals and strictly adhere to the '*Directions for use*' and be aware of appropriate first aid measures
- store all dangerous products in well-labelled and original containers that preferably have child resistant lids and caps in a secure and locked place/cupboard, inaccessible to children
- ensure all chemicals and cleaning products are returned to their designated location immediately upon completion of cleaning tasks
- not mix cleaning products as there is the potential for harmful chemical reactions to occur endangering all persons on the premises

- dispose of all products safely, in accordance with the manufacturer's instructions on the product label, Work Health and Safety regulations, and Council by-laws
- be encouraged to attend professional development sessions to maximise their awareness of dangerous products and potential hazards, and source chemical free methods to reduce possible hazards in the Vacation Care Service
- ensure cleaning and hazardous products are not stored close to food products
- consider minimising the use of dangerous products in the education and care service and use alternate 'green cleaning' options
- complete WHS checklists to ensure that any dangerous products used within the Service have current Safety Data Sheets (SDS) and are stored appropriately.
- Only administer children's medications or allow self-medication with family authorisation and in accordance with medical directions (see *Administration of Medication Policy*)
- ensure medication is stored in an area inaccessible to children
- ensure any medications or dangerous substances that requires refrigeration, be placed in a labelled childproof container, preferably in a separate compartment of the fridge
- check that all remotes, toys and products containing button batteries have a screw to secure them

POISONING

Many products and materials that are used and kept within an education and care service are potentially poisonous to children, especially young children. Poisonings can happen quickly, and toddlers are most at risk due to their tendency to put objects in their mouths. Educators must be aware of ensuring parents with toddlers visiting the Vacation Care service are adequately supervised at all times.

Poisonous substances may include medication, household cleaners, garden products, paint, cosmetics, toiletries, chemicals, batteries and petroleum products. Our Service will ensure all items that may cause harm to children in our care, and children who may be visiting our service, are inaccessible. Staff will keep their personal items in a cupboard/locker which is inaccessible to children.

Poisonous plants and trees can also cause safety risk to children and should be identified in any risk assessment conducted at the Service and risk mitigation strategies implemented including removal of any potentially dangerous/poisonous plants and trees.

Our Vacation Care Service will display a notice detailing the Poison information hotline in visible positions.

POISON INFORMATION HOTLINE 13 11 26

SOURCE

Australian Children’s Education and Care Quality Authority (ACECQA). (2019). Approved First Aid Qualifications: <https://www.acecqa.gov.au/qualifications/nqf-approved>

Australian Children’s Education & Care Quality Authority, 2014.

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

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REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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SAFE TRANSPORTATION POLICY

Our Vacation Care Service provides education and care for children during school holidays. At times we provide transportation between our Service location and other locations during these school holidays whilst participating on excursions.

Compliance with the Education and Care National Law and Regulations is mandatory to always ensure the safety of children and new provisions and amendments to these regulations are reflected in our procedures and policy for transportation and the safe handover of children.

We acknowledge our ensuring duty of care obligations by adhering to relevant legislation always providing adequate supervision of children, maintaining correct educator to child ratios, maintaining accurate attendance records and providing appropriate child restraints for children under our care.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND LAW	
4 (1)	Definition regular transportation
85	Incident, injury, trauma and illness policies and procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct a risk assessment for excursion
102A	Transportation of children other than as part of an excursion

102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
123	Educator to child ratios apply wherever the service is operating
136	First aid qualifications
158	Children’s attendance record to be kept by approved provider
161	Authorisations to be kept in enrolment record
168	Education and care service must have policies and procedures
168(2)(ga)	Education and care service must have policies and procedures (transportation)
170	Policies and procedures to be followed
s165	Failure to adequately supervise children
s167	Failure to take reasonable precautions to protect children from harm and hazards

RELATED POLICIES

Arrival and Departure Policy Administration of First Aid Policy Behaviour Guidance Policy Child Protection Policy Child Safe Environment Policy Enrolment Policy	Excursion Policy Incident, Injury, Accident & Trauma Policy Record Keeping and Retention Policy Responsible Persons Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure that all children being educated and cared for by our Service are adequately always supervised. This includes ensuring educator to child ratios are met whenever and wherever our service is operating including providing transportation as part of our Vacation care service activity.

SCOPE

This policy applies to children, families, staff, and management of the Vacation Care Service.

IMPLEMENTATION

The safety of children enrolled at the Vacation Care service is paramount. Every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury. Appropriate safety

measures have been implemented through our comprehensive risk assessment process to ensure supervision is adequate at all times during school holidays when children may be participating in excursions. Educator to child ratios are adhered to in addition to ensuring the maximum numbers on the service approval are not breached at any time. Adequate supervision is therefore not static as it is dependent upon a range of considerations documented in risk assessments. Specific risk assessments and procedures for excursions during school holidays are included in our Vacation Care Excursion Policy.

DEFINITIONS (effective 1 October 2020)

Regular outing: in relation to an education and care service, means a walk, drive, or trip to and from a destination.

- (a) that the service visits regularly as part of its educational program; and
- (b) where the circumstances relevant to the risk assessment are *substantially* the same on each outing

Regular transportation: in relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are *substantially* the same for each occasion on which the child is transported.

Written authorisation: authorisation given by a parent or other person named in the child's enrolment record as having authority to authorise the child being transported by the service or on transportation arranged by the service. If the transportation is regular transportation, the authorisation is only required to be obtained once in a 12 month period. The authorisation must state:

- a) the child's name; and
- b) the reason the child is to be transported; and
- c) if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outings; and
- d) if the authorisation is **not** for a regular transportation, the date the child is to be transported; and
- e) a description of the proposed pick-up location and destination; and
- f) the means of transport; and
- g) the period during which the child is to be transported; and
- h) the anticipated number of children likely to be transported; and
- i) the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation; and

- j) any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported; and
- k) that a risk assessment has been prepared and is available at the education and care service; and
- l) that written policies and procedures for transporting children are available at the education and care service.

TRANSPORT SPECIFIC RISK ASSESSMENT

As per the Education and Care Services National Law, our service will *'ensure that every reasonable precaution is taken to protect children...from harm and from any hazard likely to cause injury'* (Section 167).

Our Service will conduct comprehensive transport specific risk assessments to minimize and manage all potential risks for transporting children before authorisation is sought to transport a child. [Reg. 102B, 102D(4)].

A risk assessment will be undertaken at least annually for *'regular transportation'* of children. Each time our Service transports, or arranges, the transport of children as part of an excursion, a new risk assessment will be conducted. All risk assessments will be regularly assessed and evaluated as to facilitate continuous improvement in our service.

Our risk assessment process is guided by will:

- **identify** any hazards or potential hazards that transporting the child may pose to the safety, health and wellbeing of the child
- **assess** the risk of harm or potential harm using a risk matrix
- **specify how the identified risks will be managed** by eliminating or minimising the impact using control measures
- **evaluate** the current risk or potential harm by implementing control measures
- **review** and monitor the risk or potential harm to ensure it continues to be managed as a low risk

source: Risk assessment and management ACECQA (2020)

Our risk assessment will consider:

- a) the proposed route and duration of the transportation; and
- b) the proposed pick-up location and destination; and
- c) the means of transport; and
- d) any requirements for seatbelts or safety restraints (as per the law of our jurisdiction); and

- e) any water hazards; and
- f) the number of adults and children involved in the transportation; and
- g) given the risks posed by transportation, the number of educators or other responsible adults to provide supervision and whether any adults with specialized skills are required; and
- h) whether any items should be readily available during transportation (mobile phone, list of emergency contact numbers) and;
- i) the process for entering and exiting-
 - i. the education and care service premises; and
 - ii. the pick-up location or destination (as required); and
- j) procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking.

MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- risk assessments are carried out prior to seeking authorisation for transporting children is made with the Nominated Supervisor
- risk assessments for 'regular transportation' are evaluated regularly to ensure potential risks are identified and managed
- risk assessments for 'regular transportation' are reviewed at least annually
- details of the safest route for travel, type of vehicle and required restraints are included in the risk assessment
- regular role checks are done to ensure all children and educators are accounted for at all times
- every reasonable precaution is taken to protect students from harm and hazards likely to cause injury
- adequate supervision is provided (see below)
- educator to child ratio requirements are maintained at all times, including when children are being transported as part of the service activity
- compliance with first aid requirements of Regulation 136 is met at all times
- parents/guardians complete a written authorisation for transportation of their child and a copy of this is filed in the child's enrolment record
- children are instructed on processes for entering and exiting the Vacation Care service premises
- educator to child ratio requirements are maintained at all times
- children exit the bus/vehicle using the 'safety door'
- children wear approved seatbelts/restraints whilst the bus/vehicle is in motion in accordance with [state/territory] Road Rules and Road Transport Act

- children are never left unattended in the bus/ vehicle
- education on road safety for children is included in the Service's programming (for example Kids and Traffic)
- safety rules are developed with children to ensure a clear understanding of appropriate and inappropriate behaviour
- staff are aware of appropriate procedures to be followed in the event of a vehicle crash involving staff and children from the service
- a working mobile phone or other similar means of communication to communicate with the service, parents/carers is provided in case of emergency
- a list of emergency contact numbers for the children being transported
- every effort will be made to notify parents/carers of delays returning to the Service if applicable
- relevant criminal history requirements and Working with Children Checks are made and verified for any person transporting children. WWCC is recorded in staff records
- the person driving the vehicle/bus holds a current Australian driver's licence
- any allegation of misconduct of the educator or staff member will be reported immediately as per the Reportable Conduct Scheme detailed in our Child Protection Policy and/or Child Safe Environment Policy.

SAFE MAINTENANCE OF TRANSPORTATION VEHICLE

MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- the transportation vehicle is fitted with the required child restraints, approved by the Roads and Traffic Authorities (see Rule 266 of the Australian Road Rules)
- the vehicle has enough fuel to transport the children each excursion as in accordance to schedule
- the vehicle is registered, roadworthy and insured (general legal requirements and best practice standards are adhered to)
- any repairs are completed as soon as possible by a qualified mechanic
- drivers hold a current Australian driver's licence, licenced to carry the required number of passengers for the vehicle
- in the event of any mechanical or other breakdown, children will be kept safe, comfortable and occupied with suitable activities
- every effort will be made to notify parents/carers of delays returning to the Service if applicable

MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- adequate supervision is provided when children are being transported. Consideration must include:
 - the number, age and ability of children
 - visibility and accessibility
 - physical positioning of educators
 - risks related to the mode of transportation (including travel on foot)
 - risks in the environment, location and while travelling
 - the experience, knowledge and skill of each educator.
- an easily recognised and suitably equipped first aid kit is easily accessible during transportation
- educators carry medication, health plans and risk assessments for individual children
- educators are aware of emergency procedures in case of an incident, injury or illness of a child
- at least one staff member accompanying children during transportation holds:
 - an approved first aid qualification and
 - a current approved anaphylaxis management training qualification and
 - an approved emergency asthma management training qualification

PICKING UP CHILDREN AND DURING TRANSPORTATION

- the vehicle/bus will be parked in a safe location where children are not required to cross any roads (if this is unavoidable, a risk assessment and dedicated procedure for crossing the road will be completed)
- a 'head count' and roll call is done by the supervising educator/staff member as children assemble in a predetermined location prior to boarding
- children are continuously supervised during transportation by a designated educator/staff member sitting in a location that provides clear vision of all children
- children are to remain seated and secured in appropriate child restraints until the vehicle/bus has completely stopped
- the designated driver of the vehicle/bus complies with all appropriate road, safety and transport regulations
- under no circumstances will the driver of the vehicle/bus and educators supervising the children use handheld mobile phones unless safely parked
- under no circumstances will the driver and educators/employees supervising children be under the influence of alcohol or drugs

- the designated driver of the vehicle has the right, *if required* to stop in a safe place until the children conform to the safety guidelines. Parents will be notified if their child continues to be challenging and/or behaving in a dangerous manner.

DROPPING OFF CHILDREN

- children are to remain seated until the vehicle/bus has completely stopped
- a designated educator/staff member will assist children to safely disembark the vehicle/bus
- children exit the vehicle/bus using the 'safety door' or door located near the kerb
- a 'head count' and role call of children will be done by the supervising educator/staff as they assemble in a predetermined location at the end of the journey and verified by a witness
- educators/staff conduct a final sweep of the vehicle/bus, checking on and under seats to ensure there are no children or belongings left behind
- once all children have exited the bus a final sweep of the bus will be carried out to ensure there are no belongings left behind
- once inside (or on location) a role call will be done to ensure all children and educators are present

EDUCATORS/DRIVER WILL ENSURE:

- driver's licence is current, and they are licenced to carry the required number of passengers for the purpose
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- they adhere to the road rules and regulations mandated by law within each state/territory
- children remain seated and do not behave in a dangerous or inappropriate manner
- the vehicle is parked in a secure and safe location for children to access
- the number of passengers does not exceed the legal requirement
- a working mobile phone is taken in case of an emergency
- a fully equipped first aid kit is easily accessible
- educators/drivers wear a high visibility vest

FAMILIES WILL:

- adhere to the Service's *Arrival and Departure Policy* and *Safe Transportation Policy*

- communicate any change in transportation requirements for their child with management/nominated supervisor as soon as they are aware
- ensure written permission for transportation of their child by the Service is granted by either the parent or authorised nominee named in the child’s enrolment record
- update emergency contact numbers regularly

EDUCATOR TO CHILD RATIOS (ACECQA 2020)

Over preschool age	1:15	NT, QLD, SA, TAS, VIC, NSW
	1:11	ACT
	1:13	WA
		(or 1:10 if kindergarten children are in attendance)

RESOURCES

Childcare Centre Desktop

Safe Transportation of Children Module

- Transporting Children Risk Assessment Template
- Safe Transportation Procedure
- Bus Pick Up Drop Off Checklist

[Kids and Traffic- Early Childhood Road and Safety Education Program](#)

- Transporting children safely- Guidance on Understanding safe transport and travel requirements for education and care service providers (2020).
- Safe Travel and Transport- Advice for working with children, families, schools and communities (2020).

SOURCE

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Road Transport (Safety & Traffic Management) Act 1999.

Vic Roads- Primary school road safety education resources

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW: DECEMBER 2021
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SICK CHILDREN POLICY

Children come into contact with many other children and adults within the Service increasing their exposure to others who may be sick or carrying an infectious illness. The National Quality Standard requires the Out of School Hours Service to implement specific strategies to minimise the spread of infectious illness and maintain a healthy environment for all children, educators and families. We acknowledge the difficulty of keeping children at home or away from school and OSHC when they are sick and the pressures this causes for parents, however our Service aims to minimise the transmission of infectious diseases by adhering to regulations and policies protecting the health of all children, staff, families and visitors.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
88	Infectious diseases
90	Medical conditions policy
92	Medication record
93	Administration of medication
96	Self-administration of medication

RELATED POLICIES

Administration of First Aid Policy	Handwashing Policy
Administration of Medication Policy	Immunisation Policy
Control of Infectious Diseases	Incident, Illness, Accident and Trauma Policy
Coronavirus- COVID-19 Management Policy	Medical Conditions Policy
Enrolment Policy	Pregnancy in Early Childhood Policy
Family Communication Policy	

PURPOSE

We aim to maintain the health and wellbeing of all children, staff and their families, ensuring a healthy environment and minimising cross contamination and the spread of infectious illnesses by implementing best practice and high standards of personal hygiene within our Service.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Service has adopted the information on infectious diseases developed by the National Health and Medical Research Council and the Australian Government and published in *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition). We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the Vacation Care Service and at home.

We are guided by decisions regarding exclusion periods and notification of infectious diseases by the Australian Government- Department of Health and local public health units in our jurisdiction as per the Public Health Act.

This policy must be read in conjunction with our other Quality Area 2 policies:

- Control of Infectious Diseases Policy
- Immunisation Policy
- Incident, Illness, Accident and Trauma Policy and

- o Medical Conditions Policy and
- o Handwashing Policy

Staying Healthy: Preventing infectious diseases in early childhood education and care services (2013) explains how infections are spread as 'The Chain of Infection'.

There are three steps in the chain:

- o The germ has a source
- o The germ spreads from the source
- o The germ infects another person

The germ has a source

Germs can be picked up directly from an infected person or from the environment. It is important to understand that an infected person may not show any signs or symptoms of illness.

The germ spreads from the source

Germs can spread in several ways, including through the air by droplets, through contact with faeces and then contact with mouths, through direct contact with skin, and through contact with other body secretions (such as urine, saliva, discharges or blood).

Some germs can spread directly from person to person; others can spread from the infected person to the environment. Many germs can survive on hands, and on objects such as toys, door handles and bench tops. The length of time a germ can survive on a surface (including the skin) depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing hands and surfaces regularly with detergent and water is a very effective way of removing germs and preventing them spreading through the environment.

(Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, 5th Edition, 2013 p: 7)

The germ infects another person

When the germ has reached the next person, it may enter the body through the mouth, respiratory tract, eyes, genitals, or broken or abraded skin. Whether a person becomes ill after the germ has entered the body depends on both the germ and the person's immunity. Illness can be prevented at this stage by stopping the germ from entering the body (for example, by washing children's hands, by covering wounds), and by prior immunisation against the germ.

(Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, 5th Edition, 2013 p: 7)

Minimizing the spread of infections and diseases in Vacation Care Services

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can contribute to negative attitudes in the workplace, which can cause stress on families. Families may also experience guilt when they send their child to care who is not well.

However, it is imperative that families maintain a focus not only on the well-being of their own child but also upon the well-being of other children and the Educators of the Vacation Care Service. To protect the health of children and Educators within the Vacation Care Service, it is important that children and Educators who are ill are kept away from the Vacation Care Service for the recommended period.

At times, an outbreak of a new or 'novel' virus or infection, such as COVID-19, may require exclusion from the Service that is not specified in general exclusion periods for common infectious illnesses. Information, education and recommendations regarding any 'novel' virus will be provided by the Australian Government Department of Health and/or local public health unit.

(see **Excluding Children from the Service** section)

The need for exclusion and the length of time a person is excluded depends on:

- how easily the infection can spread
 - how long the person is likely to be infectious and
 - the severity of the infectious disease or illness.
- Our Educators are not medical practitioners and are not able to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our Vacation Care Service may ask the family to collect their child from care as soon as possible. Management and Educators *may* request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to care. **Please note; it is not always possible to obtain a doctor's certificate or clearance for suspected cases of an illness. The decision to approve a child's return is up to the Approved Provider/Nominated supervisor**

To help minimise the spread of illness and infectious diseases our Service implements rigorous hygiene and infection control procedures and cleaning routines including:

- effective hand washing hygiene

- cough and sneeze etiquette
- use of protective gloves
- exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- effective environmental cleaning including toys and resources and bedding
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service
- physical distancing (when recommended by Australian Health Protection Principal Committee [AHPPC] and/or Safe Work Australia)

CHILDREN ARRIVING AT THE VACATION CARE SERVICE WHO ARE UNWELL

Management will not accept a child into care if they:

- have a contagious illness or infectious disease
- have been in close contact with someone who has a positive confirmed case of COVID-19
- have a temperature above 37.5°C when assessed prior to entry to the service (effective during a pandemic or outbreak of an infectious disease)
- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature in the last 24 hours
- have vomited or had diarrhoea in the last 48 hours
- have started a course of anti-biotics in the last 24 hours
- have been given medication for a temperature (Panadol etc.)

Children who become ill at the Vacation Care service

Children may become unwell while at the Service, in which case Management and Educators will respond to children's individual symptoms of illness.

- Educators will closely monitor and document the child's symptoms on the Illness Register.
- Children who are unwell at the Service will be able to rest in a supervised area away from other children until parents or the emergency contact person is able to collect them
- Management will contact the parents/guardian if their child has passed runny stools/vomited whilst at the Service to be picked up and may only return once a Doctor's Certificate has been produced.
- Educators will take the child's temperature. If the child's temperature is 38°C or higher, management will contact the child's parents/guardian/emergency contacts as soon as possible to have the child picked up and provide verbal authorisation to administer paracetamol.

- Educators will attempt to lower the child's temperature by:
 - asking the child to remove excess clothing- shoes and socks, jumpers etc.
 - encouraging the child to take small sips of water
- Educators will continue to document any progressing symptoms.
- Educators will complete the *Incident, Illness, Accident and Trauma Record*, ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact.
- Educators will thoroughly clean and disinfect any toys, resources or equipment that may be contaminated by a sick child.

Common colds and flu

The common cold or flu (viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in childcare, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature.

In circumstances where a child appears to have cold or flu symptoms, management will determine if the child is well enough to continue at the Service or if the child requires parental care.

Our Service aims to support the family's need for childcare however, families should understand that a child who is unwell will need one-on-one attention which places additional pressure on staff ratios and the needs of other children.

Children who are generally healthy, will recover from a common cold in a few days. Keeping a child home and away from childcare, helps to prevent the spread of germs.

Influenza is a highly contagious illness and can spread to others for 24 hours before symptoms start. To prevent the spread of influenza our service encourages staff and children to be vaccinated once a year.

Reporting outbreaks to the public health unit

Management is required to notify the local [Public Health Unit](#) (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the OSHC Service is suffering from one of the following vaccine preventable diseases, any confirmed case of COVID-19 or outbreak of gastroenteritis.

- Diphtheria
- Mumps
- Poliomyelitis

- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ('German measles')
- Measles
- Pertussis ('whooping cough')
- Tetanus
- An outbreak of 2 or more people with gastrointestinal or respiratory illness.

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak.

Excluding children from the Vacation Care service

When a child has been diagnosed with an illness or infectious disease, the Service will refer to information about recommended exclusion periods from the [Public Health Unit](#) (PHU) and request a medical clearance from the GP stating that the child is cleared to return to the Vacation Care Service.

- When an infectious disease has been diagnosed, the Vacation Care Service will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and the exclusion period. This information can also be obtained from *Staying healthy: Preventing infectious diseases in early childhood education and care*.
- If a vaccine preventable disease occurs in the Vacation Care Service, children who have not been fully immunised will be excluded from care
- **A medical clearance from the child's General Practitioner stating that the child is cleared to return to the childcare setting will also be required before the child returns to care.**
- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for 48 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances.
- Children who have a suspected case of COVID-19 and meet the criteria for testing (fever, cough, sore throat, shortness of breath) are required to contact their GP or COVID-19 testing clinic. Exclusion periods will apply if they have a confirmed case.

Notifying families and emergency contact

- It is a requirement of the Vacation Care Service that all emergency contacts are able to pick up an ill child within a 30-minute timeframe.
- In the event that the ill child is not collected in a timely manner or should parents refuse to collect the child a warning letter will be sent to the families outlining Service policies and requirements. The letter of warning will specify that if there is a future breach of this nature, the child's position may be terminated.

MANAGEMENT AND EDUCATORS WILL ENSURE:

- effective hygiene policies and procedures are adhered to at all times
- effective environmental cleaning policies and procedures are adhered to all times
- all families are provided access to relevant policies upon enrolment which will be explained by management including: *Control of Infectious Diseases Policy, Sick Children policy, Incident, Accident and Trauma Policy, Handwashing Policy and Medical Conditions Policy.*
- that any child who registers a temperature of 38°C or above is collected from the Service and excluded for 24 hours since the last elevated temperature or until the Service receives a doctor's clearance letter stating that the child is cleared of any infection and able to return to child care.
- a child who has not been immunised will be excluded from the OSHC Service if an infectious disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our *Control of Infectious Diseases Policy.*
- families of a child with complex and chronic medical conditions will be notified in the event of an outbreak of an illness or infectious disease that could compromise their health
- families are notified to pick up their child if they have vomited or had diarrhoea whilst at the Service.

Note: Given that the children are enrolled in formal schooling they will be governed by their school's vaccination requirement policy and procedures.

THE APPROVED PROVIDER OR NOMINATED SUPERVISOR WILL ENSURE

- notification is made to the Regulatory Authorities within 24 hours of any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Education and Care 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

- any incident or emergency where the attendance of emergency services at the Education and Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)
- Parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring.
- notification is made to the Public Health Unit on 1800 020 080 of any confirmed cases of COVID-19
- notification is made to the Regulatory Authority within 24 hours of any confirmed cases of COVID-19

PARENT/FAMILY RESPONSIBILITY

In order to prevent the spread of disease, families are required to monitor their child's health and not allow them to attend Vacation Care if they have an infectious illness or display symptoms of an illness.

For children who have ongoing medical needs such as asthma or anaphylaxis, parents should regularly review their child's health care action plans to ensure educators and other staff are able to manage their individual needs as required.

Families should implement effective hygiene routines at home such as regular handwashing and sneeze and cough routines (use of tissues, covering their mouth with coughing, sneezing into a tissue or elbow).

Families should notify the Vacation Care service if your child has been unwell in the past 24 hours or someone in the family is/has been sick. This is particularly critical during a pandemic such as COVID-19.

Signs of illness in young children may include:

- Runny, green nasal discharge
- high temperature
- diarrhoea
- red, swollen or discharging eyes (bacterial conjunctivitis)
- vomiting
- rashes (Red/Purple)
- irritability, unusually tired or lethargic
- drowsiness
- breathing difficulty

- poor circulation
- poor urine output
- a stiff neck or sensitivity to light
- pain
- mouth sore
- impetigo

Parents should seek medical attention should your child (or other family members) develop symptoms such as:

- high fever
- uncontrolled coughing or breathing difficulties

Families should keep up to date with their child's immunisation, providing a copy of the updated immunisation schedule to the Vacation Care Service.

Returning to care after surgery

Children who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate and safe to return to Vacation Care.

A medical clearance statement may be required to ensure the child is fit and able to return to the Vacation Care Service and participate in regular activities.

Posters

Posters for Temperature Screening

[Poster for service entrance \(pdf - 42.94kb\)](#)

[Poster for staff \(pdf - 79.86kb\)](#)

[Poster for families \(pdf - 54.42kb\)](#)

NSW Health. COVID-19 symptoms and testing. (reference re: fever and temperature)

<https://www.health.nsw.gov.au/Infectious/covid-19/Pages/posters-and-print.aspx#symptoms>

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education, Skills and Employment *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).

Australian Government- Department of Health <https://www.health.gov.au/>

Australian Government Department of Health Australian Health Protection Principal Committee (AHPPC)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020)

National Health and Medical Research Council (NHMRC): <https://www.nhmrc.gov.au/>

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/pages/phus.aspx>

NSW Health Symptoms and testing COVID-19 <https://www.nsw.gov.au/covid-19/symptoms-and-testing>

Public Health Act 2010

Raising Children Network: <https://raisingchildren.net.au/guides/a-z-health-reference/fever>

Revised National Quality Standard. (2018).

The Sydney Children’s Hospitals network (2020). <https://www.schn.health.nsw.gov.au/search/site?query=fever>

Safe Work Australia

Victoria Department of Education and Training (2020).

https://www.education.vic.gov.au/childhood/Pages/coronavirus_ec_healthhygiene.aspx#link12

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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UV / SUN SAFE POLICY

Australia has one of the highest rates of skin cancer in the world with two in three Australians developing some form of skin cancer before the age of 70. Too much of the sun’s UV radiation can cause sunburn, skin and eye damage and skin cancer. Infants and toddlers up to four years of age are particularly vulnerable to UV damage due to lower levels of melanin and a thinner stratum corneum (the outermost layer of skin). UV damage accumulated during childhood and adolescence is strongly associated with an increased risk of skin cancer later in life (Cancer Council Australia).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation.
2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child

EDUCATION AND CARE SERVICES NATIONAL LAW	
167	Protection from harm and hazards

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
100	Risk assessment must be conducted before excursions

113	Outdoor space natural environment
114	Outdoor space shade
168	Education and care service must have policies and procedures
168 (2)(a)(ii)	Sun Protection

RELATED POLICIES

Clothing Policy Enrolment Policy Excursion Policy Health and Safety Policy	Physical Environment Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

To protect all children and staff from the harmful effects of ultraviolet (UV) radiation from the sun.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service. To ensure the outdoor environment provides shade for children, educators and staff to minimise unsafe UV exposure.

IMPLEMENTATION

Our Vacation Care Service will work in compliance with the *National SunSmart Program* to ensure children’s health and safety is maintained at all times whilst at the Service. This policy applies to all activities on and off site.

MONITORING UV LEVELS

Sun protection is required when UV levels reach level 3 or above. Our Service will monitor the UV levels daily through one or more of the following methods:

- using the smartphone [SunSmart app](#) available at iTunes App Store and Google Play store
- using the SunSmart widget on the Service’s website available at www.cancer.org.au
- viewing the Bureau of Meteorology website <http://www.bom.gov.au/>

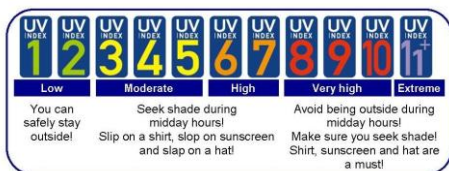
- visiting www.myuv.com.au

OUTDOOR ACTIVITIES

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times, when the UV Index is 3 or above. The sun protection times are a forecast from the Bureau of Meteorology for the time of day UV levels are forecast to reach 3 or higher. At these levels, a combination of sun protection is recommended for all skin types.

The Vacation Care Service will use a combination of sun protection measures (see below) **whenever UV Index levels reach 3 and above**. Care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.

We will follow the advice from Cancer Council in our state and if recommended, cease outdoor play if UV levels reach certain levels- usually 8.



SunSmart (2020)

SHADE

Management, Nominated Supervisor will ensure:

- sufficient natural, portable, or man-made shade is provided, particularly in high use areas
- shaded areas will be used for play experiences
- play experiences will be monitored throughout the day and moved as required to remain in the shade
- regular risk assessments and reviews will be made of the outdoor area to assist in planning for further shade requirements
- children who do not have appropriate hats or outdoor clothing are required to choose a shady play space or a suitable area protected from the sun and not move to unshaded areas of the playground
- children will still be required to wear hats, protective clothing, and sunscreen if playing under natural or portable shade

HATS

Educators, children, and visitors are required to wear sun safe hats at all times they are outdoors. Cancer Council Australia describes sun safe hats as:

- Hats that protect a person's face, neck, and ears, which include:
 - a legionnaire hat – the flap should cover the neck
 - a bucket hat with a deep crown and brim size of at least 5cm for children and at least 6cm for adults and must shade the face, neck, and ears
 - a broad brimmed hat with a brim size of at least 6cm for children or 7.5cm for adults. The brim should provide shade for the whole face.

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not recommended.

- Children without a sun safe hat will be asked to play in an area protected from the sun *or* they may be provided with a spare hat if available at the Vacation Service.

CLOTHING

- When outdoors, staff and children will wear sun safe clothing that covers as much of the skin as possible. Cancer Council Australia recommends clothing that:
 - covers the shoulders, back and stomach
 - is loose fitting such as loose-fitting shirts and dresses with sleeves and collars or covered neckline, or longer style skirts, shorts and trousers.
- Children who are not wearing sun safe clothing will be required to play under shade or in an area protected from the sun.

Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended.

SUNSCREEN

As per Cancer Council Australia recommendations:

- staff and children will apply SPF30 or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours or more frequently if washed or wiped off
- where children have allergies or sensitivity to the sunscreen, parents are asked to provide an alternative sunscreen. A record of any allergy must be provided in writing from the parent/guardian and recorded on the child's enrolment record. Cancer Council Australia recommends usage tests before applying a new sunscreen.

- sunscreen is stored in a cool, dry place and the use-by-date monitored.

RISKS OF SUMMER PLAY

Australia has a hot climate and inevitably playground equipment and surfacing can heat up rapidly and retain heat. Many playground surfaces and equipment can exceed temperatures greater than 50°C and if young children come into contact with these surfaces, they can be burned severely within seconds.

The Approved Provider, Nominated Supervisor and educators will:

- ensure risk assessments are conducted to identify any potential hazards to children during summer months that could cause harm or injury to children. Risk minimisation control measures will be put in place to protect children. Potential hazards could include:
 - hot equipment- slides, poles, guardrails, any metal surfaces
 - hot surfaces- rubber and synthetic grass, walkways, concrete surfaces
 - sun burn
 - access to bodies of water (filled water troughs/containers/trays/pools)
- use a thermometer or their hand to test surface temperature and make an informed decision about permitting children to play on equipment or in the outdoor space. If the surface temperature is determined to be too hot or is recorded as at or above 50°C it is recommended by Kidsafe Australia that children do NOT play on the surface
- ensure children wear shoes when playing in the outdoor area.

ROLE MODELLING AND WORK, HEALTH AND SAFETY

Cancer Council Australia acknowledges that children are more likely to develop sun-safe habits if they are role-modelled and demonstrated by adults around them. Occupational UV exposure is also a WH&S issue. All educators, staff at the Vacation Care Service will therefore be required to role model appropriate sun protection behaviours by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- families and visitors are encouraged to role model positive sun safe behaviour
- monitoring the UV Index Levels and Daily Sun Protection Times throughout the day
- regularly monitoring and reviewing the effectiveness of the *Sun Safety Policy*

EDUCATION AND INFORMATION

- Sun protection will be incorporated regularly into learning programs
- Sun protection information will be promoted to staff, families and visitors
- Educators and staff are encouraged to complete free Cancer Council Generation SunSmart online PL learning modules.
- Further information is available from the Cancer Council website www.cancer.org.au/preventing-cancer/sun-protection/
- The *Sun Safety Policy* will be made available to all Educators, Staff, Families, and Visitors of the Service to ensure a comprehensive understanding about keeping sun safe
- Information about Sun Safety will be included in our Family Handbook

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Bureau of meteorology. Home page (for UV Index): <http://www.bom.gov.au/uv/>

Cancer Council. (2019). UV alert: <https://www.cancer.org.au/preventing-cancer/sun-protection/uv-alert/>

Cancer Council. Home page: <https://www.cancer.org.au/>

Cancer Council. Preventing cancer: Sun protections: <https://www.cancer.org.au/preventing-cancer/sun-protection/>

Children's Services Act 1996

Cancer Council. SunSmart programs <http://www.sunsmartnsw.com.au/about/>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2017).

Kidsafe NSW [Playground Safety](#) .(2020).

Occupational Health and Safety Act 2004

Revised National Quality Standard. (2020).

REVIEW:

POLICY REVIEWED: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER 2021
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SUPERVISION POLICY

Supervision is an integral part of the whole care and education experience. *“At its most basic level, supervision helps to protect children from hazards or harm that may arise in their daily experiences in play, interactions with others, and daily routines.”* (Victoria Department of Education and Training, 2010, p.1). Effective supervision allows Educators to actively engage in play and leisure opportunities that are meaningful to children and support their wellbeing, development and learning.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each Child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
100	Risk assessment must be conducted before an excursion
101	Conduct of risk assessment for excursions
102	Authorisation for excursions
115	Premises designed to facilitate supervision
120	Educators who are under 18 to be supervised
121	Application of Division 3
122	Educators must be working directly with children to be included in ratios
123 (1) (d)	Educator to child ratios-Centre based services
166	Children not to be alone with visitors
168	Education and care service must have policies and procedures
176	Time to notify certain circumstances to Regulatory Authorities

CHILDREN (EDUCATION AND CARE SERVICES) NATIONAL LAW	
165	Offence to inadequately supervise children

RELATED POLICIES

Administration of Medication Policy Arrival and Departure Policy Code of Conduct Policy Cyber Safety Policy Handwashing Policy	Incident, Illness, Accident and Trauma Policy Mobile Device Usage Policy Physical Environment Policy Road Safety Policy Staffing Arrangements Policy Transportation Policy Water Safety Policy
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PURPOSE

Out of School Hours Care Educators have a duty of care to ensure children are supervised at all times, maintaining a safe and secure environment adhering to Education and Care National Law and National Regulations. Supervision for children in Vacation Care requires Educators to cater for a wide range of ages and abilities and requires flexibility and organisation to ensure thoughtful design and arrangement of children’s environments, assists in the prevention and severity of injury to children. Effective supervision of children provides Educators with the opportunity to support and build on younger children’s play experiences whilst supporting older children’s independence.

Educators will actively supervise children, identifying risks and taking all necessary steps to prevent or minimise injury in a range of situations including, transitioning children between our Vacation Care Service and other destinations when on excursions. Effective supervision of children provides Educators with the opportunity to support and build on children’s play experiences.

SCOPE

This policy applies to Management and Educators of the Vacation Care Service.

IMPLEMENTATION

MANAGEMENT WILL ENSURE:

- that the premises and facilities are designed and maintained to facilitate supervision of children at all times while maintaining the rights and dignity of all children

- regulatory Authorities are notified of any serious incident or complaints alleging the safety, health or wellbeing of children has been compromised within 24 hours of the incident or the time that the person becomes aware of the incident or complaint. This includes if an ambulance was called in response (not as a precaution) to the incident, situation or event.
- ensure that parents are notified as soon as practicable but within 24 hours if their child is involved in a serious incident/situation at the Service. Details of the incident/situation are to be recorded on the *Incident, Injury, Trauma and Illness Record*.
- educators under eighteen years of age may work at a centre-based Vacation Care Service only if they are adequately supervised by an educator over the age of 18 at all times and are not left alone.
- minimum Educator qualification requirements are recognised and adhered to according to legislative requirements
- the Service maintains the required educator-to-child ratio for children over preschool age- 1:15

MANAGEMENT AND/OR THE NOMINATED SUPERVISOR WILL:

- ensure that all Educators are aware of where children are at all times and monitor the environment closely
- ensure Educators are able to respond to any situation immediately, particularly if a child is distressed or in a hazardous situation
- develop and maintain rosters that ensure continuity of care and adequate supervision at all times when children are
 - in attendance at the Vacation Care Service
 - visiting and returning from children's toilets
 - transported to and from the Vacation Care Service premises
 - during excursions and outings
- ensure flexibility of supervision to provide for Educators to supervise individual children or small groups of children
- conduct risk assessments and plan ongoing supervision taking into consideration the layout of the premises and grounds, any higher risk activities, the presence of any animals, the location of activities and the location of bathroom facilities.
- develop, maintain, and regularly review a supervision plan and strategies for both the indoor and outdoor areas, which will support Educators to position themselves effectively to allow them to observe the maximum area possible.

- ensure Educators avoid activities or actions that will distract them from supervision, such as speaking to other Educators for long periods of time, taking personal phone calls, checking mobile phones or smart watches or administrative tasks
- ensure Educators are aware if they need to move away from children, another Educator is to replace them
- ensure educators are positioned allowing them to watch the maximum area possible
- ensure Educators move around the environment to observe the maximum area and to avoid standing with their back to children or talking with other Educators.
- adopt accepted best practice, ensuring no staff member is left alone with a child to support child protection protocols
- ensure that a Risk Assessment and Management Plan is carried out before an authorisation is requested for an excursion. The risk assessment will consider and identify the number of adults required to ensure continuous adequate supervision throughout the excursion.

EDUCATORS WILL:

- have a sound understanding of their duty of care and responsibilities in ensuring children are within a safe environment.
- communicate and collaborate with others to ensure the effective supervision of children within the Service.
- implement vigilant supervision strategies for hygiene requirements including:
 - regular handwashing
 - cough and sneeze routines- using disposable tissues and handwashing
- inform new and relief educators about supervision arrangements, outlining their supervision responsibilities
- regularly evaluate the efficiency of the supervision plan and update as required
- ensure any Educators under the age of 18 years old are never left alone with children
- ensure that at least one other Educator is within sight when working with children or if it is necessary to assist a child to change their clothes
- arrange the environment to balance supervision of children's needs depending on age, ability and activities
- emphasis for supervision will be on open playgrounds, risky play opportunities and doors during arrival and departure times
- maintain correct ratios adhering to the National Education Regulations throughout the education and care environment

- ensure that all children are in sight or hearing of Educators at all times
- ensure that children are supervised by an Educator or accompanied by an older child when going to the bathroom at the Vacation Care Service
- ensure that hazardous equipment and chemicals are inaccessible to children
- scan the environment during interacting with individuals or small groups
- continuously scan and look around the area to observe all the children in the vicinity.
- implement correct supervision strategies and not perform other duties while responsible for the supervision of children
- listen closely to children whilst supervising areas that may not be in a direct line of sight noticing changes in volume or tone of voice
- plan for a mixture of activities to allow for appropriate supervision of groups of children.

Consideration will be given to the design and arrangement of children’s environments to support active supervision by:

- using supervision skills to recognise areas of risk therefore reducing the potential for injury or incident to children and adults
- providing direct, constant and proximal monitoring to children undertaking activities that involve some risk and recognising when the ratio of Educators to children needs to be increased- (eg: carpentry, water activities, climbing)
- guiding Educators to make decisions about when children’s play and games need to be interrupted and redirected
- supporting Educators with specific strategies such as positioning, peripheral vision and monitoring children’s arrival and departure from the service
- providing consistent supervision strategies when the Vacation Care Service requires relief Educators.

SOURCE:

Australian Children’s Education & Care Quality Authority. (2014).

Australian Children’s Education & Care Quality Authority. Children’s Health and Safety. *An analysis of Quality Area 2 of the National Quality Standard*. Occasional Paper 2. (2016).

Australian Government Department of Education, Skills and Employment. *My Time Our Place: Framework for School Age Care in Australia*. (2011).

Early Childhood Australia Code of Ethics. (2016).

Frith, J., Kambouris, N., & O’Grady, O. (2003). *Health & safety in children’s centres: Model policies & practices* (2nd ed).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (~~2017~~)-(2020)

Guide to the National Quality Standard. (2017).

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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TERMINATION OF ENROLMENT POLICY

Our Vacation Care service is dedicated to developing a respectful and effective partnership between the family and Service. This partnership supports children's inclusion, access, engagement and participation in the Service. Management implements systems to manage risks whilst promoting the health, safety and wellbeing of all children and all staff associated with our Service.

There may be some circumstances where this is compromised due to non-compliance of our policies and management may be required to terminate a child's enrolment. The Vacation Care Service will adhere to policies and procedures to ensure a fair, ethical, and appropriate decision is made.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is respected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationship with families are developed and maintained and families are supported in their parenting role.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interaction with children
168	Education and care service must have policies and procedures
177	Prescribed enrolment and other documents to be kept by approved provider
181	Prescribed enrolment documents to be kept by the Approved Provider
183	Storage of records and other documents

RELATED POLICIES

Anti-Bias and Inclusion Policy Additional Needs Policy Behaviour Guidance Policy Code of Conduct Policy Health and Safety Policy	Enrolment Policy Payment of Fees Policy Withdrawal of a Child Policy Work, Health and Safety Policy
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PURPOSE

‘All children have the right to experience quality education and care in an environment that provides for their physical and psychological wellbeing and provides support for each child’s growing competence, confidence and independence.’ Quality Area 2, ACECQA.

We have the legal duty to ensure the health, safety and wellbeing of children, educators, families, coordinators and volunteers at our Vacation care Service. To promote respectful and effective partnerships with families, we ensure that each child and family participate in a comprehensive induction including detailing our terms of enrolment, as per our legal agreement, which advises families on the Services’ right to terminate a child’s enrolment if a service policy has been breached.

SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

IMPLEMENTATION

NOMINATED SUPERVISORS AND EDUCATORS WILL:

- work in partnership with families to promote inclusion of all children within the Vacation Care Service
- use positive language and a range of communication strategies with children and families to ensure positive relationships
- discuss concerns or issues of non-compliance with management before communicating with families
- document all communication and meetings (informal and formal) with families and outside professional support

- access external professional support to ensure child's inclusion in the Service's program
- document proposed strategies and practices suggested to resolve any issue
- develop individual educational plans for children as required (refer to Behaviour Guidance Policy; Additional Needs Policy, Anti bias and inclusion Policy)
- remind families of our Code of Conduct policy
- document evidence of non-compliance, events, behaviour, grievances and observations.
- ensure minutes are collected and signed by all parties present at meetings to ensure a true and accurate record of the meeting.

BEHAVIOUR GUIDANCE

There are times when children's behaviour requires guidance, which will always be undertaken according to the Service's policies and procedures. Every effort will be made to deal with the behaviour using positive guidance and working closely with families to implement a plan in order to help rectify any unacceptable behaviour. If the child's behaviour continues to be disruptive and harmful and the safety of other children and staff is compromised, we reserve the right to ask you to withdraw your child from the Service.

VACATION CARE POLICIES AND PROCEDURES

Our Service has a range of policies and procedures to ensure the safety, welfare, and wellbeing of children, educators, families and visitors. We reserve the right to terminate a child enrolment if at any time a Service policy has been breached.

This may include:

- failure to comply with the enrolment policy
- disparaging or hurtful behaviour of a child that continues even with parent collaboration in stopping the behaviour
- non-payment of childcare fees
- continuing to pick up the child past the required licensed time following multiple warnings
- inability to meet the child's needs without family support and commitment to ensure their child receives the best possible support within our Service
- deliberate impertinence towards the approved provider or educators/educator assistants- (Code of Conduct)
- consistent child-rearing style differences between the parent and provider
- false information given by a parent either verbally or in writing

- bullying and/or harassing Vacation Care educators, children or families enrolled at the Service

TERMINATION NOTIFICATION

The Approved Provider or Nominated Supervisor will advise families in writing that their child's enrolment will be terminated following all attempts to rectify any non-compliance.

Two weeks' notice will be provided to families, unless the safety and wellbeing of other children, educators or other families are at risk. In this case, an immediate termination of enrolment may apply.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australia Children's Education & Care Quality Authority. (2018). *Guide to the National Quality Framework*.

Early Childhood Australia Code of Ethics. (2016).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law Regulations. (2017).

NSW Government. Anti-Discrimination Act 1977. No 48.

<https://www.legislation.nsw.gov.au/#/view/act/1977/48/full>

Revised National Quality Standard. (2018).

Work Health and Safety Act 2011 <https://www.legislation.gov.au/Details/C2017C00305>

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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UNEXPECTED DEATH OF A CHILD AT A SERVICE POLICY

The unexpected death of a child at a Service is a traumatic event and the impact on educators, children and families can cause emotional turmoil, which can overwhelm usual coping skills. A policy providing comprehensive procedures is therefore crucial to ensure a coordinated response and ensure the mandatory reporting requirements to the regulatory authorities are followed.

As a result of the suddenness of such an event, well-trained and experienced staff can experience strong emotions and traumatic stress responses. The role of our Vacation Care Service is to help restore a sense of safety for all children, educators, and families as soon as possible following a traumatic event.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
176	Time to notify certain information to Regulatory Authority
183 (c)	Storage of records and other document The records must be kept- (c) if the record relates to the death of a child while being educated and cared for by the education and care service or that may have occurred as result of an incident while being educated and cared for, until the end of 7 years after the death.

RELATED POLICIES

Administration of First Aid Policy	Medical Conditions Policy
Administration of Medication Policy	Road Safety Policy
Anaphylaxis Management Policy	Safe Storage of Hazardous Substances Policy
Asthma Management Policy	Sick Children Policy

Child Protection Policy Epilepsy Management Policy Health and Safety Policy Incident, Illness, Accident and Trauma Policy	Water Safety Policy
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PURPOSE

Our Vacation Care Service will ensure that Management and educators follow the procedures and principles within this policy and that immediate and appropriate action is taken to notify relevant authorities in the event of the death of a child whilst at the Service. There are a number of legal requirements to adhere to in the tragic event of the death of a child at a Service as outlined below.

SCOPE

This policy applies to management and staff of the Vacation Care Service.

SERIOUS INCIDENTS

Regulation 12 defines a serious incident involving the death of a child as:

- (a) The death of a child –
 - I. while that child is being educated and cared for by an education and care service, or
 - II. following an incident occurring while that child was being educated and cared for by an education and care service

NOTIFICATION OF A SERIOUS INCIDENT

Under the National Law and Regulations [Section 174(2) (a) and Regulation 176 (2) (a)], the approved provider must notify the regulatory authorities within **24** hours of any serious incidents. This must be completed by logging into the [National Quality Agenda IT System \(NQA IT System\)](#).

KEEPING CHILDREN'S RECORDS

In the event of the death of a child whilst being cared for at the Service, records must be kept for 7 years from the date of the child's death. [Regulation 183 (c)]

INITIAL ACTION AND IMPLEMENTATION

Management and educators will ensure that immediate and appropriate action is taken in the event of the death of a child whilst at the Service by following and implementing the following procedures:

1. assess the situation as per service and First Aid procedures for any immediate danger to other children and/or staff
2. provide immediate First Aid and/or CPR in accordance with current First Aid training
3. call emergency services immediately requesting an ambulance
4. management/Responsible person will call the parents/guardian of the child and arrange to meet at the hospital
5. the Service must not advise parents of the death of their child: Medical staff will advise families of the situation.
6. notify Regulatory Authorities including the Police Department
7. notify the Approved Provider (if not at the service).
8. the Responsible person will complete in detail the Service's *Incident, injury, trauma and illness* form (in addition to notifying ACECQA via the NQA IT System).
9. the Approved provider will log the incident on the NQA TI System, attaching incident form and evidence. <https://www.acecqa.gov.au/resources/national-quality-agenda-it-system>
10. management/Approved provider will contact the insurance company.

MANAGEMENT WILL:

- demonstrate sensitivity, open mindedness and a balanced approach
- ensure that parents, families, children and educators will receive adequate and appropriate post-incident support
- recognise and support cultural needs
- ensure all evidence is preserved
- maintain accurate and detailed record keeping
- contact their legal representative for support and direction
- establish protocols for staff and Educators to discuss the traumatic event
- advise staff of social media protocol for the event
- provide professional and sensitive communication with families of the Service
- engage the services of health care professionals (counselling and support for staff)
- cooperate on an ongoing basis with inter-agencies involved in the investigation.

CARING FOR THE WELLBEING OF EDUCATORS, CHILDREN AND FAMILIES

Our Service will engage health professionals who may include child and family counsellors and psychologists to support our educators during this profoundly difficult time. Health professional will assist

educators to be sensitive and mindful of the impact such an event has had on all stakeholders. With professional guidance and support, we will encourage children to express their emotions and feelings and implement strategies to assist and guide children's process of grieving and re-engage children in learning.

Educators will support children's understanding of grief and loss by:

- answering questions simply and honestly
- allowing children to express their emotions and feelings
- provide appropriate comfort
- implement a range of learning experiences to express their thoughts- drawing, movement, play
- create a safe space for time alone when needed

Our Service will seek advice and support from health professionals to provide appropriate materials to send home to families to assist in understanding the effects of trauma on children and possible changes in behaviour following the unexpected death of a child in our Service.

SUPPORT SERVICES

beyou	1300 224 636	www.beyou.edu.au
Beyond Blue	1300 224 636	www.beyondblue.org.au
Headspace	1800 650 890	www.headspace.org.au
Lifeline	13 11 14	www.lifeline.org.au
Kid's Help Line	1800 551 800	https://kidshelpline.com.au
Compassionate Friends of Victoria	1300 064 068	www.compassionatefriendsvictoria.org.au/

SOURCE

Australian Centre for Grief and Bereavement: <http://www.grief.org.au>

Australian Child & Adolescent Trauma, Loss & Grief Network:

http://earlytraumagriev.anu.edu.au/files/ACATLGN_grief_and_loss.pdf

Education and Care Services National Amendment Regulations. (2017).

Education and Care National Regulations. (2011).

Guide to the National Quality Standard. (2017).

Occupational Health and Safety Act 2004.

What Do We Tell the Children When Someone Dies? http://www.adac.org.au/siteF/resources/l_children_gt.pdf

Work Health and Safety Act 2011.

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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WATER SAFETY POLICY

The safety and supervision of children is paramount when in or around water. This relates to water play, excursions near water, hot water, drinking water and hygiene practices with water in the Vacation Care Service environment. Children will be supervised at all times during water play experiences.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
101	Conduct of risk assessment for excursions
115	Premises designed to facilitate supervision
122	Educators must be working directly with children to be included in ratios
168	Education and care service must have policies and procedures

RELATED POLICIES

Educational Program Policy Health and Safety Policy	Physical Environment Policy Supervision Policy
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PURPOSE

To ensure the safety and supervision of children in and around water. This includes water play, excursions near water, hot water, drinking water and hygiene practices with water in the Vacation Care Service environment.

SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

WATER HAZARDS

The National Regulations make reference to ‘water hazards’ however the term is not expressly defined. In this policy, a water hazard is defined as anything that can hold 5cm of water and fit a child’s nose and mouth and a ‘water hazard’ may include:

- swimming pools, portable pools, spas
- fishponds
- sinks, basins
- water feature, such as a wishing well
- containers for feeding animals
- water troughs, containers for paddling- clam shells
- dams, creeks, river or pooling water
- beach

IMPLEMENTATION

MANAGEMENT/NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL:

- complete risk assessments that identify and assess risks associated with any water hazards and water-based activities
- ensure water hazards and water play are always highly supervised including:
 - direct and constant monitoring of children
 - careful and intentional positioning of educators
 - scanning and moving around the environment
 - observing play and anticipating behaviour
 - ensuring higher adult to child ratios

- provide direction and education to Educators, staff and families on the importance of children's safety and supervision in and around water
- ensure health and safety practices incorporate approaches to safe storage of water and water play
- ensure premises adjacent to or providing access to any water hazards that are not able to be adequately supervised at all times (e.g. dams, swimming pool) are to be isolated from children by a child resistant barrier or fence
- conduct a risk assessment in accordance with the requirements prior to taking children on an excursion which is near water
- ensure at least one Educator who holds a current approved first aid qualification is in attendance at all times
- display a Cardiopulmonary Resuscitation (CPR) guide near any swimming pool, wading pool, or body of water
- ensure hot water is inaccessible to children.

***Important:** Parents will be notified as soon as practicable but within 24 hours if their child is involved in an incident/accident at the Service or while under Service care. Also, details of the incident/accident will be recorded on an Incident, Injury, Trauma and Illness Record.*

If the incident/accident, situation or event presents imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours.

EDUCATORS WILL:

- supervise children near water at all times
- never leave children alone near any water
- ensure children in a bath/shower (if required) are directly supervised at all times
- ensure fish / frog ponds and water features that are not able to be adequately supervised at all times and/or pose an unacceptable risk to children are guarded or effective barriers are in place
- complete a daily Safety Inspection of premises to ensure that all hazards are known and minimised. When a hazard or potential hazard is detected, Educators will complete a risk assessment to address any concerns and children will be excluded from the area until the hazard has been rectified.
- utilise water activities in appropriate weather as part of the planned program

- allow the children the opportunity to experiment with water, sand, and mixing materials
- monitor all taps on the premises that children have access to and ensure they are turned off securely when not in use
- safely cover or make inaccessible to children all water containers
- empty wading pools immediately after every use store to prevent the collection of water, e.g. upright
- check for and empty any water that has collected in holes or containers after rainfall or watering gardens
- ensure water troughs are not used without a stand to keep it off the ground
- ensure children remain standing on the ground whilst using the water trough
- ensure buckets of water for soaking toys or clothing are inaccessible to children
- ensure water troughs or containers for water play are filled to a safe level and emptied into the garden areas after **each** use
- discouraged children from drinking from these water activities
- ensure laundry, storerooms and Educator areas have **Staff only** signs on doors to remind adults to close doors behind them
- they teach children about staying safe in and around water
- ensure wading pools/water slides are hygienically cleaned, disinfected and chlorinated appropriately:
 - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant.
 - wash away disinfectant before filling pool
 - add Chlorine to pool before children use the pool
 - check chlorine levels frequently
 - children with diarrhoea, upset stomach, open sores or nasal infections should not use the pool
 - all children should wear appropriate swimwear / bathers, go to the toilet before entering the pool, and follow correct toilet hygiene practices while in the pool
 - remove all children immediately, empty and disinfect the pool should a child pass a bowel motion whilst in the pool.

OPERATIONAL SAFETY

- Water tanks will be labelled with “Do Not Drink” signage and the children will be supervised in this area to make sure they are not accessing this water for drinking.

- Educators will discuss with the children the use of water tank water and how it differs from drinking water.
- Water for pets at the Service must be changed daily and only be accessible to children when educators are present.

SOURCE:

Australian Children’s Education & Care Quality Authority. (2014).
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations (2017).
 Guide to the National Quality Standard. (2017).
 National Health and Medical Research Council (NHMRC): www.nhmrc.gov.au
 NSW Department of Health: www.health.nsw.gov.au
 Revised National Quality Standard. (2018).

REVIEW

POLICY DATE: NOVEMBER 2020	NEXT REVIEW DATE: NOVEMBER 2021
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WORK HEALTH AND SAFETY POLICY

Everyone has a right to be safe at work. Our Vacation Care Service is committed to creating and maintaining a safe and healthy environment for educators, staff, children, families and visitors. We ensure that educators and staff are aware of and meet their legal and ethical responsibilities as clearly documented in current National Regulations and Work Health and Safety laws. Our Work, Health and Safety policy, procedures and practices ensure that management fulfils its responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees; employees meet their health and safety obligations and are safe in the workplace; and the work environment supports quality early education and care.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Policies and procedures are required in relation to health and safety
171	Policies and procedures to be kept available
182	Tobacco, drug and alcohol-free environment

RELATED POLICIES

Administration of First Aid Policy	Furniture and Equipment Safety Policy
Administration of Medication Policy	Hand Washing Policy
Anaphylaxis Management Policy	Health and Safety Policy
Animals and Pet Policy	Incident, Illness, Accident and Trauma Policy
Asthma Management Policy	Immunisation Policy
Arrival and Departure Policy	Lockdown Policy
Bush Fire Policy	Medical Conditions Policy
Child Protection Policy	Nutrition and Food Safety Policy
Child Safe Environment Policy	Physical Environment Policy
Control of Infectious Disease Policy	Pregnancy in Early Childhood Policy
Coronavirus COVID-19 Management Policy	Rest Time Policy
Cyber Safety Policy	Road Safety Policy
Dental Health Policy	Safe Storage of Hazardous Chemicals Policy
Diabetes Management Policy	Sick Children Policy
Emergency Evacuation Policy	Staffing Arrangements Policy
Epilepsy Management Policy	Supervision Policy
Excursion Policy	UV Sun Safe Policy
	Water Safety Policy

PURPOSE

Our objective is to protect the health, safety and welfare of children, families, educators and visitors within the Vacation Care Service adhering to moral and legal obligations outlined in Work Health and Safety (WHS) laws. We aim to go beyond compliance with all relevant legislation and work towards best practice to ensure a safe work environment. Our Vacation Care Service is committed to continuous improvement in all areas of workplace health, safety and wellbeing.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

We believe that the provision of a safe working and learning environment for children, families, staff and visitors is an integral and essential responsibility during the Vacation Care Service operation.

Work Health and Safety regulations require the Approved Provider to eliminate risks in the workplace or if that is not reasonably practicable, minimise the risks so far as is reasonably practicable.

Our Vacation Care Service has a duty to consult with staff, visitors and families about work health and safety requirements and develop comprehensive policies and procedures to manage risks and hazards appropriately and effectively.

All employees have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others.

Legislation

Each state and territory government have its own Work Health and Safety (WHS) laws and a regulator to enforce them. In NSW the we are legislated by Work Health and Safety Act 2011 and Work Health and regulated by SafeWork NSW.

Management is committed to

- providing all employees with a safe and healthy work and learning environment so far as reasonably practicable
- ensuring the health and safety of children in attendance at the Service so far as reasonably practicable
- ensuring the health and safety of visitors, including contract workers and volunteers, whilst at the Service so far as reasonably practicable
- providing and maintaining an environment free of risks or hazards to health and safety so far as reasonably practicable
- ensuring the provision of adequate facilities to protect all persons from risks to their health and safety including access to adult toilets, provision of hand hygiene resources (soap and water, alcohol-based hand sanitiser, paper towel) and Personal Protection Equipment (disposable gloves, masks, glasses)
- implementing a proactive process of risk management facilitating continuous improvement

- ongoing consultation, collaboration and communication with all staff throughout the risk assessment process
- implementing a strategic approach to health and safety by using measurable objectives to monitor performance
- meaningful consultation with employees regarding work, health and safety issues
- providing an effective and accessible safety management procedure for all employees to guide safe working and learning throughout the workplace
- ensuring Safety Data Sheets (SDS) are provided for all hazardous chemicals used at the Service
- supporting and promoting the health and wellbeing of all employees
- promoting dignity and respect within the Service and taking action to prevent and respond to bullying in its workplace
- providing staff with appropriate information, training, and guidance to facilitate a safe and productive work and learning environment
- notifying the regulatory authority within 24 hours of any incident, situation or event that has occurred and presented imminent or severe risk to the health, safety and/or wellbeing of any person present at the Service or if an ambulance was called in response to the incident/situation (not as a precaution).
- investigating and managing any incident or accident to prevent further reoccurrence
- providing a program of continuous improvement through engaging with industry and new technology and reviewing and updating policies and procedures
- implementing safety management systems / procedures
- keep up to date about current health risks and implement risk minimisation measures to reduce the risk of transmission of viruses such as coronavirus (COVID-19)
- maintain accurate records of all WHS issues and maintenance

The Nominated Supervisor and Educators will ensure:

- the health and safety of children, families and visitors of the Service is paramount
- policies and procedures are being followed and adhered to at all times
- that they observe, implement and fulfil the responsibilities under the current Work Health and Safety Act and National Regulations
- they participate in the review of WHS policies
- they take practical steps and responsibility for their own health and safety and of others affected by their actions at work

- work, health, and safety audits are conducted frequently to ensure the Service is maintaining a safe environment for children, families, staff and visitors
- appropriate resources and processes are in place to identify hazards, eliminate or minimise risks and achieve work health and safety compliance
- they know the location of fire extinguishers, blankets or other safety devices and know how to use them
- identified risks are assessed and controlled
- that any potential and actual hazards in the workplace are reported to the Health and Safety Representative (HSR)
- management and/or the HSR is notified of any incidents and accidents in the workplace as soon as practicable
- workplace incidents are reported and investigated to ascertain the circumstances of the incident or accident and appropriate action is taken to prevent further incidents from occurring
- correct record keeping procedures for incidents and accidents in the WHS Reporting folder are followed
- compliance with any reasonable instruction or lawful direction, including wearing personal protective equipment (PPE) supplied by the employer as required
- areas identified for improvement are included in the Quality Improvement Plan (QIP)
- they follow the correct manual handling procedures
- that work areas are safe, and they will help reduce accidents to themselves and others
- all safety checklists are implemented as required on a regular basis
- children's equipment is regularly checked for safety
- that children are supervised at all times
- all dangerous chemicals are stored appropriately
- children are kept out of kitchen areas and only enter under educator supervision
- all power points have safety plugs
- no hot drinks are around children
- gates are closed and locked after entry/exit
- all spills are cleaned up immediately (to prevent slipping), following the correct cleaning procedure
- reports and/or concerns about work health and safety are reviewed and responded to
- current work health and safety knowledge is maintained

Family and visitors are to:

- take reasonable care of their own health and safety whilst visiting the Vacation Care Service
- report any health and safety issues to management
- participate in consultation in WHS issues affecting them
- take reasonable care to ensure they don't affect the health and safety of other people (eg: Health Declaration for infectious diseases)
- comply to Service policies and procedures in relation to WHS including actions to reduce the risk of transmission of infectious diseases or illnesses such as physical distancing (if recommended by Australian Government Department of Health) personal hygiene practices and exclusion if children and visitors are unwell.

DUTY OF CARE

A duty of care is the legal obligation to provide reasonable care while performing any acts or making any omissions that could foreseeably harm others.

The duty encompasses a wide range of matters, including (but not limited to):

- provision of adequate supervision
- ensuring grounds, premises and equipment are safe for children's use
- implementing strategies to prevent bullying and
- providing medical assistance (if competent to do so) or seeking assistance from a medically trained person to aid a child who is injured or becomes ill at the Service.

The Approved Provider and Nominated Supervisor will ensure all practical steps are taken to ensure the health and safety of all educators, staff, volunteers, children, their families, and any other people impacted by the Vacation Care Service operations. This includes ascertaining and eliminating or minimising all realistically foreseeable hazards and providing suitable training and instruction for employees to ensure health and safety. Educators, staff, and volunteers will also take reasonable care for their own health and safety, ensuring their conduct does not adversely affect the health and safety of other people.

HAZARD IDENTIFICATION

A hazard is a source of potential harm or a situation that could cause or lead to harm to people or property. Workplace hazards can be physical, chemical, biological, mechanical or psychological.

Potential Hazard	What does this include?	Example	Potential accident
Physical	Floors, stairs, steps, ladders, fire, falling objects, slippery surfaces, manual handling (lifting, pulling, pushing), noise, heat and cold, radiation, poor lighting, ventilation	Wet bathroom floors, lifting children on play equipment.	Trips, slips and falls, Manual handling injury (soft tissue/back injury)
Mechanical and/or Electrical	Electricity, machinery, equipment, washers and dryers, kitchen appliances, motor vehicles.	Lint accumulation in dryers can be a combustion hazard. Frayed power cords or unplugged power points are an electrical hazard.	Fire, electric shock, electrocution
Chemical	Includes substances such as acids or poisons, cleaning agents, dusts and fumes.	Cleaning chemicals, Medication	Fire, explosion, poisoning

Biological	Includes bacteria, viruses, mould, mildew, insects, vermin and animals.	Sick staff or children attending the Service, Contaminated food, mice infestation.	Cross-infection, food poisoning.
Psychological	Workplace stressors.	Bullying, children's needs exceed skill or confidence of educators, insufficient management support.	High stress levels (staff and children), compromised care practices, failure to be inclusive.

Reference: Work Health and Safety in Education and Care Services PSC National Alliance

RISK MANAGEMENT

Risk Management is part of our Vacation Care Service's commitment to Work Health and Safety (WHS) to ensure that clear processes are in place for the identification of hazards, assessment of risks and implementation of control measures so far as reasonably practicable. Risk management plans include risk identification and risk assessment. Plans are reviewed regularly to ensure that they are effective in controlling risks.

Our Service will comply with WHS legislation and ensure all staff and visitors are aware of the potential hazards and risks and are provided with the necessary information and strategies to undertake to help keep them safe and healthy.

Risk Management is a systematic and methodical examination of potential risks and hazards within our working and learning environment. The process of risk assessment assist to:

- identify hazards
- assess who or what might be harmed and how
- evaluate the risks and deciding on appropriate control measures
- record findings
- review the effectiveness of exiting control measures regularly and update when necessary assessments regularly
- consult and communicate with all stakeholders- staff, families, visitors and community members.

Risks assessments are routinely conducted for emergencies including evacuation, lockdown, excursions and management of natural disasters such as bush fire, flood, cyclone and earthquake. *(see relevant policies for specific risk assessments)*

Additionally, risk assessments can be undertaken when presented with a hazard such as the potential health risk associated with exposure to coronavirus- COVID-19 and implement control measures to manage those risks.

HAZARD REDUCTION

Educators and staff have responsibilities to take a risk management approach to all activities and plan for the safety of themselves and children. This may include:

- always work with safety in mind
- be aware of any hazards and report them immediately
- keep hallways and doors completely clear as an object could become a hazard in an emergency evacuation situation
- using resources appropriately
- open doors slowly
- do not stand on furniture (chairs or tables)
- walk, not run within the Service (particularly up and down stairs)
- adhere to sun protection guidelines
- ensure personal safety by wearing PPE, implementing hand hygiene procedures
- follow behaviour guidance plans to ensure personal safety and that of other children

HAZARDOUS MATERIALS

We strive to minimise the health and safety risks associated with the handling and storage of hazardous materials. We adopt a risk management strategy that enables practices that minimise the risk of harm, injury, or illness caused by any hazardous material.

As far as is reasonably practical, our Vacation Care Service will:

- provide the least hazardous chemical, product, or equipment for the task without jeopardising hygiene
- ensure that staff, contractors, students, and visitors are protected from both short- and long-term health effects of hazardous substances and processes
- ensure all staff, contractors, visitors, and students have access to Safety Data Sheets (SDS) and adequate training on the safe use and storage of all hazardous substances prior to any exposure to those substances.
- ensure that non-toxic plants are planted within the workplace and regular garden and grounds maintenance will be undertaken to minimise the risk of toxic plants within the grounds and premises.

CLEANING

Educators and staff must:

- adhere to the cleaning schedules and procedures within the Service including hand washing, use of gloves, colour coded mops/cloths
- follow manufacturer's directions for cleaning products and chemicals (see Safety Data Sheets- SDS)
- ensure a register of all hazardous chemicals, substances and equipment is used at the Service. The register should include where they are stored, their use, any risks, first aid instructions and the current SDS.
- chemicals are never mixed together
- chemicals and cleaning products are stored in original containers provided by the manufacturer
- all items are clearly labelled
- wash hands immediately if any chemical is spilled
- in the event of a chemical spill, isolate the area and advise the Nominated Supervisor
- wash hands thoroughly after using any chemical or disinfectant
- ensure containers are disposed of correctly following local council guidelines and not reused under any circumstances
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhalation, skin or eye exposure has occurred.
- **Poisons Information Line 13 11 26 or call an ambulance on 000**
- ensure emergency, medical and first aid procedures are carried out

SLIPS TRIPS AND FALLS

Children must be adequately supervised at all times. Identifying potential hazards such as sustaining an injury from play equipment or slipping on a wet surface should be considered through the risk assessment process. Establishing appropriate control measures for staff and children, assist in managing the possible risk.

Staff should:

- wear covered shoes with slip resistant soles and heels
- be alert for any object that could be a trip hazard
- pick up any objects sticking up from the floor or ground, so as not to cause injury

- ensure warning signs alerting others of wet and slippery floors are used
- immediately clean any spills to avoid slips and falls
- notify the Nominated Supervisor and the HSR if a slip or fall is witnessed, whether it is a work colleague or visitor
- ensure the appropriate paperwork is completed (including notification to the Regulatory Authority if required).

MAINTENANCE OF FIRE EQUIPMENT

All fire equipment at our Service will be maintained as per the Australian Workplace Safety Standards. External agencies will be employed to conduct the maintenance of the fire equipment. Fire extinguishers will be inspected every six months.

BACK CARE AND MANUAL HANDLING

Our Vacation Care Service refers to the [Manual Handling Code of Practice](#) as part of our commitment to ensure a best practice approach. All staff members are required to undertake Workplace Health and Safety Training where possible that will continue to be updated to ensure safety.

Educators are at risk of work-related ergonomic injuries, particularly back injuries, through carrying children, bending, reaching and not using adult sized furniture.

Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.

Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee. Manual handling injuries also include overuse injuries or, because of falling during manual handling, bruising or laceration.

RECOMMENDATIONS:

- Due to the physical demands of working with children, it is sensible to do warm-up exercises for three to five minutes before starting work particularly through the winter period as muscles and tendons are more likely to be damaged when cold. Simple exercises to warm and stretch all the major muscle groups will help prevent injury.

- To help prevent injuries, there are legal requirements for manual handling in the workplace.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- provide educators and staff with annual training in Manual Handling and Back Care
- make sure that equipment and containers are designed and maintained to be, as far as workable, safe and without risk to health and safety when manually handled
- make sure that the work practices involving manual handling and the work environment are designed to be, as far as workable, consistent with safe manual handling activities
- identify, assess and control all risks associated with manual handling in each workplace
- clearly mark any equipment which requires more than one person to lift or move it.

PREVENTING MANUAL HANDLING INJURIES

- Eliminate or reduce the amount of manual handling
- Reduce the amount of bending, forward reaching, and twisting, in all tasks
- Reduce worker fatigue
- Keep all equipment in good working order
- Keep the workplace environment safe

TO HELP PREVENT MANUAL HANDLING INJURIES

- Kneel rather than bend down
- Sit down with the children rather than bend over
- Sit in an appropriately sized chair or on the floor
- When lifting awkward loads, be careful to lift with a balanced and comfortable posture
- Minimise the need to reach above shoulder level
- If necessary, use a step ladder
- Avoid extended reaching forward
- For example, leaning into low equipment boxes
- Share the load if the equipment is heavy, long or awkward
- When sliding, pulling or pushing equipment that is not easy to move, e.g. trestles or gym mats, ask for help and organise a team lift
- Where possible, rearrange surroundings to meet the needs of both children and adults
- Remember these needs when buying furniture and equipment or upgrading facilities
- Use equipment and furniture that can be moved around as safely and easily as possible

- To complete lengthy writing tasks, e.g. program planning, sit at an appropriate adult sized chair at an adult sized table

AVOID TWISTING WHEN LIFTING

Many injuries result from twisting while lifting. To avoid this:

- move equipment when children are not around
- rearrange storage so that it is easier and safer to replace and remove items
- lift only within the limits of your strength
- make sure you can see where you are going when carrying equipment
- be especially careful when lifting a child with special needs.

AVOID ACCIDENTS WITH CAREFUL 'HOUSEKEEPING'

'Good housekeeping' means fewer accidents. Check that:

- the floors and other walking surfaces are uncluttered, even and non-slip
- the workplace is tidy
- there is adequate space to perform each task
- equipment is maintained regularly
- lighting is adequate.

HOW TO LIFT SAFELY

1. Place your feet in a stride position
2. Keep your breastbone as elevated as possible
3. Bend your knees
4. Brace your stomach muscles
5. Hold the object close to your centre of gravity, i.e. around your navel
6. Move your feet not your spine
7. Prepare to move in a forward-facing direction
8. Ask for help when it is not possible to lift on your own

HOW TO ASSESS THE CORRECT STORAGE AND SHELVING HEIGHT

Correct storage and shelving height is important to prevent slips, falls and strains.

- The best height range for handling loads is around waist level
- The acceptable height for lifting is any point between the individual's knuckle and shoulder

- Seldom-used objects can be stored at the shoulder-to-raised arm height (use ladders to avoid stretching)
- Avoid storing objects at a level between an individual's knuckles and the floor
- Mechanical aids such as ladders and trolleys should be used where possible to avoid lifting

RISKY PLAY/ADVENTUROUS PLAY

Educators will provide an environment that encourages children to effectively learn in play which involves supporting them to take risks. No play space is risk free. It is important for children's development to become adventurous and participate in opportunities to explore and test their own capabilities, manage risk, and to grow as capable, resourceful, and resilient people.

Educators will assess the risks to children's safety and develop guidelines to encourage children to test their abilities within a safe environment.

When we find children exploring risky play, educators will supervise and assist when appropriate.

FURTHER RESOURCES

Child Care Centre Desktop: Work Health and Safety Manual

ACT: WorkSafe ACT provides information for work health and safety
<https://www.accesscannberra.act.gov.au/app/home/workhealthandsafety>

Northern Territory: NTWorkSafe assists businesses and workers understand their obligations under work health and safety. <https://worksafe.nt.gov.au/home>

NSW: SafeWork NSW administers the Work Health and Safety legislation, and has several codes of practice on specific work safety issues which are available online at <https://www.safework.nsw.gov.au/>

Queensland: Workplace Health and Safety Queensland oversees the Queensland Work Health and Safety Act 2011 <https://www.worksafe.qld.gov.au/>

South Australia: SafeWork SA provides work health and safety services across South Australia
<https://www.safework.sa.gov.au/>

Tasmania: WorkSafe Tasmania is the state's health and safety regulator:
<https://worksafe.tas.gov.au/home>

Victoria: WorkSafe Victoria is the state's health and safety regulator see:
<https://www.worksafe.vic.gov.au/early-childhood-education-and-care-safety-basics>

Western Australia: WorkSafe Western Australia regulates and promotes occupational safety and health regulations in the workplace <https://www.commerce.wa.gov.au/worksafe>

For further information see: <https://www.safeworkaustralia.gov.au/>

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government. Department of Education, Skills and Employment. *My Time, Our Place: Framework for School Age Care in Australia (2011)*.

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (~~2017~~) (2020)

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

Revised National Quality Standard. (2018).

Safe Work Australia

Work Health and Safety Act 2011 (Cth).

Work Health and Safety Regulations 2017

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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VACATION CARE

WORKING

ALONE POLICY

It is the responsibility of the approved provider to ensure the health, safety and wellbeing of all children in their care, and the employees of the Service. This policy has been created to ensure that the appropriate arrangements are in place in situations where educators are working alone in an Out of School Hours Care (OSHC) Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service

7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
103	Premises, furniture and equipment to be safe, clean and in good repair
102A	Transportation of children other than as part of an excursion
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
117B	Minimum requirements for a person in day-to-day charge
146	Nominated Supervisor
S161	Offence to operate education and care service without nominated supervisor

RELATED POLICIES

Arrival and Departure Policy Administration of First Aid Policy Child Safe Environment Policy Child Protection Policy Code of Conduct Policy Family Communication Policy Health and Safety Policy	Incident, Illness, Accident and Trauma Policy Interactions with Children, Family and Staff Policy Responsible Person Policy Safe Transportation Policy Student and Volunteer Workers Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

The purpose of this policy is to identify, assess, manage and minimise the risks associated with working alone in the Vacation Care setting. The safety of our educators and children is paramount. This policy will provide a guide for educators in managing the potential risks, ensuring they are offered the support and the resources required to continue to provide high quality care for children.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Service adheres to the National Principles for Child Safe Organisations and have adopted the Child Safe Standards necessary to protect children from harm. Our staff implement child safe practices and provide adequate supervision at all times.

'*Working alone*' refers to one educator working either on their own (without children present) or caring for up to 15 children as per the National Regulations for Vacation Care Services. Where possible, our Service will employ at least two staff members.

Situations may arise however, where normal enrolment at our Service decreases due to an infectious disease, natural disaster or other reason, and two staff members is either not practical, or financially viable. In this situation, we may need to amend our rosters resulting in only one educator/staff member in attendance.

The viability of the working alone arrangement is largely dependent on maintaining strong and consistent communication between the Service management team members.

RECRUITMENT and STAFFING

Our Vacation Care Service ensures that all staff employed have been recruited from a robust screening and employment process. Only the most suitable and qualified applicants are employed with our Service and we have ensured all staff have valid Working With Children Checks and, are committed to ensuring a child safe environment.

Staff who may be required to work on their own, take on the role of Nominated Supervisor/ Responsible Person. A Nominated Supervisor or Responsible Person must have an adequate knowledge and understanding of the provision of education and care to children, the Education and Care National Law and Regulations and National Quality Standard, and the approved learning framework (EYLF). They have the ability to effectively supervise and manage an education and care service. They hold current First Aid (including CPR), asthma and anaphylaxis training.

Our Service ensures that a support staff member is available by telephone at all times the Vacation Care Service is open and providing education and care to children.

STAFFING

- A list of support/emergency staff who can be called upon must be clearly displayed next to the Service phone.
- The contact details for the Approved provider will also be displayed.

PHYSICAL PREMISES

- Our Service will ensure that the physical environment is safe and free from hazards including the outdoor environment
- Daily checklists will be completed to inspect the indoor and outdoor areas. These will be completed prior to the children's arrival
- Adequate lighting will be installed around the Vacation Care Service, walkways, carpark and bathrooms.
- A working alone risk assessment will be completed to identify any hazards or potential hazards including slips/trips/falls when required.
- Bathrooms and tiled surfaces will be checked regularly to ensure they are dry and not a slip risk to children.

SAFETY

- Attendance records will be maintained and checked at all times
- The educator will conduct random 'head counts' during each care session
- Emergency evacuation procedures (including lockdown and bushfire emergency procedures) will be clearly displayed at the entry/exit point of the Service's indoor and outdoor areas. The evacuation procedures must include a floor plan which clearly identifies the exit route and assembly area.
- Emergency evacuation drills must be rehearsed at least every three months.
- Emergency phone numbers will be clearly displayed near the service's phone and entered into the work mobile phone for the educator to access at all times.
- The educator working alone must observe Work Health and Safety practices at all times as outlined in the Service's Workplace Health and Safety Policy
- The educator must follow safe lifting procedures and must not lift anything that is a recommended two-person lift.
- The educator on duty will park their car at the closest point to the Service entry/exit.

- The educator on duty must always carry the service phone.

ARRIVAL AND COLLECTION OF CHILDREN

- Parents/guardians will sign their child/ren into the Service at the beginning of the session of care and when collecting their child/ren at the end of a session of care, noting their name, time and date of care on the attendance sign in/out sheet.
- In the event where a child cannot be collected by their parent/guardian or an authorised person the parent/guardian will notify the Service in writing. The educator on duty will need to sight photo identification before releasing the child.

ILLNESS AND INJURIES

- The educator on duty may, on occasion be required to care for a sick or injured child. It is important that the child receives suitable care and/or first aid.
- It is also important for the educator to ensure that appropriate supervision is maintained for the other children in care. Depending on the individual circumstances and the severity of the incident, the educator may need to call upon the assistance of one of the support staff or contact the Approved Provider and/or parent/guardians.
- When caring for a sick/injured child the educator may need to alter the program of activities to ensure children's safety is maintained and supervision is provided for other children. For example, a physically active play experience may need to be paused while the educator is administering First Aid and the children may be directed to have quiet/reading time or the educator may instruct one of the older children to initiate a group game.
- In the event of any incident, injury, trauma or illness, the educator will adhere to our policies and procedures.
- An Incident, Injury, Trauma and Illness record must be completed accurately by the educator and acknowledged/signed by the parent/caregiver upon collection of their child.
- The Approved Provider will ensure that notification is made to the regulatory authority in the event of any serious incident/injury or in the event of a notifiable illness/disease.

CONTINUOUS QUALITY IMPROVEMENT

Our Vacation Care Service will continue to evaluate and assess our working alone practices through critical reflections, checklists, professional learning and discussions with families and staff.

The viability of the Service to operate with only one educator must be carefully considered to ensure adequate supervision is provided at all times.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Children's Services Award 2010.

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Government of South Australia. Department for Education and Child Development- *Guidelines for Educators working alone in OSHC Services operating on Department for Education and Child Development (DECD) sites*.

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT POLICY REVIEW DATE: DECEMBER 2021
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BULLYING, DISCRIMINATION AND HARASSMENT POLICY

Our Vacation Care Service is committed to creating a workplace with vision and meaningful direction, adhering to our code of conduct and practicing ethical behaviour to ensure a productive work environment free from bullying, discrimination, and/or harassment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other’s strengths and skills.
4.2.2	Professional standards	Professional standards guide practice, interactions and relationships.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

168	Education and care services must have policies and procedures
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RELATED POLICIES

Code of Conduct Policy	Multi-Cultural Policy
Cyber Safety Policy	Privacy and Confidentiality Policy
Family Communication Policy	Respect for Children Policy
Health and Safety Policy	Staffing Arrangements Policy
Interactions with Children, Family and Staff Policy	Student and Volunteer Workers Policy
	Work Health and Safety Policy

PURPOSE

We are committed to providing a safe and equitable workplace for all staff and educators. Bullying, discrimination and harassment will not be tolerated under any circumstances. As part of this commitment, we aim to prevent workplace bullying by adhering to the National Quality Standard, My Time, Out Place- Framework for school age care in Australia and our service statement of philosophy, ensuring a safe workplace and the wellbeing of all staff and educators employed at the Service.

SCOPE

This policy applies to management, staff, and educators, of the Vacation Care Service.

IMPLEMENTATION

Everyone has a right not be bullied or harassed at work. Workplace bullying occurs when a person or group of people repeatedly behave unreasonably towards a worker or a group of workers, creating a risk to health, safety, and wellbeing. Bullying may involve any of the following types of behaviour:

- aggressive or intimidating conduct
- making belittling or humiliating comments
- spreading malicious rumours
- teasing, practical jokes or initiation of, or participation in ‘initiation ceremonies’
- exclusion from work-related events
- unreasonable work expectations
- displaying offensive material, and/or
- pressure to behave in an inappropriate manner.

Bullying does not include management action carried out in a reasonable manner including:

- making decisions about poor performance
- taking disciplinary action
- directing and controlling the way work is to be carried out.

Discrimination occurs when someone is treated less favourably than others because of a particular characteristic (such as age, disability, or gender), or belong to a particular group within the population (due to, for example, religion, culture, or sexual orientation).

Harassment involves unwelcome behaviour that intimidates, offends or humiliates a person because of particular characteristics as listed above.

There are a number of anti-discrimination, equal employment, workplace relations, and human rights laws which make it illegal to discriminate or harass a person in the workplace. Australia’s federal anti-discrimination laws are contained in the following legislation:

[Age Discrimination Act 2004](#)

[Disability Discrimination Act 1992](#)

[Racial Discrimination Act 1975](#)

Our Service philosophy, code of conduct and the [Early Childhood Australia \(ACA\) Code of Ethics](#) will guide educator behaviours and interactions and adhere to best practice by providing a vision and a purposeful and meaningful direction to ensure a safe working environment for all staff.

MANAGEMENT AND THE NOMINATED SUPERVISOR WILL ENSURE:

- a thorough induction process for new employees is conducted at the commencement of employment
- an understanding and compliance with discrimination law is communicated with all employees
- all staff have a comprehensive understanding of the Service's code of conduct, *Grievance Policy* and *Code of Ethics*.
- educators are informed that inappropriate behaviour, including bullying, discrimination, and harassment will not be tolerated and will be advised of potential consequences of this behaviour.
- educators are aware of the *Bullying, Discrimination, and Harassment Policy*.
- inappropriate behaviour is addressed immediately.
- educators are aware of appropriate interactions through professional development and training
- staff and educators are aware of their job roles and responsibilities which are clarified through job descriptions, team meetings, performance appraisals, and service expectations
- constructive feedback is provided to staff and educators
- communication practices are reviewed frequently to ensure best practice
- all staff and educators are treated equally
- all staff and educators are encouraged to embrace the uniqueness and diversity of their colleagues.

EDUCATORS WILL:

- be involved in decision making with a clear understanding of their roles and responsibilities, outlined in each individual job description
- respect the skills, strengths and opinions of all educators in order to create a professional, cohesive team
- comply with all discrimination laws

- be responsible for their own actions in the workplace
- raise matters of concern at an early stage to management
- provide management with specific information regarding the perceived bullying, discrimination, and/or harassment, and be prepared to have the complaint made known to the person to allow for fair management and rectification
- maintain confidentiality and not discuss or release information relating to a bullying, discrimination, or harassment allegation.
- take bullying seriously
- evaluate the effectiveness of strategies implemented to discourage and eradicate bullying, discrimination, and/or harassment.

SOURCE

Anti-Discrimination Act: See <https://raisingchildren.net.au/disability/disability-rights-the-law/law/anti-discrimination-laws> for Acts for specific Australian states and territories.

Australasian Legal information institute: www.austlii.edu.au

Australian Human Rights Commission: <https://www.humanrights.gov.au/employers/good-practice-good-business-factsheets/quick-guide-australian-discrimination-laws>

Australian Human Rights Commission. (2019). Reform of discrimination law: <https://www.humanrights.gov.au/>

Australian Children's Education & Care Quality Authority. (2014).

Early Childhood Australia Code of Ethics. (2016).

Education and Care National Regulations. (2011).

Fair Work Act 2009 (Cth).

Fair Work Ombudsman. (2019). Managing performance & warnings: <https://www.fairwork.gov.au/employee-entitlements/managing-performance-and-warnings>

Fair Work Ombudsman. Rights and obligations: <https://www.fairwork.gov.au/how-we-will-help/templates-and-guides/factsheets/rights-and-obligations/workplace-discrimination>

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2020).

Guide to the National Quality Standard. (2017).

OSHC Code of Professional Standards: http://networkofcommunityactivities.org.au/wp-content/uploads/2013/03/OSHC_Code_Standards.pdf

Safe Work Australia. (2019). Bullying: <https://www.safeworkaustralia.gov.au/bullying>

Work Health and Safety Act 2011 (Cth).

Workplace Relations Act 1996 (Cth).

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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GRIEVANCE POLICY (Staff)



Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Out of School Hours Care Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our Vacation Care Service's procedures for receiving and managing informal and formal complaints from staff. Educators can lodge a grievance with management with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development.
4.1.2	Continuity of Staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

168	Education and care service must have policies and procedure
173	Prescribed information to be displayed
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Child Protection Policy Code of Conduct Policy Family Communication Policy Grievance Policy (Families) Interactions with Children, Family and Staff Policy	Privacy and Confidentiality Policy Record Keeping and Retention Policy Respect for Children Policy Responsible Person Policy Student and Volunteer Workers Policy
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PURPOSE

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We believe in team collaboration to ensure a safe, healthy and harmonious work environment.

We will ensure that all persons making a complaint are guided by the following policy values:

- Procedural fairness and natural justice
- Code of ethics and conduct
- Culture free from discrimination and harassment
- Transparent policies and procedures
- Opportunities for further investigation
- Adhering to our Vacation Care service philosophy

Procedural fairness and natural justice

Our Vacation Care service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence

SCOPE

This policy applies to educators, staff, and management, of the Vacation Care Service.

IMPLEMENTATION

Grievances can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. The Grievance Policy ensures that all persons are presented with procedures that:

- Value the opportunity to be heard
- Promote conflict resolution
- Encourage the development of harmonious partnerships
- Ensure that conflicts and grievances are mediated fairly
- Are transparent and equitable

DEFINITIONS

Complaint: An issue of a negligible nature that can be resolved within 24 hours and does not require a comprehensive investigation. Complaints include a manifestation of discontentment, such as poor service, and any verbal or written complaint directly related to the Vacation care Service (including general and notifiable complaints). Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless associated with the safety of children).

Complaints and Grievances Register: Records information about complaints and grievances received at the centre, along with the outcomes. This register must be kept in a secure file, accessible only to educators and Regulatory Authority. The register can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. For example: If the service is in breach of a regulation causing injury or possible harm to a child.

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Regulation and Law, National Quality Standard or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider or Nominated Supervisor to the Department of Early Childhood Education and Care within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Approved Provider, Nominated Supervisor, or Educator is unsure whether the matter is a notifiable complaint, it is good practice to contact [Regulatory Authority](#) for confirmation. Written reports must include:

- details of the event or incident

- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee (or Nominated Supervisor)
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the centre in contravention of the Regulations or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183.

We acknowledge that conflict is a natural part of the work environment. It is important that all conflict is resolved as unresolved conflict can lead to tension; stress; low productivity; bitter relationships; excess time off; ill health; anxiety and many other destructive emotions. When conflict is addressed and handled constructively the outcomes are feelings of relaxation; openness; high productivity; vitality; good health, empowerment; a sense of achievement etc.

Positive communication between educators is vital to the smooth running of the Service and to ensure a positive environment for children. Educators are expected to treat other educators with respect, accept differences and share ideas. It is every staff member's responsibility to contribute to the development of an open, healthy and constructive work environment. All grievances, whether considered minor or not, are to be dealt with promptly, professionally and thoroughly.

The Service's employees are expected to look at conflict in a positive way, ready to learn something new,

reflect on good quality practice, improve work relationships and ultimately provide better care and education for children.

Employees are also to be aware of their responsibility to be a good role model for children, and appropriately and professionally handle conflict with work colleagues, children, parents, and other associates.

Employees should regularly reflect on *Early Childhood Australia's Code of Ethics* for guidance of appropriate behaviour when dealing with conflict. The Code of Ethics states that all team members should “make every effort to use constructive methods to resolve differences of opinion in the spirit of collegiality.”

Privacy and Confidentiality

Management and Educators will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances. However, if a grievance involves a staff member or child protection issues, a government agency may need to be informed. (see: Reportable Conduct Scheme in *Child Protection Policy*)

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process

Should a conflict of interest arise during a grievance or complaint that involves the Approved Provider or Nominated Supervisor, other Management will be nominated as an alternative mediator.

Our OSHC Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is be adhered to.

Management/Nominated Supervisor will:

- ensure staff and educators are aware of the person to whom complaints can be made and the processes required
- treat all grievances seriously and as a priority.
- ensure grievances remain confidential.

- ensure grievances reflect procedural fairness and natural justice.
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint.
- investigate and document the grievance fairly and impartially.

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent.
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond.
- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity).
- providing the employee with a clear written statement outlining the outcome of the investigation.
- Advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - management will provide a written response outlining the outcome and provide a copy to all parties involved.
 - if a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflects the resolution and sign in agreeance.
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant.
- keep appropriate records of the investigation and outcome and store these records in accordance with our Privacy and Confidentiality Policy and Record Keeping and Retention Policy.
- monitor ongoing behaviour and provide support as required.
- ensure the parties are protected from victimisation and Bullying.
- request feedback on the grievance process using a feedback form.
- track complaints to identify recurring issues within the Service.
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised.

Educators, staff, volunteers and visitors will:

- be aware of the possible ramifications of their actions when dealing with staff issues

- raise the grievance or complaint directly with the person they have grievance with, in a professional manner and at an appropriate time. Both parties should try to resolve the issue and develop solutions to ensure the problem does not happen again. Discussions should be based on the principles of privacy, confidentiality, respect and open-mindedness, will not involve other educators, staff, volunteers or visitors (e.g. parents) and will take place away from children
- if the person is unable to resolve the issue or feels uncomfortable raising the matter directly with the person concerned, the grievance or complaint must be raised with the Approved Provider/Management or Nominated Supervisor. The Approved Provider or Nominated Supervisor (or other manager) may ask for the complaint/grievance to be put in writing
- provide all relevant information, outlining the issue, identifying any other person involved in the problem, and any suggested solution
- communicate openly about the issue with the relevant parties
- raise any grievance involving suspected or actual unlawful activity (including bullying) with the Approved Provider or Nominated Supervisor immediately and privately
- maintain confidentiality at all times
- maintain professionalism at all times.

When the persons involved cannot resolve the grievance between them in a constructive and professional way the following steps will be taken:

The aggrieved person is to contact their immediate supervisor (Nominated Supervisor or Management) who will act as Mediator.

The Mediator will have an interview with the persons involved and clarify the facts, work out whether advice is needed from other sources, discuss options available, and help to formulate a plan of action. If an employee does not feel comfortable in approaching their supervisor, or the conflict is with their immediate supervisor, they can contact the next level of management to act as Mediator.

If an amicable resolution does not occur at this meeting the Mediator is to present a report to the next level of management outlining:

- the nature of the grievance
- the procedures followed to date
- the solution(s) sought
- the recommended plan of action or resolution.

If an agreement is reached the mediator is to present a report to the next level of management

outlining:

- the nature of the grievance
- the procedures followed to date
- the solution(s) agreed upon
- the plan of action to reach this solution and review time if warranted.
- a copy of this report is to be provided to all persons involved in the grievance, and a copy is to be retained at the workplace.

GRIEVANCE PROCEDURES

Harmonious staff relations within the Vacation care Service largely depend on staff feeling satisfied that their professionalism is being acknowledged by their involvement in appropriate decision-making processes.

The quality of industrial relations is likely to be substantially better in a workplace if the decision-making processes adopted permit staff to have input into decisions that affect the nature and quality of their professional work.

Management and staff within the organisation will work together to develop and implement appropriate strategies to facilitate consultative and collaborative decision-making processes within the workplace.

Where staff feel these processes have failed and are in conflict with decisions made by Management, including the Board, the following procedure is to be followed:

- the aggrieved person(s) will discuss the grievance with their immediate supervisor.
- the supervisor is to report the grievance to the Nominated Supervisor/ Licensee.
- the Mediator will seek advice as necessary from other sources, (e.g.: unions, Work Cover and funding bodies).
- the Mediator will then advise Management of the possible solutions.

Meetings are to be arranged with the aggrieved person(s) as necessary throughout the process. The outcome of the grievance must be reported to the aggrieved person within a week of the decision.

Resolution of Grievances

Grievances are considered resolved when all persons involved agree to a solution, when the cause of the grievance has been removed or resolved, and when arrangements have been made, if appropriate, to

repair any damage and distress suffered by the persons involved. Strategies agreed upon by both parties are to be put in place to help avoid further conflict.

Unresolved Conflict

If resolution of the conflict is unsuccessful after all procedures in the *Grievance Policy* have been followed it may then be necessary to take disciplinary action.

Confidentiality

Mediators are to use discretion and do their utmost to maintain confidentiality. Any breach of this confidentiality could result in a charge of misconduct. However, confidentiality cannot be guaranteed in the following situations: if it is considered that someone is in danger, if disciplinary action or criminal investigation might be necessary; or if employer liability might be involved.

No action will be taken against the person about whom a formal complaint is lodged until they are made aware of any allegations so that they may respond.

Support Person

A Staff member is able to nominate a support person to attend any meetings with them. This person may be a union representative, impartial friend, or family member.

Educators, staff, volunteers and visitors will not:

- become involved in complaints or grievances that do not concern them.
- raise complaints with an external complaints body, such as a court or Tribunal, without exhausting the Vacation Care Services' grievance procedures.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Commonwealth Ombudsman. (2009). Better practice guide to complaint handling: https://www.ombudsman.gov.au/data/assets/pdf_file/0020/35615/Better-practice-guide-to-complaint-handling.pdf

Education and Care Services National Regulation. (2011).

Fair Work Australia: <https://www.fairwork.gov.au/>

National Quality Standard. (2017).

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER: 2021
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PREGNANCY IN EARLY CHILDHOOD POLICY

Pregnancy is a time of great physical and emotional change that can lead to changes in the woman’s ability to perform and manage certain types of work. Our Vacation Care Service is committed to ensuring the health, safety, and wellbeing of pregnant staff by providing information, strategies, and ongoing support, as well as information about leave entitlements available to them.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management System	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
88	Infectious Disease Policy
168	Education and care service must have policies and procedures

RELATED POLICIES

Administration of Medication Policy Control of Infectious Diseases Policy Coronavirus (COVID-19) Management Policy Hand Washing Policy	Health and Safety Policy Immunisation Policy Work, Health and Safety Policy
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PURPOSE

Our Service is committed to providing a safe and healthy workplace for all employees including pregnant workers. We understand that pregnancy can bring many changes to women’s ability to manage certain types of work, particularly at the later stages of pregnancy. We aim to work with all employees to negotiate a supportive working environment that will assist them to be healthy and productive members

of the workforce.

SCOPE

This policy applies to Staff and Management of the Vacation Care Service.

IMPLEMENTATION

The process and steps required to ensure a female employee's health and wellbeing during pregnancy will vary. For many female employees, variations to duties, equipment, and the work environment will not be necessary and usual duties may be performed for the duration of the employee's pregnancy. It is the responsibility of the female employee to raise and discuss any workplace concerns and/or issues with their Manager/Nominated Supervisor. However, there may be instances where the manager or Nominated Supervisor is required to exercise their duty of care to ensure the safety, protection and wellbeing of their staff.

HEALTH AND SAFETY

The potential risk of injury or ill health will be discussed with staff members who are pregnant in accordance with the service's Health and Safety Policy and procedures. Where there is an identifiable risk associated with a pregnant employee's work, the Nominated Supervisor will consult with the employee to examine how the work can be modified to eliminate or minimise the risk.

- The Approved Provider/ Nominated Supervisor will maintain current information about their Workplace Health and Safety responsibilities to their employees and maintain a safe workplace for all employees.
- In regard to infectious diseases, the Approved Provider/ Nominated Supervisor will alert all staff to the potential risks to health that may arise through their employment at the Vacation Care Service
- Female Educators will be advised that they should have their immunity to Rubella, Measles, Chicken Pox and Cytomegalovirus (CMV) tested well before planning pregnancy.
- The Approved Provider will ensure pregnant Service staff are aware of health risks including:
 - exposure to specific infectious diseases or conditions that can have an adverse impact on pregnancy, including: Cytomegalovirus (CMV), Hand, foot & mouth disease, Human parvovirus B19 (erythema infectiosum, fifth disease), Listeriosis, Rubella (German measles), Measles, Hepatitis B, HIV (Human Immunodeficiency Virus), AIDS (Acquired

Immunodeficiency Syndrome, Pertussis (Whooping cough), Toxoplasmosis and Varicella (chickenpox)

- stress and burnout
- swollen feet and varicose veins
- heat stress
- cigarette smoke (outside smoke free zones.)
- chemicals and chemical fumes
- Implementing strategies which help reduce physical stress for pregnant Service staff, such as: - do less physical tasks
- Pregnant women should avoid contact with cat faeces, to minimise the risk of toxoplasmosis.

MANUAL HANDLING

To minimise the risk of back injury to pregnant Service staff and to comply with Health and Safety and other relevant legislation, we will:

- ensure pregnant Service staff are aware they are at more risk of back pain and injury from working while pregnant because of anatomical and physiological changes such as softening of ligaments and tendons, extra weight load, muscle fatigue, and tiredness.
- ensure pregnant Service staff are aware that the risk of back pain and injury increases with the progression of pregnancy and their ability to do physical work decreases
- advise pregnant staff to consult their doctor if they have any back pain or other health concerns during the pregnancy.
- ensure that pregnant staff are aware of the following strategies to reduce the risk of back pain and/or injury:
 - restrict lifting children or heavy equipment
 - ensure you use correct lifting and carrying techniques
 - diversify tasks to avoid prolonged standing
 - limit time standing in one position for too long
 - use footrests for raising feet when sitting
 - use suitable adult-height workbenches, desks and chairs
 - avoid bending over: Use your knees and hips to lower yourself to the children's level or when picking something up from a low level.
 - try to maintain a correct posture as the growing uterus can frequently cause postural problems.
 - use stepladders and trolleys as required

- o ensure that heavy or awkward items are stored at an appropriate height and close to where they are needed

STRESS MANAGEMENT

To minimise the risk of stress and ensure pregnant Service staff have adequate opportunities for leave and holidays, we will:

- ensure pregnant Service staff are aware they are at more risk of stress at work because of changing abilities to meet usual work commitments.
- ensure pregnant Service staff are aware that the risk of stress at work might increase with the progression of the pregnancy.
- ensure pregnant Service staff are aware that they are legally required to take leave from work for a period before and after the pregnancy and should seek support from the Approved Provider/ Nominated Supervisor to arrange leave.
- assist pregnant Service staff with leave planning and provide current information to them about their conditions of employment and leave entitlements.
- advise pregnant Service staff to see their general practitioner/ obstetrician if they have any stress or other psychological or physiological health problems during pregnancy.

IMMUNISATION AND INFECTIOUS DISEASES

Due to constant close contact with children, staff in School Aged Care services may be at an increased risk of contracting some vaccine-preventable diseases. Authorities advise against pregnant women receiving live viral vaccines during pregnancy, or within 28 days prior to falling pregnant. Therefore, women of childbearing age should ensure that vaccinations are up to date. Common vaccine-preventable infections that may have an adverse effect on pregnancy include:

Rubella (German measles)

The greatest risk to the unborn baby occurs in the first twenty weeks of pregnancy, with a higher risk if the mother contracts Rubella in the first ten weeks. Employees planning pregnancy should have a blood test to ascertain immunity, as the vaccination must be given one month before becoming pregnant.

Measles

This is a highly infectious viral disease that can cause serious complications to the unborn child. It spreads through direct and indirect contact from contaminated people or surfaces. It can also remain in the air for up to two hours after the infected person has left. Employees can minimise the risk of infection by

paying particular attention to hand hygiene and ensuring that workers and children use correct cough and sneeze hygiene practises. Employees must also ensure that cleaning practises are being conscientiously followed throughout the centre. This vaccination is not recommended during pregnancy: the non-immune staff member should ensure that the vaccination has been received one month before falling pregnant.

NOTE: The vaccination for Rubella and Measles is given together in the MMR vaccination (Measles, mumps, and rubella).

Varicella (Chickenpox)

If exposed to varicella during the first three months of pregnancy the employee must seek medical advice. A blood test will reveal the mother's immune status. This vaccination is not recommended during pregnancy: the non-immune employee should ensure that the vaccination has been received one month before falling pregnant.

Hepatitis B

Hepatitis B is transmitted through blood and other bodily secretions. Adult vaccinations are available but should not be received during pregnancy. However, all babies born in Australia receive the Hepatitis B vaccination at birth as part of the National Immunisation Program Schedule. Employees must ensure that policies and National Health Medical Research Council (NHMRC) guidelines are followed for managing exposure to blood and bodily fluids, including ensuring that children's wounds are covered appropriately.

Influenza

Influenza vaccinations are strongly recommended for pregnant women and can be safely given at any stage of the pregnancy. Vaccinating pregnant women also protects their infants from influenza in the first 6 months of life. (Australian Government Department of Health)

Pertussis (Whooping cough)

Pertussis can be a life-threatening disease for the newborn. It is recommended that the pregnant employee receive a pertussis vaccination in the third trimester of pregnancy as evidence indicates this is more beneficial to the newborn than receiving the vaccination prior to pregnancy.

Pregnant employees must also be aware of infections for which there are no vaccinations and take the necessary precautions. These infections include:

Cytomegalovirus (CMV)

CMV is spread through infected saliva and urine. Pregnant employees should therefore pay particular attention to hand hygiene, and where possible, minimise tasks that involve assisting in toileting, cleaning up toileting accidents or coming into contact with body secretions.

Hand, foot and mouth disease

Although the risk is minimal, employees who acquire this disease in late pregnancy can pass it to the unborn child. The worker should therefore pay particular attention to hand hygiene at all times.

Human parvovirus B19 (erythema infectiosum, fifth disease)

This virus can be transmitted to the unborn baby. Employees should therefore pay particular attention to hand hygiene at all times.

Listeriosis

Listeriosis is a bacterial infection that can be avoided by ensuring that raw or partially cooked foods are avoided during pregnancy, and thoroughly washing all fruit and vegetables in clean running water.

Toxoplasmosis

This disease is caused by a parasite that can be found in raw fruit and vegetables and spread by animals such as cats and birds. During pregnancy the parasite can pass through the placenta to the developing baby. A blood test can reveal if the mother is immune. The employee should pay attention to hand hygiene, avoid cleaning the sand pit (where there may be cat faeces) or bird cages, and should wash and peel fruit and vegetables.

HIV (human immunodeficiency virus), AIDS (acquired immunodeficiency syndrome)

HIV is a virus that can lead to AIDS. Like Hepatitis B, these viruses are transmitted through blood and other bodily secretions. Employees must ensure that policies are followed for managing exposure to blood and bodily fluids, including ensuring that children's wounds are covered appropriately.

Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, *The Australian immunisation handbook*, and NSW Health *Having a baby*.

THE APPROVED PROVIDER AND NOMINATED SUPERVISOR WILL:

- be as flexible as possible within the constraints of the workplace, to ensure the special needs of pregnant employees are considered and options to address their needs implemented wherever possible.
- provide medical practitioners with any requested information detailing the employee's duties, to assist the medical practitioner to assess the pregnant employee's fitness for work and consideration of alternative duties where applicable.
- alert all staff and families if a child or staff member contracts an infectious disease or virus such as coronavirus (COVID-19)
- recommend that pregnant staff members discuss concerns about the transmission of coronavirus (COVID-19) with their obstetrician or general practitioner
- ensure that all staff members are practising effective hand hygiene at all times
- ensure that all staff members are familiar with infection control policies and procedures and actively adhere to these at all times
- complete a risk assessment to identify any hazards or potential risks to pregnant staff members in the service
- put systems and strategies into place to address increased risk due to having a pregnant staff member in the workplace
- meet anti-discrimination law obligations by ensuring pregnant employees are not subjected to negative comments or remarks about their pregnancy
- negotiate with the pregnant employee to ensure a safe environment
- provide information to the employee's general practitioner, as requested, in regard to normal duties performed on a day-to-day basis
- meet anti-discrimination law obligations by ensuring pregnant workers employees are not subjected to negative comments or remarks about their pregnancy.

EMPLOYEES WILL:

- ensure the treating medical practitioner is aware of the specific work environment and activities that are undertaken on a day-to day basis.
- seek advice on infectious diseases relevant to pregnancy, personal immunity status for these diseases, and standard precautions for infection control
- access information relevant to infection control required throughout the pregnancy through [The Australian immunisation handbook](#).
- employees should inform management of their pregnancy as early as possible so that any potentially adverse risks can be averted, and alternative arrangements made if necessary

- immediately notify management of their pregnancy when medical and/or occupational health and safety issues are being experienced or where they may be reasonably foreseen.
- discuss occupational and workplace health and safety and/or medical concerns with a treating medical specialist and the Approved Provider/ Nominated Supervisor.
- obtain current medical documentation to support medical and/or occupational and workplace health and safety issues being experienced throughout the pregnancy.
- raise any grievances, issues, or concerns with management in accordance with relevant policies and procedures
- if the employee wishes to continue working past 6 weeks prior to the expected date of birth, they are required to provide a doctor's certificate confirming they are fit, and able to continue to work.
- our Vacation Care Service requires pregnant employees to raise any difficulties that they are experiencing in regard to performing their duties at the service with the Approved Provider/ Nominated Supervisor, so that potential risks to health can be avoided and quality childcare maintained.
- employees have a responsibility under Workplace Health and Safety legislation to take reasonable care to protect themselves (and others) in the workplace. This includes cooperating with the Approved Provider/ Nominated Supervisor on health and safety matters, such as taking appropriate precautions to avoid health risks during pregnancy.

SOURCE:

Australian Children's Education & Care Quality Authority. (2014).

Australian Government Department of Health *Australian Immunisation Handbook*

Australian Government Department of Health Coronavirus (COVID-19) health alert

Australian Human Rights Commission. *Supporting Working Parents: Employee guide*. (2015).

<https://supportingworkingparents.humanrights.gov.au/employees/working-while-pregnant-or-potentially-pregnant>

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Child Australia. (2012). *Work, health and safety in education and care services*.

<http://www.echr.edu.au/docs/default-source/resources/ipsp/work-health-and-safety-in-education-and-care-services.pdf?sfvrsn=8>

Early Childhood Australia Code of Ethics. (2016).

Fair Work Act 2009 (Cth).

Fair Work Commission: <https://www.fwc.gov.au>

Fair Work Ombudsman: <http://www.fairwork.gov.au>

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard. (2020).

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

NSW Health. (2016). *Handle with care: Looking after yourself in pregnancy.*

Revised National Quality Standard. (2018).

Safe Work Australia

The Pregnancy Centre (2016). <http://www.thepregnancycentre.com.au/pregnancy/well-being/taking-care-of-your-back>

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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RESPONSIBLE PERSON POLICY



A Responsible Person must be physically in attendance at all times that the Service is educating and caring for children.

Approved providers are responsible for appointing a Responsible Person who is aged 18 years or older, has adequate knowledge and understanding of the provision of education and care to children, and has an ability to effectively supervise and manage an education and care service (ACECQA, 2017)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing Arrangements	Staffing arrangements enhance children's learning and development
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills
4.2.2	Professional standards	Professional standards guide practice, interactions and relationships.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS

Section 162	Offence to operate education and care service unless responsible person is present
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Section 169	Offence relating to staffing arrangements
117A	Placing a person in day-to-day charge
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
150	Responsible Person
168	Policies and Procedures
173	Prescribed information to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider

RELATED POLICIES

Code of Conduct Policy	Respect for Children Policy
Health and Safety Policy	Staffing Arrangements Policy
Interactions with Children, Family and Staff Policy	Supervision Policy
Privacy and Confidentiality Policy	Work Health and Safety Policy

PURPOSE

Our Service is committed to meeting our duty of care obligations under the National Law & Regulations to ensure a Responsible Person is physically on the premises at all times to ensure the health, safety, wellbeing, learning, and development of all children at the service is maintained at all times.

SCOPE

This policy applies to the Management, Approved Provider, Nominated Supervisor, Responsible Persons and educators of the Vacation Care Service.

DEFINITIONS

NAME	DEFINITION
Nominated Supervisor	A person, over the age of 18, with responsibility for the day to day management of an approved service. The Nominated Supervisor has a range of responsibilities under the Law and Regulations that govern the operation of education and care services.

Responsible Person	A person, over the age of 18, who is physically at the Service and has the role of Nominated Supervisor or duly appointed person. The Responsible Person has consented to be placed in day to day charge of the Service but does not take on the responsibilities of the Nominated Supervisor rather they ensure the consistency and continuity in practices.
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IMPLEMENTATION

A Responsible Person will be on the premises at all times, and the details of the Responsible Person will be clearly visible to families and visitors at the main entry of the Service.

If the Responsible Person leaves the premises, they will 'hand over' obligations for the role to another duly appointed person at the Service. It is vital that all hand-overs to a designated Responsible Person are documented when commencing this position throughout the day. The process for determining the Responsible Person will be clear to all educators and staff, and procedures will be followed at all times. Both the outgoing and incoming Responsible Persons will ensure the displayed name of the current Responsible Person at the Service correctly reflects who presently holds the position.

Our Service will have one Responsible Person present at all times when caring for and educating children.

A responsible person can be:

- An Approved Provider or a person with management or control
- A Nominated Supervisor, *or*
- A person in day-to-day charge of the service (PIDTDC)

The Approved Provider/Management will ensure a Responsible Person:

- is appointed and physically on the premise at all times children are being educated and cared for
- is over the age of 18 years
- meets the minimum requirements for qualifications, experiences and management capabilities
- holds a valid and current Working With Children Check (or state/territory equivalent) and Australian National Police Check
- has completed child protection training and is aware of the reportable conduct scheme
- has knowledge and a commitment to the National Child Safe Standards
- has adequate knowledge and understanding of the provision of education and care to children, the Education and Care National Law and Regulations and National Quality Standard, the approved learning framework (EYLF), Family Assistance Law and administration of CCS

- has the ability to effectively supervise and manage an education and care service
- is a fit and proper person (as per regulatory authority conditions)
- provides references including their current and previous employers. These will be checked and records kept on file
- provides written consent for the position of Responsible Person and this is filed in staff records (not required if the approved provider is the responsible person)

The Approved Provider/Management will ensure:

- the regulatory authority is notified 7 days prior to a **Nominated Supervisor** starting at the Service or within 14 days after the person has commenced the role through NQA IT System
- the regulatory authority is notified if the **Nominated Supervisor** changes their name or contact details; is no longer employed by the Service, has been removed from the role or withdraws their nomination.
- a Responsible Person will be removed from the position should management become aware of a matter or incident which affects the ability of the person to meet the minimum requirements of the position.
- the staff register has the name of the Responsible Person at the Service for each time children are being educated and cared for by the Service
- a Responsible Person is on duty from the time the Service opens each day until the time the Service closes
- the **PIDTDC** interchanges with the Nominated Supervisor in their absence
- Responsible Persons are aware that they have to sign off when they have finished their duty and will ensure the Nominated Supervisor or appointed Responsible Person (PIDTIC) will sign on and take on the role
- a staff record is kept recording
 - the full name, address and date of birth of the responsible person/nominated supervisor;
 - evidence of relevant qualifications
 - if applicable, evidence that the nominated supervisor is actively working towards that qualification
 - evidence of any approved training (including first aid training)
 - Working with Children Check – identifying number and expiry date

A Nominated Supervisor/appointed Responsible person will:

- provide written consent to accept the role of Responsible Person

- sign their name and hours of responsibility on the Responsible Service Register
- ensure that the identity of the Responsible Person on duty is displayed in the main entrance of the Service and is easily visible for families and visitors
- inform management (Approved Provider/Nominated Supervisor) in a timely manner in the event of absence from the Service due to leave or illness so they can be replaced by another Responsible Person
- ensure they have a sound understanding of the role of Responsible Person
- abide by any conditions placed on the Responsible Person
- understand that a Responsible Person placed in day-to-day charge (PIDTIC) of the Service does not have the same responsibilities under the National Law as the Nominated Supervisor.
- in the case of Nominated Supervisor, Notify the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status as fit and proper (such as the suspension or cancellation of a Working with Children Check card or teacher registration), or if they are subject to disciplinary proceedings.
- notify management at the Service in writing, if they wish to withdraw their consent to be a Responsible Person

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Children’s Education & Care Authority. (2017). Responsible Person Requirements for Approved Providers: <https://www.acecqa.gov.au/sites/default/files/2018-09/ResponsiblePersonRequirements.pdf>

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Guide to the National Quality Standard. (2017).

Revised National Quality Standard. (2018)

REVIEW

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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RESPONSIBLE PERSON REGISTER

Week beginning: _____

DATE	TIME IN	RESPONSIBLE PERSON'S NAME	SIGNATURE	HAND OVER COMMENTS	TIME OUT	SIGNATURE

STAFFING ARRANGEMENTS POLICY



Our Vacation Care Service aims to provide educators and Nominated Supervisors who have the qualifications and experience to develop warm, nurturing, and respectful relationships with children. We are committed to ensuring that children's health, safety, and wellbeing is protected at all times through providing appropriate and effective supervision according to legislated ratios and best practice. Our educators, in collaboration with our Educational Leader, design and implement developmentally appropriate programs that support children's participation and engagement, interests and learning.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.1	Organisation of Educators	The organisation of Educators across the Service supports children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of Educators at the Service.
4.2	Professionalism	Management, Educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, Educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
4 (1)	Definitions
115	Premises designed to facilitate supervision

117A	Placing a person in day-to-day charge
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
120	Educators who are under 18 to be supervised
123	Educator to child ratios- centre-based services
136	First Aid qualifications
146	Nominated Supervisor
147	Staff Members
148	Educational Leader
149	Volunteers and Students
150	Responsible Person
151	Record of Educators working directly with children
173	Prescribed information to be displayed

RELATED POLICIES

Code of Conduct Policy Child Protection Policy Child Safe Environment Policy Grievance Policy Governance Policy Privacy and Confidentiality Policy	Professional Development Policy Recruitment Policy Safe Transportation Policy Responsible Person Policy Supervision Policy Student and Volunteer Policy
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PURPOSE

To ensure our Vacation Care Service adheres to the Education and Care Service National Regulation we employ educators and staff in compliance with any state specific qualifications and experience and adhere to regulated educator and child ratios.

SCOPE

This policy applies to Management, Approved Provider, Nominated Supervisor, Responsible Persons and educators of the Vacation Care Service.

IMPLEMENTATION

Our Service will comply with the required educators to child ratios and take into consideration any

qualification requirements and experience for educators at centre-based services in order to meet National Regulations and Standards.

Educational Leader

The Educational Leader has an influential role in inspiring, motivating, affirming, and challenging or extending the practice and pedagogy of educators. It is a joint endeavour involving inquiry and reflection, which can significantly impact on the important work educators do with children and families.

- The Approved Provider will nominate a qualified and experienced educator to take on the Educational Leader role and responsibilities
- The Educational Leader will keep a record about how they mentor and guide educators of the Service to ensure continuous improvement
- The Educational Leader will guide educators to provide a range of learning experiences that cater for the needs and interests of children through play and leisure opportunities
- The Educational Leader will maintain evidence about the development of the learning program and the alignment to the *My Time, Our Place* framework.

Nominated Supervisor

The Nominated Supervisor is a suitable person appointed by the Approved Provider who is placed in day-to-day charge of an approved Service. Nominated Supervisors have a range of responsibilities under the National Law and Regulations including programming, supervision and safety of children, entry to and exit from the premises, food and beverage, administration of medication, excursions and staffing.

The Approved Provider will display the name of the Nominated Supervisor in a place that is clearly visible to staff, educators, families and visitors.

The Approved Provider must provide sufficient evidence and information to demonstrate compliance to the Regulatory Authority of the suitability of this person as Nominated Supervisor and notify the Regulatory Authority at least seven days prior to the Nominated Supervisor or as soon as practicable (not more than 14 days).

- The Nominated Supervisor must be 18 years of older
- The Nominated Supervisor must have successfully completed Child Protection training
- The Nominated Supervisor is responsible for the day-to-day management of the Service, ensuring compliance with the National Law, Regulations, National Standards and Family Assistance Law.
- The Nominated Supervisor will accept the role in writing, to ensure they have a clear understanding about their role and responsibilities.

- The Nominated Supervisor will ensure the Service program is reflective of the approved learning framework, incorporate the children’s developmental needs, interests, and experiences, and consider the individual differences and needs of each child.
- The Nominated Supervisor will adhere to Service policies ensuring a safe and healthy environment is provided.

Responsible Person

A Responsible Person is required to be physically present at the Vacation Care Service at all times that children are being educated and cared for. The Responsible Person can be the Approved Provider, or a person with management or control placed in day-to-day charge of the Service. The Responsible Person must be at least 18 years old and have adequate knowledge and understanding of the provision of education and care to children.

- Our Vacation Care Service will ensure there is always a Nominated Supervisor or Responsible Person on the premises when children are being educated and cared for.
- Our Vacation Care Service will clearly communicate the Responsible Person on duty with families, educators, staff and visitors by displaying this information in the foyer or reception area.
- The Responsible Person will adhere to Service policies and procedures and maintain a safe and healthy environment for children.
- The Responsible Person will always act with professionalism when dealing with children, educators, visitors, families and volunteers.

Approved First Aid Qualifications

- The Approved Provider is required to ensure at least one staff member, or one Nominated Supervisor holds current qualifications for first aid, anaphylaxis management and emergency asthma management training.
- The Approved Provider must ensure at least one staff member, or one Nominated Supervisor be in attendance at any place children are being educated and cared for by the Service and be immediately available in an emergency and hold the mandatory qualifications for:
 - an ACECQA approved first aid qualification
 - anaphylaxis management and
 - emergency asthma management training.

(Approved qualifications are published on the ACECQA website)

- Services must have staff with current approved qualifications on duty at all times and be immediately available in an emergency.
- It is the Staff and educator's responsibility to ensure they maintain current First Aid, Asthma, and Anaphylaxis Training certificates and provide the Service with a copy of the certificate. Staff and educators must ensure they participate in training prior to the expiration date on their certificates

Working with Children Check

A Working With Children Check (WWCC) is a requirement for people who work or volunteer in child-related work. It involves a national criminal history check and a review of findings of workplace misconduct. The result of a WWCC is either a clearance to work with children for five years (NSW & Vic.), three years (WA, SA, QLD, TAS, & ACT), or two years (NT), or a bar against working with children. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked.

- To comply with National Regulations for those undertaking paid or voluntary child-related work all employees of the Vacation Care Service will acquire a Working with Children Check.
- Management will verify all Working With Children Checks to ensure the children are protected.
- Management will keep a record of the expiry date of the Working With Children Check for all staff.
- Management will ensure the Working With Children Checks are verified before Nominated Supervisors or Responsible Persons are engaged at the Service.
- Management will ensure any notifications or concerns regarding a persons Working With Children Check are recorded and steps taken immediately to ensure the person is not working directly with children in accordance with directions from the Office of the Children's Guardian (NSW).

Staff Record

- Approved Services must keep information about the Nominated Supervisor, Educational Leader, staff, volunteers, students, and the Responsible Person at the Service
- Details must include evidence of staff working directly with children, qualifications, training and valid Working with Children Check
- Details regarding staff PRODA registrations will be kept in each staff record, including RA number and evidence of fit and proper checks
- All staff, educators, students, volunteers, and visitors are required to sign in and out each day.

Adequate Supervision

Adequate supervision is a consideration for any part of the Vacation Care Service premises where children are educated and cared for and is part of every educator's Duty of Care. Supervision is an active practice to help protect children from harm or hazards. Educators are required to ensure children are in sight and/or hearing at all times, demonstrating that the best interest of children is being provided for.

- Our Service will comply with educator to child ratios outlined in National Legislation and National Quality Framework
- Educators will be required to adhere to the Service's *Supervision Policy* and maintain effective supervision
- Educators will balance supervision and children's growing need to privacy and autonomy
- Educators will adjust their level of supervision depending on the area of the Service and the skills, age, dynamics, and size of the group of children being supervised
- Educators will respond to individual needs and attend to children as necessary
- Children will be supervised whilst sleeping or resting
- Educators will communicate with other staff and educators about their supervision points, offer advice and support to ensure children's safety is of the highest priority at all times
- When supervising outdoors or when children are engaged in risky play, educators will position themselves to ensure high visibility and accessibility to these areas and experiences
- Adequate supervision will be provided when children are being transported. Consideration will be made depending on risk assessments, number, age and ability of children, visibility of children, each child's current activity. (see Safe Transportation Policy)
- Unless briefly discussing child or Service concerns, educators will not congregate together either inside or outside
- Educators will interact with children where pedagogically appropriate whilst supervising
- Supervising educators will give their complete attention to the children and not perform other duties or tasks.

Rosters

- Our Vacation Care Service will ensure the roster and routine provides adequate supervision of children at all times.

Volunteers and Students

At no time will volunteers and/or students be left alone with a child or group of children.

All Volunteers and Students will be inducted into the Vacation Care Service to ensure they adhere to the Service policies and procedures and Statement of Philosophy.

Privacy

- Educators will adhere to the Service's *Privacy and Confidentiality Policy* and Privacy Law in relation to children and their families, or matters relating to the Service and will at no time take part in inappropriate or unlawful conversations or discussions.
- The Nominated Supervisor will ensure that students and volunteers are made aware of the Services privacy and confidentiality policy and Privacy Law during their initial induction.
- All staff, educators, volunteers and students are provided with information about the ECA Code of Ethics.

Staff employed under 18 years of age

Our Vacation Care Service will ensure any staff member under 18 years of age does not work at the service alone and is adequately supervised at all times.

Staff Recruitment

- Our Vacation Care Service will ensure a rigorous recruitment process is followed to select the best staff possible based on skills, qualifications, experience and suitability for the position available. Each role will refer to the appropriate position description during recruitment and the probation period to ensure applicants are suitable for the role and position.
- All potential staff will participate in robust interviews and have reference checks completed before an offer of employment is presented. Reference checks will take into consideration the suitability of the applicant for the role, previous experience and their commitment to child safe practices.
- All potential staff are subject to Police Checks, maintenance of a valid Working With Children Card (WWCC) and appropriate qualification. Valid first aid, asthma and anaphylaxis management or food safety qualification may also be required.
- All new staff will undergo a probation period of three (3) months, during this time they will participate in an induction and orientation program and hold regular discussions regarding their performance with an appointed mentor.
- Staff induction includes; provision of the service's policies and procedures, code of conduct, Child Safe Standards, child protection, work, health and safety guidelines, behaviour guidance, service routines, human resource documentation, physical environment, communication with families

processes, Family Assistance Law, administration of Child Care Subsidy and introduction to senior staff members and/or mentor. [adjust for your service]

Educator to Child Ratios

Age	State	Educator to Child Ratio
Over Pre-School Age	NT, QLD, SA, TAS, VIC, NSW	1 :15
	ACT	1 :11
	WA	1 :13 Children (or 1:10 if kindergarten children are in attendance)

SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
- Department of the Officer of the Privacy Commissioner: www.privacy.gov.au
- Early Childhood Australia Code of Ethics. (2016).
- Education and Care Services National Law Act 2010. (Amended 2018).
- Education and Care Services National Regulations. (2011).
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2018)
- Guide to the National Quality Framework. (2018). (amended 2020).
- Office of the Children’s Guardian: <https://www.kidsguardian.nsw.gov.au/child-safe-organisations/working-with-children-check>
- Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DAT: JANUARY 2022
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ANTI-BIAS AND INCLUSION POLICY

Anti bias is the practice of inclusion and underpins our Vacation Care philosophy. It is the acceptance that all children are valued and respected. We believe in the statement of inclusion as advocated by Early Childhood Australia (ECA) that *'Inclusion means every child has access to, participates meaningfully in, and experiences positive outcomes from early childhood education and care programs.'* (2016).

Our Vacation Care Service believes that children have the right to be treated equally and our goal is to develop children's identity and self-esteem in a trusting and supportive environment. We embrace diversity in all its forms to help develop positive and accepting attitudes in children, and to help them gain a better understanding of their environment, community, country, and the world.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups
157	Access for parents

RELATED POLICIES

Additional Needs Policy Behaviour Guidance Policy Code of Conduct Policy Educational Program Policy Gender Equity Policy	Interaction with Children, Family and Staff Policy Orientation of New Families Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

We aim to provide an inclusive environment for all children, families and educators, acknowledging the uniqueness of every person regardless of their race, gender, sexuality, religion, culture, physical and mental abilities and socio-economic background. This policy ensures all children, families, and staff are welcomed and treated equitably and with respect.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Our *Anti-Bias and Inclusion policy* underpins the philosophy of our Vacation Care Service. The role of educators is to encourage children to share and learn about the individuality of each child and their family and their role in the Vacation Care Service. This policy aims to assist children to form positive social relationships, develop their identify and self-awareness and to learn to accept the diversity of members within and outside of the Vacation Care Service community.

“Educators who are culturally competent respect multiple cultural ways of knowing, seeing and living, celebrate the benefits of diversity and have an ability to understand and honour differences. This is evident in everyday practice when Educators demonstrate an ongoing commitment to developing their own cultural competence in a two-way process with families and communities” (My Time Our Place, p.15).

CREATING INCLUSION

Inclusion supports children’s rights, fosters diversity and overcomes bias and barriers that may exist preventing children to participate in experiences within our Vacation Care Service. We will ensure children are provided with access to activities and environments, meaningful participation to foster a sense of belonging and opportunities to experience positive learning outcomes.

CULTURAL OR NATIONAL ORIGIN AND RACIAL IDENTITY

Our Vacation Care Service values and promotes equity, respect and awareness of different cultures. We ensure a cultural inclusive curriculum that reflects the cultural, linguistic and religious diversity of our society.

The Nominated Supervisor and Educators will:

- access information and professional development/awareness about other cultural and racial identities, especially those relevant within the Vacation Care Service
- ensure our program design and deliver builds on community and cultural strengths
- develop strong partnerships with families and children to extend their individual and communities' cultural competence
- ensure children have opportunities to participate with a wide variety of resources from the daily life of a variety of families and cultures
- where possible, engage educators that reflect a variety of cultural, national origin, and racial identities.
- affirm and foster children's knowledge and pride in cultural identity
- foster children's curiosity, enjoyment and empathetic awareness of cultural differences and similarities
- provide children with tools to respond appropriately to bias- build on children's strengths, interests and individuality
- teach children to overcome any inappropriate responses triggered by cultural differences
- encourage children to ask about differences in physical characteristics
- enable children to feel pride, but not superiority, about their racial identity
- help children to become aware of our shared physical characteristics – what makes us all human
- encourage parent input into the program and to participate on a level that they feel comfortable with, sharing their culture, and, for example, their language
- collect information from each family on enrolment and incorporate it into the program to meet individual family needs in regard to ethnicity and home language.
- where possible use both the Educators and children's first language as appropriate within the Service environment

- respect all cultures by presenting photographs, pictures, play equipment, books, posters, music, dramatic play resources, and dolls that will encourage open discussion and exploration of a variety of cultures
- provide resources that include diversity and skin tone to foster respect and understanding for people of all backgrounds
- develop an understanding of the needs, strengths, and attitudes of each culture represented at the Service
- challenge inappropriate or stereotypical conversations or remarks by children.

DIVERSITY IN FAMILY COMPOSITION

The Nominated Supervisor and Educators will:

- create an environment that is welcoming to all families
- respect each family, and work in partnership to support the child's emergent identity as an individual, member of their family, our Service, and the community
- engage in simple discussions about families that focus on fact rather than values e.g. *"some children live with their mum or dad, some children live with their mum and dad, some with grandparents, and some with two mums or two dads"*.
- be encouraged to seek awareness and reflect on his/her own feelings, beliefs and background and evaluate the effect these may have on their attitudes and interactions with families.
- respect family lifestyle choices
- treat all families respectfully regardless of socioeconomic background
- discuss how members of the community can support one another and less fortunate people through the provision of resources, donations of goods or time etc.

ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES

The Nominated Supervisor and Educators will:

- show respect and a commitment to reconciliation
- reflect on the current level of cultural competence of our staff
- promote the inclusion of children's voices in all decisions that affect them

- build and strengthen our knowledge and understanding of Aboriginal and Torres Strait Islander cultures, histories and contributions
- attend professional development to support our understandings of Aboriginal and Torres Strait Islander cultures and perspectives where possible
- provide opportunities for professional reflection
- identify and challenge our own cultural assumptions, beliefs and commitments to cultural competency
- engage with local Aboriginal families and communities through Aboriginal Education Consultative Groups
- invite Elders and Traditional Owners to speak to children, staff and families about the histories and cultures of the local area
- develop an Acknowledgement of Country in collaboration with Elders, community members, children and families which will be displayed and given during special events and incorporated into the program on a regular basis
- develop awareness and meaningful understanding about Aboriginal and Torres Strait Islander people as part of the cultural heritage of all Australians
- encourage Aboriginal and Torres Strait Islander communities access children services
- show sensitivity and respect to Aboriginal and Torres Strait Islander languages by incorporating verbal and visual languages into the Service environment.

ABILITY

The Nominated Supervisor and Educators will:

- provide an inclusive educational environment in which all children can succeed
- promote acceptance, respect and appreciation for individual's varying abilities
- consult with all families and other professionals to enable full participation in the program for children with varying abilities.
- evaluate and adjust the environment to provide access and enable all children to develop autonomy, independence, competency, confidence and pride.
- provide children and parents with developmentally appropriate information about varying abilities to foster understandings that we are all similar and different

- empower children in their own learning to ensure that they gain a feeling of self-respect
- treat all children fairly and develop an understanding that everyone has something important to contribute
- find examples in books, movies and tv shows that reflect attitudes about diversity, ability and disability
- observe all children and with family consultation, provide an individualised program to extend each child's interests and abilities
- create an environment where all children can participate in activities and experiences.

PROMOTING INCLUSION AND DIVERSITY INTO THE CURRICULUM

The Nominated Supervisor and Educators will:

- promote positive influences, modelling appropriate communication, non-bias or gender specific language and attitudes
- develop appropriate expectations for each child based on their individual strengths, developmental needs, and interests
- assist Educators with the development of required skills and knowledge for working with all children and families.
- work with Inclusion Support Professionals to assist in the inclusion of children with additional needs (see *Additional Needs Policy*)
- explore the values and uniqueness of the diversity within the Vacation Care Service. These opportunities will form part of the curriculum.
- treat children with respect by answering their questions honestly
- adapt activities, interactions, communication, the environment, and documentation to ensure all children and families are actively included and supported to participate in the curriculum
- provide children with a range of resources, equipment and opportunities to enhance their awareness of diversity
- reflect on the curriculum ensuring inclusive practice and goals set for children are realistic and being met.
- involve families in the planning of learning opportunities reflective of their culture.

PROMOTING AND SUPPORTING CHILDREN'S HOME LANGUAGES

The Nominated Supervisor and Educators will:

- acknowledge that the use of children's home language underpins their sense of identity and conceptual development (EYLF)
- promote and support children's home languages in the Service
- present books that reflect different languages and children's first language
- create an environment which supports natural language learning and interaction
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SOURCE:

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Australian Children's Education & Care Quality Authority. (2014).

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REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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BEHAVIOUR GUIDANCE: BULLYING POLICY

Bullying can occur among children of any ages, sex or background. In most instances, children need adult assistance to deal with bullying. This includes adults taking responsibility to develop strategies for the prevention of bullying, and for dealing fairly and effectively with allegations of bullying.

My Time, Our Place identifies secure, respectful and reciprocal relationships with children as one of the principles that underpin practice. Within the out of hours school community many different relationships are negotiated with and between children, educators and families. The way in which these relationships are established and maintained, and the way in which they remain visible impacts on how the community functions as a whole. Relationships directly affect how children form their own identity, whether or not they feel safe and supported, and ultimately, their sense of belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES & COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups

RELATED POLICIES

Anti-Bias and Inclusion Policy Behaviour Guidance Policy Code of Conduct Interactions with Children, Family and Staff Policy	Privacy and Confidentiality Policy Termination of Enrolment Policy Respect for Children Policy
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PURPOSE

To create a safe and healthy environment for children where bullying behaviours are not tolerated. As reflected in our Service philosophy and The Framework ‘*My Time, Our Place*’, Educators will encourage positive relationships between children and their peers.

SCOPE

This policy applies to children, families, staff, and management of the Vacation Care Service.

IMPLEMENTATION

Our Vacation Care Service does not tolerate bullying of any kind.

The priority of our service is to ensure the safety of the child being bullied.

Although there may be underlying reasons causing a child to bully others, it is essential that the child being bullied receives the adult attention and support in the first instance. It is important that the needs of the child who bullies does not overshadow the needs of the child being bullied.

TYPES OF BULLYING

The most common types of bullying in the early childhood (K-3) setting are physical and verbal. Some children may also bully others by social isolation/exclusion.

Physical includes:

hitting, punching, kicking, pinching- directed at the same child/ren over an extended period of time.

Verbal includes:

calling children names, taunting them, making sexist/racist statements, making cruel statement about personal attributes, clothing etc.

Social isolation:

Excluding individual children or groups of children from play or social situations

SIGNS OF BULLYING

In many cases, bullying occurs without adults being aware of it. Bullying can include physical violence (hitting, shoving), teasing or name-calling, social exclusion, or intimidation. It often occurs over a period of time. Possible signs a child is being bullied might include:

- unexplained cuts, bruises, scratches
- changes in behaviour, such as becoming moody, teary, depressed
- bedwetting
- complaints of physical ailments such as headaches or stomach aches
- having few friends, or a breakdown in a previous friendship
- does not want to attend school/after school care/vacation care
- does not want to attend parties, visit other children

Children may also disclose to a trusted adult that they are being bullied.

EFFECTS OF BULLYING

Children who are bullied are more likely to be depressed, lonely, and anxious and have low self-esteem. They may frequently feel sick and avoid interactions with others.

PREVENTATIVE STRATEGIES

Bullying thrives where there is not enough supervision. If required, and where possible, Vacation Care Services should improve upon the staff:child ratios set by the National Standards and National Regulations. The program of activities should be designed to meet the needs and interests of all children in attendance to prevent periods of boredom.

Staff are to model appropriate behaviours towards other staff and children, including refraining from teasing, humiliating, or talking ‘behind another’s back’. This should also include using appropriate language when dealing with behaviour management issues and assisting children to use the same. Children should be encouraged to verbalise their emotions and to develop empathy and compassion.

TALKING ABOUT BULLYING

Educators play an important role in helping children understand and guide their own behaviour as they learn about positive and healthy relationships with others.

Behaviours in the early years (K-3) may be *precursors* to bullying rather than true bullying. This could include making faces, refusing to play together, telling lies or stories about another child, grabbing objects, pushing, pinching or shoving another child. Without intervention, these behaviours could turn into a pattern of bullying.

Educators can assist children recognise bullying behaviour and assist children in developing strategies to develop positive relationships and prevent bullying. Skills to develop to assist in preventing bullying include:

- o empathy- understanding and responding to the what others feel
- o problem solving- how to resolve problems constructively without using aggression
- o language- understanding what to say when the child is feeling targeted by another child- ‘stop it!’

Educators will teach social skills through role-plays, stories and games.

Educators will guide children to practice how to interact with others positively and respectfully when talking about bullying.

PROCEDURE WHEN A CHILD DISCLOSES ALLEGED BULLYING

- listen when a child attempts to tell you about behaviours that might indicate bullying
- learn as much as possible about the children involved and the tactics used
- summarise the problem they are discussing
- ensure the child knows that the educators at the service are there to help them

- provide support and empathy
- empathise with the child and reassure them that it is not their fault
- ask the child what they think could be done to help, what will make them feel safe
- tell the child what action you are planning to take, including that you will need to talk to the alleged bully
- notify all parents involved of the allegation of bullying (refer to Confidentiality Policy and Code of Conduct Policy)
- notify the Nominated Supervisor of the allegation
- try to talk with the alleged bully and any witnesses without allowing them the opportunity to discuss what they may say (bullies often do not act alone, and the responses of the bully and friends may therefore differ from the victim)
- remember that bullies can be 'nice' children from 'good' families.

Once the investigation is complete, advise the children, parents and Management of the outcome.

PROCEDURE WHEN STAFF SUSPECT POSSIBLE BULLYING

- pay closer attention to the suspected victim and their interactions with other children
- tell the child that you are concerned about them and consider asking some questions such as *“Do you have any special friends at Vacation Care?”*, *“Are there any kids at Vacation Care who you really don't like?”*
- consider talking with the parents of the child to determine if they have similar concerns.

STRATEGIES FOR DEALING WITH BULLYING

Discussing the behaviour with the child who is bullying others

- make it clear to the bully that this type of behaviour is not acceptable
- don't force a meeting between the bully and the victim. Forced apologies are not constructive
- encourage the child who is being bullied to report any further occurrences to the staff
- encourage and support the child who is being bullied to develop other friendships
- ask the child who is bullying for possible reasons for the bullying. Address any issues raised as appropriate

- discuss with the child who is bullying and their parents what the possible sanctions may be if the bullying continues.

SANCTIONS

Possible sanctions will be dependent on each individual case, but may include:

- a warning.
- temporary exclusion from the Vacation Care Service.
- permanent exclusion from the Vacation Care Service (Termination of Enrolment Policy)

RESOURCES

Bullying- NO WAY! www.bullyingnoway.gov.au

[Eyes on Bullying in Early Childhood](#)

Kids Help line <https://kidshelpline.com.au/kids>

Raising Children <https://raisingchildren.net.au/preschoolers/behaviour/bullying/bullying-signs>

Starting Blocks *Managing children’s challenging behaviour in child care- bullying*

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.

Early Childhood Australia- Dealing with bullying together: prevention and resolution. (2009).

[Education and Care Services National Regulations](#). (2011).

NSW Department of Education *Anti-bullying- Parents and carers tips- Fact Sheet* (2020).

Starting Blocks *Managing children’s challenging behaviour in child care- bullying*

[US Education Development Centre- Preventing Bullying in Early Childhood](#)

<http://preventingbullying.promoteprevent.org/preventing-bullying-in-early-childhood>

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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BEHAVIOUR GUIDANCE POLICY

The right for children to receive positive guidance in a supportive and respectful environment is promoted within the Education and Care Services National Regulations. Children learn to face a variety of challenges throughout their lives. Learning the difference between acceptable and unacceptable behaviour assists children to regulate their own behaviours in different social and emotional environments as well as when interacting with peers and adults.

MY TIME OUR PLACE: FRAMEWORK FOR SCHOOL AGE CARE IN AUSTRALIA

OUTCOME 1: Children have a strong sense of identity	
1.1	Children feel safe, secure, and supported.
1.2	Children develop their emerging autonomy, inter-dependence, resilience and sense of agency.
1.3	Children develop knowledgeable and confident self-identities.
1.4	Children learn to interact in relation to others with care, empathy and respect.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

5.2.2	Self-Regulation	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
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QUALITY AREA 6: PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups
168	Education and care service must have policies and procedures
174	Time to notify certain circumstances to Regulatory Authority
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Anti-Bias and Inclusion Policy	Medical Condition Policy
Educational Program Policy	Privacy and Confidentiality Policy
Family Communication Policy	Respect for Children Policy
Incident, Illness, Accident and Trauma Policy	Enrolment Policy
Interaction with Children, Family and Staff Policy	Supervision Policy

PURPOSE

We aim to create positive relationships with children making them feel safe, secure, and supported within our Vacation Care Service. We will ensure children are treated with respect, consistency, fairly and equitably as they are supported to develop the skills and knowledge required to behave in a socially and culturally acceptable manner.

Supporting children to develop socially acceptable behaviour is a primary goal for educators and families. This is embedded in fundamental documents including the My Time Our Place (MTOP), The Education and Care Services National Regulations, and the National Quality Standard (NQS).

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

DEFINITIONS

Behaviour guidance- this term is used to reflect current thinking about the most positive and effective ways to help children gain understanding and learn skills that will help them to manage their own behaviour.

Self-regulation- The ability to manage energy states, emotions, behaviour and attention: the ability to return to a balanced, calm and constant state of being. Self-regulation is a key factor for mental health, wellbeing and learning (KidsMatter, Early Childhood, 2014).

Inclusion- taking into account all children's social, cultural and linguistic diversity (including learning styles, abilities, disabilities, gender, family circumstance and geographic location) in curriculum decision-making processes. (EYLF).

IMPLEMENTATION

The behaviour and guidance strategies used by staff and Educators at our Vacation Care Service are designed to provide children the opportunity to expand their experiences of life in a productive, safe environment that allows individuals the right to safety, tolerance, self-expression, cultural identity, dignity and the worth of the individual.

Educators understand that as children grow and develop self-regulation becomes an important aspect of social and emotional development as they begin to understand how their actions affect others.

We believe in providing boundaries as part of a caring and trusting relationship with children and families to help them feel secure and self-confident. Children benefit from knowing that their environment is stable and that a competent adult is taking care of them.

There are three key aspects to promoting positive behaviour:

1. Creating a quality learning environment that is positive and supportive and provides developmentally appropriate experiences and resources.
2. Implementing guidance strategies for building skills and strengthening positive behaviour based on age-appropriate behaviour expectations.
3. Employing strategies for guiding children's behaviour resulting in decreasing undesired behaviours.

POSITIVE BEHAVIOUR GUIDANCE STRATEGIES:

Guiding children's behaviour is an important aspect of caring for and educating children. Positive strategies need to be developed to assist children to learn appropriate ways of behaving. Corporal punishment and unreasonable discipline are not permitted at any time in children's services, not only because the child may be physically harmed, but also because it nearly always has detrimental effects on the child's self-esteem and feelings of security.

All educators and staff at our Vacation Care Service will role model appropriate behaviour and language, encouraging children to socialise with other children, including children of different cultural backgrounds as well as from different age groups and different genders.

Behaviour guidance strategies implemented within our Vacation Care Service are appropriate to the child's age and developmental capacity. Children are encouraged to make decisions for themselves and are provided with opportunities for independence and self-regulation. Children are given the opportunity to make choices and experience the consequences of these choices when there is no risk of physical or emotional harm to the child or anyone else. They are acknowledged when they make positive choices in managing their behaviour.

Strategies may include using visual cues, prompting, redirection, re-teaching strategies, developing logical consequences and conferences with children. In the instance of adverse behaviour being persistently observed, educators will evaluate their program, room set up, supervision etc. to identify triggers and sources of inappropriate or challenging behaviour.

Regular routines and consistency in implementing behaviour guidance strategies are critical to support children's wellbeing and promote children's agency. All staff implement an active and positive approach to guiding children's behaviour within our service.

MANAGEMENT/NOMINATED SUPERVISOR/RESPONSIBLE PERSON WILL ENSURE:

- no child being educated and cared for by the Vacation Care Service is subjected to any form of corporal punishment or any discipline that is unreasonable in the circumstances
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- behaviour guidance does not involve making judgements about children or their families

- information is gathered from families about their children's social skills, relationship preferences, family and cultural values which will be recorded in the child's individual file
- educators will use this information to engage children in experiences that support children to develop their social and decision-making skills
- positive and respectful relationships with children are established and maintained
- children are empowered to use language and other forms of non-hurtful communication to communicate their emotions
- positive, empathetic relationships are promoted between children assisting them to develop respectful relationships
- the dignity and rights of each child are maintained at all times
- positive and inclusive strategies are implemented to enable educators to encourage positive behaviour in children in order to minimise adverse behaviour
- general information about behaviour guidance is provided to families such through parent interviews and newsletters
- a partnership is developed with other professionals or support agencies that work with children who have diagnosed behavioural or social difficulties to develop plans for the inclusion of these specific children. This information will be kept confidential and in the individual child's file.
- excessive or challenging behaviour is managed and communicated with families
- strategies are implemented to re-direct a child who may be causing or about to cause harm to himself or herself, another child, or adult. Incidents may include a child who is kicking, spitting, biting, throwing furniture or toys, punching or hitting, or being disruptive. Redirection may also include an incident where a child places him/herself in a dangerous situation, for example, climbing a fence or hiding in a potentially dangerous position. Safety is a priority, and this may mean using physical re-direction in which an Educator will actually remove the child from the harmful situation if required.
- families are notified and the incident/behaviour is addressed sensitively. In an instance where a child or children's safety has been jeopardised, parents are required to sign the *Behaviour Incident Report*.
- should the behaviour continue, the child's behaviour is observed and carefully documented. Additional information is collated related to the context and behaviour guidance strategies implemented. Where a similar incidence occurs three times, the child's parents and educators will meet to discuss the behaviour or concern as they assist in creating a Strategic Inclusion Plan (SIP) to support the child in the environment
- application for additional support for educators to build their capacity and capabilities to include children with additional needs will be made through the Inclusion Support Program.

- a Strategic Inclusion Plan (SIP) is developed and guided by local support agencies as required for individual children
- the SIP is reviewed on a periodic basis reflecting changes that have been applied through the implementation of the plan
- professional development is provided for educators to be informed, trained and supervised to implement the SIP created, ensuring that information is composed and recorded for reflection on its effectiveness for the individual child
- notification is made to the regulatory authority within the legislated time frames of any circumstance that poses a risk to the health, safety and wellbeing of a child or children, or of any complaint alleging that a serious incident has occurred at the service.

EDUCATORS WILL:

- encourage and support each child's social and emotional development, striving to develop children's self-regulation and an understanding of the feelings of others
- actively work with younger children to promote and role-model positive ways to interact with others
- teach behavioural expectations
- support appropriate behaviour- visual cues, prompting, positive verbal feedback and quality learning environments
- children are provided with positive guidance and encouragement toward acceptable behaviour
- promote children's initiative and agency
- actively work with all children to support them in constructing and conveying ways of expressing needs, resolving conflict, and responding to the behaviour of others
- at all times provide positive role-modelling in their dealings with children, other educators and families
- discuss guidelines, rules, limits, and what is fair with children, and use their contributions in setting limits and guidelines
- talk calmly with children about the consequence of their actions, and the reason for rules
- use corrective consequences- prompt, redirect, re-teach, provide choice, logical consequence, conference with child and educator
- guide children's behaviour, teaching them how to be considerate of others – to think about the effects of their actions on others. It is important that children understand what acceptable and unacceptable behaviour is and how to manage their emotions.

- provide positive feedback and focus on children’s strengths and achievements and build on their abilities
- take into consideration the child’s past experiences as their behaviour could be a result of past trauma such as changes in routine, changes or losses within the family, placement in care, or more serious circumstances involving abuse, neglect, or family violence
- be responsive to these former experiences, designing and implementing behaviour plans with the individual child that include strategies which will assist alternative and positive behaviour
- provide age appropriate, challenging, and interesting activities, experiences, and equipment for children to use and become engaged with
- ensure there are sufficient materials and equipment for individual, small and large group activities
- set up the environment (indoor and outdoor) for children to engage in activities and experiences in accordance with their abilities and interests
- adapt a positive approach, excluding cruel, harsh, humiliating or demeaning actions
- commit to professional development and keep up to date with industry information regarding behaviour guidance strategies
- support children to explore different identities and points of view and to communicate effectively when resolving disagreements with others
- participate in planned and spontaneous conversations with children about emotions, feelings and issues of inclusion and fairness, bias and prejudice, and the consequences of their actions, as well as the appropriate rules and the reasons for the rules
- provide children with the language and vocabulary needed to express their emotions and feelings and verbalise their concerns
- encourage children to listen to other people’s ideas, consider pro-social and altruistic behaviour and collaborate and negotiate in problem solving situations
- listen empathetically to children when they communicate their emotions, provide encouragement as they reassure the child it is normal to experience positive and negative emotions
- guide children to remove themselves from situations where they are experiencing frustration, anger, or fear
- support children to negotiate their rights and rights of others and mediate perceptively when children experience difficulty in resolving dissimilarity
- learn about children’s relationships with others and their relationship preferences they have and use this knowledge to encourage children to manage their own behaviour and expand on their empathy skills

- use positive language, gestures, facial expressions, and tone of voice when redirecting or discussing children's behaviour with them
- remain calm, respectful and tolerant as they encourage children who are strongly expressing distress, frustration or anger
- guide children's behaviour with a focus on preserving and promoting children's self-esteem as they learn to self-regulate their behaviour
- implement "*time with*" an adult, which will be used when all other strategies (above) have been exhausted. "Time with" allows educators to offer reassurance and support so the child can settle and regain self-control, develop some self-calming behaviours and gain composure. Once calm, educators can assist the child to identify what happened, reflect on their actions and consider how they may have done something differently.

FAMILIES WILL:

- provide consent for the Vacation Care Service to consult with their child's primary school and other professional agencies to assist with implementing an Strategic Inclusion Plan (ISP)
- work collaboratively with educators and professional agencies when required in order to develop a broader understanding of the child's developmental level and share any recent events which may be influencing the child's behaviour
- create consistency in behaviour guidance strategies used at the service and at home

CHILDREN WILL:

- know they are valued, respected and that they can have their opinions heard by a supportive adult
- be supported by providing acceptable alternative behaviours when challenging behaviour occurs
- learn to respect the rights and needs of others by anticipating the result and consequences of their behaviour appropriate to their age and to their developmental stage.
- be given positive guidance towards understanding the difference between acceptable behaviour and unacceptable behaviour looks, feels and sounds like in the early learning setting
- gradually develop an understanding of their actions and how their behaviour impacts on others
- be encouraged to use their words rather than actions to resolve conflicts
- build on strengthening their communication skills through:
 - greeting others when they arrive and depart from the Vacation Care Service
 - sharing resources

- assisting when it is time to pack away the indoor and outdoor environment
- using manners such as 'please' and 'thank-you'
- learn to wait for their turn for an appropriate period of time- this will depend on age and development level
- learn about the feelings of others throughout the program in order to assist children to understand the consequences of their actions.
- be encouraged to engage in cooperative and pro-social behaviour and express their feelings and responses to others' behaviour confidently and constructively, including challenging the behaviour of other children when it is disrespectful or unfair.

SOURCE:

Association of Children's Welfare Agencies: www.acwa.asn.au

Australian Children's Education & Care Quality Authority. (2014).

Australian Government Department of Education, Skills and Employment. *My Time, Our Place-Framework for School Age Care in Australia*. (2011).

Australian Government Department of Education, Skills and Employment. Inclusion Support Program Guidelines. <https://docs.education.gov.au/node/53374>

Australian Government Department of Education, Skills and Employment. Inclusion Support Program Guidelines. <https://www.education.gov.au/inclusion-support-program-isp>

Department of Education NSW Positive Behaviour for Learning (PBL) Early Childhood <https://pbl.schools.nsw.gov.au/resources/early-childhood.html>

Department of Education State Government of Victoria. *Strategies to guide children's behaviour* (reviewed 2015)

Early Childhood Australia's Blog (2018). *What every child needs for learning self regulation* KidsMatter Early Childhood.

Early Childhood Australia Code of Ethics. (2016).

Family & Community Services: www.community.nsw.gov.au

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard.(2020)

NAPCAN: www.napcan.org.au

Porter, L. (2016). *Young children's behaviour: Guidance approaches for early childhood educators*. Australia: Allen & Unwin.

Raising Children Network. (2019) *What is self-regulation?* <https://raisingchildren.net.au/toddlers/behaviour/understanding-behaviour/self-regulation>

Revised National Quality Standard. (2018).

State Government of Victoria. *Strategies to guide children's behaviour* (reviewed 2015)

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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GENDER EQUITY POLICY

In order to create an environment that supports, reflects and promotes gender equitable and inclusive behaviours and practices, it is crucial for our Vacation Care Service to examine our value and belief systems. We are committed to promoting confidence and self-esteem in all children and acknowledge the uniqueness and potential of each child.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups

LEGISLATION AND FRAMEWORKS

Australian Human Rights Commission (2013)
 Early Childhood Australia Code of Ethics 2006
 Early Years Learning Framework 2009
 Equal Opportunity Act 2010
 Privacy Act 1988
 Sex Discrimination Act 1984
 United Nations Convention on the Rights of the Child (1989)

RELATED POLICIES

Anti-Bias and Inclusion Policy Additional Needs Policy Code of Conduct Policy Educational Program Policy	Interaction with Children, Family and Staff Policy Orientation of New Families Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

To ensure children are treated with respect and equality, our Vacation Care Service affirms the right for all children to have access to and participation in, the same experiences and activities irrespective of gender. To ensure that positive attitudes towards gender equity are encouraged and supported within our Service and community. Children will be encouraged to develop a sense of pride and self-worth, as they develop respect for each other’s rights and responsibilities.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Educators who work with school aged children are in a unique position to influence their development and create environments that encourage equal and respectful relationships. Gender plays a significant role in the lives of children as it defines masculinity and femininity. These are socially constructed roles, behaviours, activities and attributes that society considers ‘appropriate’ for a person based on their sex. Breaking down gender stereotypes from a young age, helps stop the negative consequences of inequality and discrimination. Educators working with children need to observe the implication of gender in children’s choice of friends, activities, language, interactions, group dynamics and behaviour. These observations can lead to valuable insight into children’s understandings about gender and assist educators to promote challenges to gender stereotypes and embrace diversity.

The *Anti-Bias Approach in Early Childhood* suggests the following principles as a basis to challenge sexism and promote anti-bias behaviour:

- be prepared to challenge sexist attitudes and behaviours
- ensure that you protect the child or adult who has been treated unfairly

- explain what you think is unfair about their attitudes and behaviours and if appropriate, model anti-sexist attitudes and behaviours
- correct any incorrect and sexist assumptions a child has about gender
- plan a strategy for how to deal with a similar situation in the future.

Red Ruby Scarlet (Ed.). 2018

MANAGEMENT and NOMINATED SUPERVISOR WILL

- provide families with information about the importance of a gender equity approach in achieving positive outcomes for all children
- provide information about the Vacation Care Service's gender equity work
- ensure all staff have access to professional development activities
- engage staff in reflective practice about their own biases about gender
- foster an inclusive and gender equitable environment
- promote a positive understanding of gender equity
- ensure educators and staff are aware of the service's expectations regarding positive, respectful and appropriate behaviour when working with children and families
- ensure that any behaviour or circumstances that may constitute discrimination or prejudice are dealt with in an appropriate manner

NOMINATED SUPERVISOR, RESPONSIBLE PERSON AND EDUCATORS WILL

- be mindful and respectful of how activities and experiences provided may impact on the expectations, interests, and behaviours of all genders
- provide a stimulating learning environment in which boys and girls are equally encouraged to explore a full range of experiences and emotions
- encourage children to express emotions and display affection and empathy
- act as advocates of children in dealing with other adults who act in a bias manner against a child due to their gender
- discourage the identification of particular skills, behaviours, and/or feelings as 'boys' and 'girls'.
- encourage children to look upon both sexes as equal

- support the gender equity policy review by focusing on how children construct gender, and the effects of gender in curriculum, teaching and learning
- be responsive and ensure their actions are relevant to the specific and changing gender dynamics that emerge from the different ways in which different children interpret gender
- monitor language, attitudes, and assumptions with regard to gender and anti-bias of themselves, other educators, and children.
- give positive messages about gender equity through their actions and words and avoid giving messages that promote traditional gender roles and gender bias
- critically reflect on their practices and environment and model a positive attitude towards gender equality
- encourage and support all children to participate in the full range of experiences and activities
- regularly review resources, equipment, materials, and images used with children to make sure they include gender diversity, non-stereotypical images, and non-traditional family lifestyles such as single or same sex parents
- encourage children to explore their own gender identities and the impact of gender relations in their play
- regularly review the book collection to ensure a range of different stories and experiences are depicted beyond stereotypical narratives.

DEFINITIONS

sourced from Our Watch (2015) in *Creating Gender Equity in the Early Years: A Resource for Local Government*

Gender refers to the socially learnt roles, behaviours, activities and attributes that any given society considers appropriate for men and women. Gender defines masculinity and femininity. Gender equity is the process of being fair to women and men.

Gender equity acknowledges that women and men have different access to resources, power, responsibilities and life experiences and different strategies are often necessary to address disadvantages and achieve equal outcomes of women and men, boys and girls.

Gender equality is the outcome reached through gender equity. It is the equal valuing by the society of the similarities and differences between women and men, and the varying roles that they play.

Gender inequality is the unequal distribution of power, resources, opportunity, and value afforded to men and women in society due to prevailing gendered norms and structures. Gender roles are the functions and responsibilities expected to be fulfilled by women and men, girls and boys in a given society.

Gendered norms consist of a set of dominant beliefs and rules of conduct, which are determined by a society or social group in relation to the types of roles, interests, behaviours and contributions expected from boys and girls, men and women.

Sex refers to biological and physiological differences between females and males.

Stereotype refers to a widely held but fixed and oversimplified image or idea of a particular type of person or thing.

Sexism refers to gender discrimination. It is prejudice or discrimination based on a person's sex or gender.

Violence against women is defined as 'any act of gender based violence that causes or could cause physical, sexual or psychological harm or suffering to women, including threats of harm or coercion, in public or in private life' (Council of Australian Governments, 2011; United Nations General Assembly, 1993).

SOURCE:

Australian Human Rights Commission (2015) *Supporting young children's rights* Statement of Intent (2105-2018)

Australian Human Rights Commission and Early Childhood Australia (ECA)

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

Darebin City Council Creating Gender Equity in the Early Years: A resource for Local Government

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Standard.(2020)

Red Ruby Scarlet (Ed). (2001). *The anti-bias approach in early childhood* (3rd Ed.). Australia

Revised National Quality Standard. (2018).

Women’s Health East (2017). *No Limitations. Breaking down gender stereotypes in the early years. A resource guide for early years educators.* http://whe.org.au/wp-content/uploads/sites/3/2017/11/No-limitations-guide_FINAL.pdf

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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INTERACTIONS WITH CHILDREN, FAMILIES & STAFF POLICY

My Time, Our Place (MTO) identifies secure, respectful, and reciprocal relationships with children as one of the principles that underpin practice. Within an early childhood community many different relationships are negotiated with and between children, educators, and families. The way in which these relationships are established and maintained, and the way in which they remain visible impacts on how the early childhood community functions as a whole. Relationships directly affect how children form their own identity, whether or not they feel safe and supported, and ultimately, their sense of belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parents views are respected	The expertise, culture, values and beliefs of families are respected, and families share decision-making about their child's learning and wellbeing.

6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
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NATIONAL EDUCATION AND CARE REGULATIONS

155	Interactions with children
156	Relationships in groups
157	Access for parents

RELATED POLICIES

Arrival and Departure Policy Behaviour Guidance Policy Code of Conduct Policy Educational Program Policy Enrolment Policy Family Communication Policy Management Committee Policy Open Door Policy	Privacy and Confidentiality Policy Relief Staff Policy Respect for Children Policy Grievance Policy (Staff) Social Media Policy Student and Volunteer Policy Supervision Policy
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PURPOSE

We aim to build positive relationships with children, families, and educators through collaboration and interactions, which is reflective of our Vacation Care Service philosophy and the *My Time, Our Place Framework*. Educators will encourage positive relationships between children and their peers as well as with educators and families at the Service, ensuring children feel safe and supported.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Service.

IMPLEMENTATION

To build and maintain positive and respectful relationships with children, families, and Educators our Vacation Care Service will adhere to our philosophy and code of ethics to guide:

INTERACTIONS WITH CHILDREN

Children need positive relationships with Educators that are trusting and responsive to their individual needs. Through these experiences and interactions children will develop a positive understanding of themselves and feel a sense of belonging.

Management and Educators will:

- create a welcoming and relaxed atmosphere in which children experience equitable, friendly and genuine interactions with all educators
- role-model appropriate language and behaviour
- support children to be aware of their own feelings as well as the feelings of others
- encourage children to treat all other children with respect
- provide children with the opportunity to explore their dispositions for learning by expressing themselves and their opinions
- assist the children to build resilience and self-assurance through positive interactions
- guide children's behaviour positively
- respect the rights, dignity and agency of children
- support children within the Vacation Care learning environment
- speak to children in a positive manner at all times, promoting respect, tolerance and empathy, including the use of non-verbal cues and communication
- engage in meaningful, open interactions that support the acquisition of skills for life and learning of children
- respect each child's uniqueness, be attuned to, and respond sensitively and appropriately to children's efforts to communicate and use the child's own language, communication styles, and culture to enhance interactions
- listen to children and take them seriously; support and encourage children to use appropriate language in their interactions with adults and peers. Educators will extend upon children's interests and ideas through questions and discussions, supported and made visible in observations, reflections, and programming.

- communicate with children by getting down to their level, using eye contact, and showing respect to the child whilst engaging in and promoting effective communication
- show empathy to children
- ensure that the values, beliefs, and cultural practices of the child and family are considered and respected
- ensure that no child is ever isolated for any reason other than illness, accident or pre-arranged appointment with parental consent. During this time, they will be under adult supervision.
- regularly reflect on their relationships and interactions with children and how these can be improved to benefit each child
- facilitate children's individual development extending upon their strengths, interests and abilities

INTERACTIONS WITH FAMILIES

Effective communication is the key to developing and maintaining positive interactions and relationships with others and helps to build trusting and respectful partnerships with families. Educators use positive and open communication with families and siblings in order to create a responsive and inclusive environment for children, staff and families. Interactions with families help to inform educators' knowledge of each child's distinctive interests, skills cultures and abilities. This helps to build a positive experience and a safe learning environment that encourages children to expand their knowledge and understandings.

Management and Educators will ensure:

- all families are treated equitably without bias or judgement, recognising that each family is unique
- families are provided with information and resources in their first language
- families are asked to identify a preferred method of regular communication with the Service (this may include utilising a translator service)
- families and children are greeted upon arrival in a respectful manner
- they learn the names of family members and use these names when they greet them
- two-way communication is established through leading by example and asking questions and a willingness to offer information about ourselves

- common terminology (not jargon) is used when talking to parents regarding their child's development
- privacy and confidentiality are respected at all times
- information about another child or family information is never discussed with a parent or visitor
- they remain sensitive to cultural differences amongst families and encourage families to share cultural aspects with the children and educators at the service
- the advice and opinion from other professional experts is requested, with parental permission, to assist educators develop and implement strategies to support the inclusion of children with additional needs
- they seek additional resources and professional support for families through a range of organisations such as KU Inclusion Support, Area Health and other specific health professional networks when required
- verbal communication is always open, respectful and honest
- families are provided with up to date service information and notices through Daily Reports, newsletters, communal notice boards, emails and sign-in sheets.
- they regularly reflect on parent input into the program and make changes where necessary that will best benefit the service and children
- connections between families is promoted and enhanced through inviting families to participate in routines and events at the service.

INTERACTIONS WITH STAFF AND EDUCATORS

The Vacation Care Service recognises that the way educators interact with each other has an effect on the interactions they have with children and families. Educators working within our Vacation Care Service are required to demonstrate mutual respect towards each other and value the contributions made by each educator. This enables our Vacation Care Service to maintain positive relations and model the type of communication they want children to develop.

To maintain professionalism at all times, Educators will:

- engage in professional communication in order to create an effective work environment and to build a positive relationship with educators, children and families. Communication amongst colleagues

creates a positive atmosphere and a professional image for families. Communication between staff and families ensures that important information is being passed on consistently.

- collaborate together as a team sharing roles and responsibilities through regular communication or the use of a roster where necessary
- be respectful when listening to each other's point of view and ideas
- maintain effective communication to ensure that teamwork occurs
- use staff meetings to communicate their professional reflections and ideas for continuous improvement as a team
- attend professional development training to update and refresh and add to individual skills and knowledge
- refer to the *Staff Grievance Policy/Procedure* if they feel a situation with another educator is not being handled with professionalism, respect, and fairness
- recognise each other's strengths and value the contribution each person makes to different work roles
- work collaboratively to reach decisions which will enhance the quality of the education and care offered at the Vacation Care Service
- welcome diverse views and perspectives
- work together as a team and engage in open and honest communication at all times
- respect each other's positions and opinions
- develop and share networks and links with other agencies.
- resolve differences promptly and positively and use the experience to develop more effective methods of working together.

To maintain professionalism at all times, Management will:

- provide new educators with relevant information about the Vacation Care Service and program through an educator handbook, induction, and daily communication
- treat educators with respect
- be sensitive to the feelings and needs of educators
- provide constructive feedback to educators as part of their professional learning plan support
- value the role and contribution of each educator

- demonstrate commitment to ongoing collaboration and engagement to support staff wellness
- provide opportunities for all educators to have input into the program development and evaluation
- appreciate and utilise educator skills and interests
- provide support, assistance and mentoring to educators
- hold regular educator meetings to encourage and support professional growth and reflective practice
- use appropriate conflict resolution techniques to solve problems
- ensure policies and procedures are up to date regarding communication, expected behaviour and grievances
- provide opportunities for professional development.

To enhance communication and teamwork, Educators will:

- maintain privacy and confidentiality
- be respectful, caring and inclusive of all colleagues
- be sensitive to the feelings and needs of other team members
- support colleagues during difficult situations
- provide constructive feedback to each other
- trust each other
- value the role and contribution of colleagues
- appreciate and utilise colleague skills, strengths and interests regardless of qualification and experience
- provide support and assistance to each other
- share responsibilities
- have a flexible attitude towards team roles and responsibilities
- greet each other by name
- show genuine interest in the other person by using active and reflective listening
- communicate ideas and opinions clearly and professionally
- use a communication book or daily diary to pass on messages and record relevant information
- use appropriate conflict resolution techniques to solve problems
- engage in opportunities for professional development.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Child Australia *Cultural Connections Booklet*. (2017).
 Early Childhood Australia Code of Ethics. (2016).
 Australian Government Department of Education, Skills and Employment. *My Time, Our Place- Framework for School Age Care in Australia*. (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Standard.(2020)
Privacy and Personal Information Protection Act 1998 (Cth).
 Revised National Quality Standard. (2018).
 Victorian Early Years Learning and Development Framework (2011) Melbourne Graduate School of Education
Evidence Paper Practice Principle 5: Respectful relationships and responsive engagement
<https://www.education.vic.gov.au/Documents/childhood/providers/edcare/respectrelns.pdf>

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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RESPECT FOR CHILDREN POLICY

Within an Out of School Hours Care community, many different relationships are negotiated with and between children, educators and families. The way in which these relationships are established and maintained, and the way in which they remain visible, impacts on how the early childhood community functions. Relationships directly affect how children form their own identity, whether they feel safe and supported, and ultimately, their sense of belonging.

National Quality Standard (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
5.2.2	Self-Regulation	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups

RELATED POLICIES

<p>Additional Needs Policy Anti-Bias & Inclusion Policy Celebrations Policy Child Protection Policy Children’s Belongings Policy Clothing Policy Educational Program Policy</p>	<p>Family Communication Policy Gender Equity Policy Interactions with Children, Family and Staff Policy Medical Conditions Policy Photograph Policy Privacy and Confidentiality Policy</p>
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PURPOSE

My Time Our Place (MTO) highlights educators’ relationships with children as central to supporting their learning. Principle 1 in MTO is about secure, respectful and reciprocal relationships.

The Framework requires educators to respect and work with children’s unique qualities, abilities and interests, giving children choices and control as they experience the connects between actions and consequences.

Our philosophy guides our interactions and relationships with children. We aim to ensure all educators develop positive relationships with children based on respect and fostering children’s self-esteem and development.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

All children have a right to feel accepted and respected. This is a principle set out in the United Nations Convention on the Rights of the Child. The Convention emphasises the importance of children developing connections to culture and community as a means of fostering a strong sense of personal identity and belonging.

We aim for children to feel safe and secure and we believe in forming strong attachments and connections with educators, children and families at the Vacation Care Service. Educators employed at

the Service will use teaching techniques and strategies to establish positive relationships with children and their families, working in conjunction with the National Quality Standard as we build supportive relationships with children.

By teaching respect for cultural diversity, Educators will assist children to:

- provide a comfortable and happy environment
- respect each child's uniqueness, displaying appreciation and respect for children as individuals
- use a positive and non-threatening tone when interacting with children in all situations
- ensure mealtimes / snack times are relaxed and unhurried
- sit with children during mealtimes / snack times, engaging in respectful conversations
- never force a child to do something against their requests: This includes-rest, eat, participation in group experiences and activities.
- role model respect to children in everyday dealings with both adults and children
- endeavour to be aware of each individual child's values, culture and feelings, and respond appropriately
- encourage children to initiate conversations about their experiences at home encouraging them to express their ideas and feelings
- encourage children to request assistance when taking on new challenges, inspiring children's independence and confidence
- regularly reflect on their relationships and interactions with children and how these can be improved to benefit each child
- inspire, encourage and accept each child and encourage them to do the same with their peers by actively:
 - fostering each child's construction of a knowledgeable, confident self-identity.
 - fostering each child's comfortable, empathetic interactions with a diverse range of people.
 - fostering each child's critical thinking about bias, and to question and enquire.
 - fostering each child's ability to stand up for herself/himself and others in the face of bias.
- respond respectfully and appropriately to children's attempts as they participate and converse in sustained conversation about their interests
- implement a predictable routine for children with interest-based activities and experiences
- provide a range of planned and spontaneous experiences for children to challenge and maximise learning opportunities.

- use a variety of communication strategies inclusive of verbal and non-verbal cues to support the development of relationships with children
- support children’s home language when communicating and interacting to build trust and positive relationships
- respect children and families’ diversity and the development of cultural competency within the Vacation Care Service
- support children and build secure attachments through a collaborative partnership with families
- encourage children to develop confidence in their ability to express themselves
- encourage children to work through differences appropriately and with guidance where necessary
- respect each child’s uniqueness and communicate that respect to the child.

Source

Dau, E. (Ed.) (2016). *The multi-bias approach in early childhood* (2nd Ed.). Frenchs Forest, Australia: Pearson Education.

Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.

Education and Care National Regulations. (2011).

Kearns, K. (2017). *The Business of Childcare* (4th Ed.). Australia: Cengage learning Australia.

Revised National Quality Framework. (2017). (Amended 2020).

Stonehouse, A. (2012). Relationships with children:

UN General Assembly. (1989). Convention on the Rights of the Child. Simplified version available at

<https://www.unicef.org.au/Upload/UNICEF/Media/Our%20work/childfriendlycrc.pdf>

REVIEW:

POLICY REVIEWED: DECEMBER 2020	NEXT REVIEW DATE: DECEMBER 2021
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ENROLMENT POLICY

Out of School Hours Care (OSHC) Services provide high quality care for children before and after school, on pupil free days and during school holidays as Vacation Care programs. Enrolment and orientation can be both an exciting and an emotional time for children and families whether they attend only occasionally or on a regular basis. It is important to manage this time with sensitivity and support, building partnerships between families and the Out of School Hours Service. Such partnerships enable the Out of School Hours Care Service and families to work toward the common goal of promoting consistent quality outcomes for individual children and the Out of School Hours Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
88	Infectious diseases
90	Medical conditions policy

92	Medication record
93	Administration of medication
96	Self-administration of medication
97	Emergency and evacuation procedures
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursions
157	Access for parents
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
173	Prescribed information is to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider
178	Prescribed enrolment and other documents to be kept by family day care educator
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary’s Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	See all related legislation for Child Care Provider Handbook in Appendix 1 https://www.education.gov.au/child-care-provider-handbook-0

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Additional Needs Policy Arrival and Departure Policy Children's Belongings Policy Control of Infectious Disease Policy Family Communication Policy Immunisation Policy	Orientation of New Families Policy Payment of Fees Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Sun Safe Policy Withdrawal of a Child Policy
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PURPOSE

We aim to ensure children and families receive a positive and informative enrolment and orientation process that meets their individual needs. We strive to establish respectful and supportive relationships between families and the Vacation Care Service to promote positive outcomes for children whilst adhering to legislative requirements.

SCOPE

This policy applies to children, families, staff, management, coordinators and visitors of the Vacation Care Service.

ENROLMENT

According to the Child Care Provider Handbook (June 2019) *'enrolling children is a requirement under Family Assistance Law for all children who attend child care (or have an arrangement for care) regardless of their parent's or guardian's eligibility for Child Care Subsidy. An enrolment links the child, the individual claiming the subsidy and the child care service.'* An enrolment notice is required for each child attending the service. This reflects the type of arrangement that is in place between the provider and the family/individual or organisation.

IMPLEMENTATION

Our Service accepts enrolments of children who are formally enrolled in primary school. Enrolments will be accepted providing:

- a) the maximum daily attendance does not exceed the licensed capacity of the Vacation Care Service
- b) a vacancy is available for the booking required
- c) the adult to child ratio is maintained at the Vacation Care Service

The Vacation Care Service recognises the Educator as an agent for the Service in relation to the enrolment of children into the Service as permitted by National Education and Care Services Regulations and provides an efficient enrolment procedure that is clear and unambiguous to Out of School Hours Service educators and families.

PRIORITY OF ACCESS GUIDELINES

Our Service aims to assist families who are most in need and may prioritise filling vacancies with children who are:

- o at risk of serious abuse or neglect
- o a child of a sole parent who satisfies, or parents who both satisfy, the activity test through paid employment.

Providers are asked to (but are not legally obliged to prioritise children). CCS Handbook p.51

ENROLMENT

When a family has indicated their interest in enrolling their child, we will organise an enrolment meeting/discussion to share information and build relationships.

- Families will be provided with a range of information about our Vacation Care Service which will include:
 - o collection/drop off procedures -ensuring children are signed in and out of the service
 - o the service philosophy, inclusion, programming methods, incursions, excursions, inclusion, fees, policies, procedures, SunSmart requirements, regulations and the licensing and assessment process for our State the National Quality Framework, Vacation Care routines, educator qualifications, introduction to the service and learning environment and parent communication strategies.
- Families are invited to ask questions and seek any further information they require
- Families will be provided with vacancies, a start date and a suitable time for the child to be orientated to the Service

- Families will need to complete the enrolment form informing management of their child's interests, strengths and individual needs
- Any matters that are of a sensitive nature, such as discussing a child's medical needs, Court Orders, parenting plans or parenting orders, will be discussed privately with management. Families will be required to bring any documents required in relation to court orders, medical needs or plans
- Families will complete the enrolment form informing management of their child's interests, strengths and individual needs
- If a family or child uses English as a second language or speak another language at home, we request that families provide us with some key words in the language/s the child speaks so that educators can learn these words.
- Information about fees will be discussed.
- It is a legal requirement that prior to the child starting at the Service we have all required documents including
 - the completed enrolment form
 - medical management plans (if relevant) completed by the child's general practitioner
 - birth certificate or passport
 - a current Immunisation History Statement from the Australian Immunisation Register (AIR)
 - details of any court orders, parenting orders or parenting plans
- It is the family's responsibility to keep the Service informed of any changes to the information recorded on the application form.

FAMILIES WILL BE ASKED TO PROVIDE THE FOLLOWING INFORMATION:

1. Full name/s of parent/s (or the person legally responsible for the care of the child) residential address, place of employment and contact telephone number
2. The full name, residential address, and contact telephone number of a person or persons authorised by the parent who may be contacted in case of an emergency concerning the child if a parent is unable to be contacted. (authorised nominee)
3. The full name, residential address and contact telephone number of any person authorised by the parent to collect the child from the Service. (authorised nominee)
4. Full name of the child
5. Child's date of birth

6. Child's birth certificate or passport
7. Child's residency status
8. The child's address
9. Gender of the child
10. Cultural background of the child
11. Any court orders or parenting agreements regarding the child
12. The primary language spoken by the child; if the child has not learnt to speak, the child's family's language
13. Any special requirements of the family, including for example cultural or religious requirements.
14. The needs of a child with a disability or with other additional needs
15. A statement indicating parental permission for any medications to be administered to the child whilst at the Service. [Only a parent on the enrolment form can authorise the administration of medication.]
16. Authorisation and signature by parent/authorised person for the approved provider, nominated supervisor or educator to seek:
 - o medical treatment for the child from a registered practitioner, hospital or ambulance service
 - o transportation of the child by an ambulance service
17. Child's Medicare number
18. Specific healthcare needs of the child, including allergies and intolerances
19. Any medical management plan for a specific severe healthcare need, medical condition, or allergy, such as an Anaphylaxis Emergency Management Plan or Risk Minimisation Plan.
20. The name, address and telephone number of the child's doctor
21. Authorisation for regular occurring transportation and regular outings/excursions
22. Immunisation status of the child (Immunisation History Statement)

Although Out of School Hours Care services are regulated under the Education and Care Services National Law Act, children attending Out of School Hours Care are exempt from the immunisation/enrolment requirements that apply to other early childhood education and care services (long day care, family day care & preschools). The *immunisation status* of the child is however required to be kept in the enrolment record for each child enrolled at the education and care service- Regulation 162 Education and Care Services National Regulations.

ORIENTATION OF THE SERVICE

During the orientation of the Vacation Care Service, families will:

- be provided with the enrolment form to be completed or shown how to complete this through an online platform
- be informed where the Service policies can be found, which will include key policies such as: Payment of Fees, Sun Safe, Incident, Injury, Trauma and Illness, Control of Infectious diseases, Sick Child Policy and Administration of Medication
- shown the signing in/out process
- advised of appropriate SunSafe clothing for children to wear, including shoes
- informed about policies regarding children bringing in toys from home
- introduced to their child's educators
- taken on a tour around the Service and environment if required
- asked to share information on any medical management plan or specific healthcare needs of their child (if applicable)
- introduced to the routines and Service program, including the observations to aid programming
- informed about Service communication strategies including meetings, interviews, newsletters, emails, etc.
- given the opportunity to set goals for their child
- confirm preferred method of communication.

ENROLMENT PACK

Families will have access to or be provided with an enrolment pack which consists of:

- Family Handbook, which outlines the Service's operation and philosophy
- current fee structure and payment details
- information on the National Quality Framework and *My Time Our Place* learning framework
- ECA Code of Ethics brochure
- Lunchbox and Snack ideas

THE APPROVED PROVIDER WILL ENSURE:

- the enrolment form is completed accurately and, in its entirety
- authorisations are signed by the child's parents/guardians
- a child with medical needs does not begin at the service unless a medical management plan is received and medication is brought to the service each day
- the child's Medical Management Plan is recorded, and this information is shared/distributed to Educators
- Action Plans are completed in full (if relevant)
- Administration of Medication forms are completed (if relevant)
- Risk Minimisation Plans and Communication Plans are requested/completed with parents for children with medical needs
- Educators are informed of the new child including any medical conditions, interests, developmental needs, and strengths
- Immunisation certificate and birth certificate has been sighted and photocopied
- families are provided with an orientation survey to complete within the first 6 weeks of starting to gain feedback about the orientation and enrolment process

ENROLMENT RECORD KEEPING

Our *Record Keeping Policy* outlines the information and authorisations that we will include in all child enrolment records.

ON THE CHILD'S FIRST DAY

Consideration will be made to each family regarding the initial settling in period and strategies may be offered to assist in this transition- for example, organising a buddy in the same class to remind the child to attend Vacation Care on that particular day.

- The child and their family will be welcomed to the Service upon drop off
- They will be greeted by one of the educators who will show them where to sign in and out, discuss what is happening within the Service, and show where children can store their personal belongings whilst attending Vacation Care.
- Information about collecting their child at the end of the day will be discussed

- Management will ensure the orientation checklist has been completed and all required documents and information has been received from families.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Government Department of Education, Skills and Employment. (2019) Child Care Provider handbook <https://www.education.gov.au/child-care-provider-handbook-0>
 Australian Government Department of Education, Skills and Employment. (2019) Guide to Additional Child Care Subsidy (child wellbeing) https://docs.education.gov.au/system/files/doc/other/2019-11-28 - accs_guide_0.pdf
 Australian Government Services Australia <https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register/how-get-immunisation-history-statement>
 Department of Human Services (Centrelink): <https://www.humanservices.gov.au/individuals/services/centrelink/child-care-subsidy>
 Education and Care Services National Law Act 2010. (Amended 2018). [Education and Care Services National Regulations](#). (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2020).
 NSW Government Health. (2019). Questions and answers about vaccination requirements for child care: https://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx
 Revised National Quality Standard. (2018).
 Victoria State Government. Requirements for all early childhood services. <https://www.education.vic.gov.au/childhood/providers/regulation/Pages/reqallservices.aspx>

REVIEW:

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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GRIEVANCE POLICY (Families)

Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Childcare Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our Service's procedures for receiving and managing informal and formal complaints. Parents can lodge a grievance with management in the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service
7.2.1	Continuous Improvement	There is an effective self-assessment and quality improvement process in place.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

168	Education and care service must have policies and procedure
173	Prescribed information to be displayed
176	Time to notify certain information to Regulatory Authority

183	Storage of records and other documents
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RELATED POLICIES

Child Protection Policy	Payment of Fees Policy
Code of Conduct Policy	Privacy and Confidentiality Policy
Family Communication Policy	Record Keeping and Retention Policy
Grievance Policy (General)	Respect for Children Policy
Grievance Policy (Staff)	Responsible Person Policy
Interactions with Children, Family and Staff Policy	Student and Volunteer Workers Policy

PURPOSE

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We will ensure that all persons making a complaint are guided by the following policy values:

- Procedural fairness and natural justice
- Code of ethics and conduct
- Culture free from discrimination and harassment
- Transparent policies and procedures
- Opportunities for further investigation
- Adhering to our Service philosophy

Our Vacation Care Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Grievances can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. The Grievance Policy ensures that all persons are presented with procedures that:

- Value the opportunity to be heard
- Promote conflict resolution
- Encourage the development of harmonious partnerships
- Ensure that conflicts and grievances are mediated fairly
- Are transparent and equitable.

DEFINITIONS

Complaint: An issue of a negligible nature that can be resolved within 24 hours and does not require a comprehensive investigation. Complaints include a manifestation of discontentment, such as poor service, and any verbal or written complaint directly related to the Service (including general and notifiable complaints). Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless associated with the safety of children).

Grievances Management Forms/File: Records information about complaints and grievances received at the Service, along with the outcomes. These documents must be securely stored, accessible only to educators and Regulatory Authority. They can provide valuable information to the Approved Provider and Nominated Supervisor of the Service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. For example: If the service is in breach of a regulation causing injury or possible harm to a child.

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Regulation and Law, National Quality Standard or alleges that the health, safety or wellbeing of a child at the Service may have been compromised. Any complaint of this nature must be reported by the Approved Provider or Nominated Supervisor to the Department of Early Childhood Education and Care within 24 hours of the complaint being made – (Section 174[2] [b], Regulation 176[2][b]).

If the Director is unsure whether the matter is a notifiable complaint, it is good practice to contact the Regulatory Authority for confirmation. Written reports must include:

- Details of the event or incident
- The name of the person who initially made the complaint
- If appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
 - Contact details of a nominated member of the Grievances Subcommittee (or Nominated Supervisor)
- Any other relevant information

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious Incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the Service in contravention of the Regulations or is mistakenly locked in/out of the Service premises (Regulation 12).

A serious incident should be documented in an Incident, Injury, Trauma and Illness Record as soon as

possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the Service (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183.

PRIVACY AND CONFIDENTIALITY

- Management and Educators will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances. However, if a grievance involves a staff member or child protection issues, a government agency may need to be informed. (see: Reportable Conduct Scheme in our Child Protection Policy).

CONFLICT OF INTEREST

It is important for the complainant to feel confident in:

- being heard fairly
- an unbiased decision-making process

Should a conflict of interest arise during a grievance or complaint that involves the Approved Provider or Nominated Supervisor, other Management will be nominated as an alternative mediator.

Our Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is adhered to.

Management/Nominated Supervisor will:

- ensure the name and telephone number of the person to whom complaints can be made is clearly visible at the service
- ensure information about our *Grievance Policy* is easily accessible to all families
- treat all grievances seriously and as a priority
- ensure grievances remain confidential
- ensure grievances reflect procedural fairness and natural justice
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- investigate and document the grievance fairly and impartially. The investigation will consist of:

- Reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent.
- Discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond.
- Permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity).
- Providing the employee with a clear written statement outlining the outcome of the investigation.
- Advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - Management will provide a written response outlining the outcome and provide a copy to all parties involved.
 - If a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflect the resolution.
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant.
- keep appropriate records of the investigation and outcome and store these records in accordance with our Privacy and Confidentiality Policy and Record Keeping and Retention Policy.
- monitor ongoing behaviour and provide support as required.
- ensure the parties are protected from victimisation and bullying.
- request feedback on the grievance process using a feedback form.
- track complaints to identify recurring issues within the Service.
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised.

Educators will:

- listen to the family's view of what has happened
- clarify and confirm the grievance, documenting all the facts prior to the investigation
- encourage and support the family to seek a balanced understanding of the issue
- discuss possible resolutions available to the family. These would include external support options.

- encourage and assist the family to determine a preferred way of solving the issue
- record the meeting, confirming the details with the family at the end of the meeting
- maintain confidentiality at all times
- refer families (as necessary) to Service policies that may assist in resolving the grievance.

If the grievance cannot be resolved, it is to be referred to the Nominated Supervisor who will investigate further:

- if appropriate, collect relevant written evidence. This evidence will be treated in strict confidence and will be held in a secure place
- involve the Approved Provider or Licensee in the conflict resolution as required
- should it be necessary to interview relevant people concerning the grievance, their involvement should be kept to the minimum necessary to establish the facts
- third parties providing evidence must also be made aware that the matter is to be kept confidential.

Should the grievance be lodged against another person(s), these person(s) will be interviewed separately and impartially. Individuals must be given the opportunity to respond fully to the allegations and may have another person present, as a support person, if they wish. If after investigation, it is concluded that the grievance is substantiated:

- both parties will be told of the decision and the reason for it.
- immediate and appropriate steps will be taken to prevent the grievance from recurring.
- if after investigation, it is concluded that the grievance is not substantiated both parties will be notified of the decision and the reason.
- the family will be informed that if they are not satisfied with any decision relating to the grievance procedure that they should consult with an external body for further advice such as the Regulatory Authority.
- If the grievance is of a serious nature, the Nominated Supervisor is responsible to inform the Regulatory Authority.

Families will:

- be informed of our duty of care to ensure that all persons are provided with a high level of equity and fairness in relation to the management of grievances. The grievance procedure for families ensures a

fair opportunity for all stakeholders to be heard and promotes effective conflict resolution within our Service

- attempt to discuss their grievances with the relevant Educator associated with a particular child and/or family as the first step to resolving the issue
- communicate (preferably in writing) any concerns they may have.
- raise any unresolved concerns with the Approved Provider or Nominated Supervisor
- maintain confidentiality at all times

Evaluation:

To ensure complaints and grievances are handled appropriately, the Nominated Supervisor will:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Register* to assess that a satisfactory resolution that has been achieved.
- review complaints and grievances as recorded in the *Complaints and Grievance Register* to ensure a pattern of similar grievances is not occurring
- review the effectiveness of the Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally
- consider feedback from Staff, Educators and Families regarding the policy and procedure

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Commonwealth Ombudsman. (2009). Better practice guide to complaint handling:

https://www.ombudsman.gov.au/_data/assets/pdf_file/0020/35615/Better-practice-guide-to-complaint-handling.pdf

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Fair Work Australia: <https://www.fairwork.gov.au/>

National Quality Standard. (2017).

REVIEW:

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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GRIEVANCE POLICY (General)

Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Vacation Care Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our Service's procedures for receiving and managing informal and formal complaints. Parents, Educators, Visitors, Students and the community can lodge a grievance, with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service
7.2.1	Continuous Improvement	There is an effective self-assessment and quality improvement process in place.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

168	Education and care service must have policies and procedure
173	Prescribed information to be displayed
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Code of Conduct Policy	Privacy and Confidentiality Policy
Family Communication Policy	Record Keeping and Retention Policy
Grievance Policy (Families)	Respect for Children Policy
Grievance Policy (Staff)	Responsible Person Policy
Interactions with Children, Family and Staff Policy	Student and Volunteer Workers Policy

PURPOSE

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We will ensure that all persons making a complaint are guided by the following policy values:

- Procedural fairness and natural justice
- Code of ethics and conduct
- Culture free from discrimination and harassment
- Transparent policies and procedures
- Opportunities for further investigation
- Adhering to our Vacation Care Service philosophy

PROCEDURAL FAIRNESS AND NATURAL JUSTICE

Our Vacation Care Service believes in procedural fairness and natural justice that govern the strategies and practices which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Grievances can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious, and productive work environment. The Grievance Policy ensures that all persons are presented with procedures that:

- Value the opportunity to be heard
- Promote conflict resolution
- Encourage the development of harmonious partnerships
- Ensure that conflicts and grievances are mediated fairly
- Are transparent and equitable.

DEFINITIONS

Complaint: An issue of a negligible nature that can be resolved within 24 hours and does not require a comprehensive investigation. Complaints include a manifestation of discontentment, such as poor service, and any verbal or written complaint directly related to the Vacation Care Service (including general and notifiable complaints). Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless associated with the safety of children).

Complaints and Grievances Register: Records information about complaints and grievances received at the Service, along with the outcomes. This register must be kept in a secure file, accessible only to educators and Department of Early Childhood Education and Care. The register can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. For example: If the service is in breach of a regulation causing injury or possible harm to a child.

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Regulation and Law, National Quality Standard or alleges that the health, safety, or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider or Nominated Supervisor to the Department of Early Childhood Education and Care within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Approved Provider/Nominated Supervisor is unsure whether the matter is a notifiable complaint, it is good practice to contact The Department of Early Childhood Education and Care for confirmation.

Written reports must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee (or Nominated Supervisor)
- any other relevant information

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious incident: An incident resulting in the death of a child, or an injury, trauma, or illness for which the attention of a registered medical practitioner, emergency services, or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the centre in contravention of the Regulations, or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory

Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183.

Privacy and Confidentiality

- Management and Educators will adhere to our Privacy and Confidentiality Policy when dealing with grievances. However, if a grievance involves a staff member or child protection issues, a government agency may need to be informed. (see: Reportable Conduct Scheme in *Child Protection Policy*)

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process.

Should a conflict of interest arise during a grievance or complaints that involves the Approved Provider or Nominated Supervisor, other Management will be nominated as an alternative mediator.

Our Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is be adhered to.

The Approved Provider/Nominated Supervisor will:

- ensure the name and telephone number of the person to whom complaints can be made is clearly visible at the service
- ensure information about our Grievance Policy is easily accessible to all families, visitors and volunteers
- treat all grievances seriously and as a priority
- ensure grievances remain confidential
- ensure grievances reflect procedural fairness and natural justice
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint.
- investigate and document the grievance fairly and impartially

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer, or visitor an opportunity to respond
- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity)
- providing the employee with a clear written statement outlining the outcome of the investigation.
- Advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - Management will provide a written response outlining the outcome and provide a copy to all parties involved.
 - If a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflects the resolution and sign in agreeance.
- Should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant.
- Keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*.
- Monitor ongoing behaviour and provide support as required.
- Ensure the parties are protected from victimisation and bullying.
- Request feedback on the grievance process using a feedback form.
- Track complaints to identify recurring issues within the Service.
- Notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Education and Care Services National Regulation. (2011).

National Quality Standard. (2017).

Revised National Quality Standard. (2018).

REVIEW:

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OPEN DOOR POLICY

We value and pride ourselves on our partnership with families. We believe families are children's first teachers and therefore we embrace parent, guardian and family involvement within our Vacation Care Service. Participation by parents, guardians and other family members conveys a positive impression to children and allows them to feel supported and promotes a sense of belonging. Children feel supported and a sense of belonging and well-being is promoted.

We believe in offering an open-door policy welcoming family to visit the Service when it is convenient for them.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

RELATED POLICIES

Enrolment Policy	Orientation Policy
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PURPOSE

To ensure the best care for children and families, we believe it is important to provide families with the opportunity to visit our facilities and participate in our program at a time that is convenient for them. We acknowledge that families provide a wealth of valuable information and understanding about their child and we foster strong, respectful partnerships between our staff and educators and families. We encourage families to join in on our learning activities and celebrate events and special days with us.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

We operate with an open-door policy, where families are welcome to visit our Service anytime during operating hours. There are many opportunities for family involvement, and we communicate these through regular newsletters and our communication board. We recognise that time is valuable to all families, which is why we accommodate many forms of participation and contribution.

“Children thrive when families, educators, schools and the wider community work together in partnership to support children’s wellbeing and learning.”

(My Time, Our Place Framework for School Age Care In Australia, 2011).

MANAGEMENT AND EDUCATORS WILL ENSURE:

- families are always welcome to spend time in the Vacation Care Service and share special moments with their children
- families are aware of our open-door policy and are welcome to join in learning activities and celebrate events and special days held at the Service.
- families are provided with information about special days and events they may want to participate in.

For example:

- Disco
- Easter Hat Parade

- Mother's Day
- Father's Day
- Open Day
- Grandparents Day
- Christmas Celebrations
- Excursions/Incursions
- Cultural visits
- Book Week/ Story Time
- Cooking Experiences
- Parent lead learning experiences
- a variety of activities within the Service are organised at different times of day and week to include as many parents as possible.

FAMILIES CAN:

- visit the service at all times the Vacation Crae Service is educating and caring for children. This may include visiting their child who is already enrolled, or as an enquiry prior to enrolment
- participate in our program by sharing their skills with the children. This may include playing an instrument, telling a story, sharing cultural traditions, cooking experiences, workshops etc.
- make an appointment with management to discuss their child. This may include discussing the child's evaluations, raise concerns, setting new goals, providing feedback to the service.
- donate recyclable material that can be used within our Vacation Care program
- discuss any changes that have occurred in the child's life, for example, changes in family circumstances, moving to a new house, death of a family member or friend etc., in order for educators to best support all children through difficult times
- attend any events and celebrations that are organised throughout the year at our vacation Care Service
- share feedback, ideas and thoughts about the Service including policies and procedures
- remain informed about what is happening within the Vacation Care Service through discussions, newsletters, social media etc.

SOURCE

Australia Children’s Education & Care Quality Authority. (2014).
Australian Government Department of Education, Skills and Employment. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
Guide to the National Quality Framework. (2017). (Amended 2020).
Revised National Quality Standard. (2018).

REVIEW:

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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CURRICULUM, PEDAGOGY & EDUCATION TRAINING POLICY

The contribution of professional development to developing practice can be a source of deep professional satisfaction, for both individual practitioners and Out of School Hours Care Services collectively. Through developing our capacity to link theory to practice, we deepen our understanding of the value and significance of our work. In turn, this sustains our commitment and enthusiasm and capacity to keep growing professionally and personally.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

84	Awareness of child protection law
118	Educational Leader
126	Centre-Based services- general educator qualifications
136	First Aid qualifications
168	Education and care service must have policies and procedures.

RELATED POLICIES

Code of Conduct Policy In-Service and Staff Development Policy	Work Health and Safety Policy
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PURPOSE

It is vital for staff and educators to be involved in professional growth in the early childhood sector to allow greater efficiency in the operation of our Vacation Care Service.

We aim to implement a process for providing effective professional development opportunities based on employees' strengths, interests, and goals.

SCOPE

This policy applies to staff and management of the Vacation Care Service.

IMPLEMENTATION

Working with young children and families is complex and challenging work. Current research in the field of brain science, the developments in theoretical perspectives and approaches to early childhood education and school age primary education, are rapidly expanding the knowledge and theory base that we draw on to guide our practice.

Whilst the amount of change and growth in the early childhood sector presents us with great opportunities for increasing the quality of our Vacation Care Service, adapting to and working positively

with change and trying to keep up to date with theory and research is indeed a challenge. Professional development, when planned and implemented effectively, is a key tool that can be used to support us.

We employ compassionate, dedicated and proficient educators who bring a high skill level, appropriate qualifications and varying amounts of experience to support implementation of our curriculum and philosophy. To maintain our commitment to quality education and care, we will implement a performance appraisal procedure.

Professional Development will be provided on a justifiable foundation to all educators and staff and may include:

- mentoring by appropriate educators/staff.
- in-house workshops run by an external agency or trainer (training organization must through an approved RTO)
- external workshops, seminars and conferences
- online training through e-modules and webinars
- formal TAFE, college or University courses
- on-the-job training (e.g. through changes in role or through exchange of information between educators/staff)
- educator and management exchanges between Vacation Care Services
- provision of appropriate resources (books, movies, documentaries etc.),

MANAGEMENT/NOMINATED SUPERVISOR WILL:

- encourage professional growth for all staff to improve the learning outcomes for children
- implement best practice to ensure all staff develop their own professional learning plan
- support Educators to further their professional growth
- link professional development to areas identified in the Quality Improvement Plan
- facilitate reflective practice as a form of ongoing professional learning for all staff
- encourage all staff, educators and management to attend a minimum of 2 in-service training events each year
- ensure, as a minimum, that all staff update their Child Protection training every 12-18 months, or as legislative changes are made as a minimum to ensure knowledge is current
- support Educators to undertake WHS training as a part of their in-service training

- ensure funds are set aside for training and development needs in the annual budget
- support Educators in furthering their professional skills and knowledge by paying for required training requested by management

EDUCATORS WILL:

- develop a professional learning plan identifying their needs and areas for development
- attend a minimum of 2 in-services events each year
- undertake ACECQA approved First Aid qualifications every three years and supply the Service with current certificates
- ensure ACECQA approved Asthma and Anaphylaxis management training is kept up to date every 3 years
- ensure CPR refresher training is completed annually
- attend any required training set by management to enhance Educator's skills and knowledge
- present their newly acquired skills and knowledge during team meetings to share information gained with their colleagues
- monitor and document their own record of Pedagogy reflection showing their commitment to reflective practice and ongoing professional development, embracing it as life-long learning that involves engaging with questions of philosophy, ethics, and practice, and their influence on the learning environment.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Australian Institute for Teaching and School Leadership, aitsl. (2017).

Australian Government Department of Education, Skills and Employment. *My Time, Our Place Framework for School Age Care in Australia*. (2011).

Australian Government Department of Education, Skills and Employment. *Leading Learning Circles for Educators Engaged in Study*. (2016).

Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (~~2017~~)-(2020)

Guide to the National Quality Standard. (2017).

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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GOVERNANCE POLICY

The Governance Policy provides the overall direction, effectiveness, supervision, and accountability of a Service. Management are responsible for guiding the direction of the service, ensuring that its goals and objectives are met in line with the philosophy, and all legal and regulatory requirements governing the operation of the service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

73	Educational program
74	Record of child assessments or evaluations for delivery of educational program
168	Education and care services must have policies and procedures

177	Prescribed enrolment and other documents to be kept by approved provider
181	Confidentiality of records kept by approved provider
181-184	Confidentiality and storage of records

RELATED POLICIES

Code of Conduct Policy CCS Governance Policy	Privacy and Confidentiality Policy Record Keeping and Retention Policy
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PURPOSE

Our Vacation Care Service aims to ensure all legal and financial requirements are implemented and recognised through appropriate governance practices, providing quality education and care, meeting the principles, practices and elements of the Early Years Learning Framework, *My Time Our Place* and the National Quality Standard.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Governance is the process that directs and controls our Service, ensuring accountability and supporting decision making.

The Approved Provider and Nominated Supervisor of the Service accept the legal responsibilities associated with establishing, administering, and maintaining the Service. Our Service has the following established positions:

Approved Provider	Warren Shire Council (Representative: Maryanne Stephens)
Nominated Supervisor	Erin Hunt
Educational Leader	Erin Hunt

Responsible Persons	Shauna Brigden
Other	Prue Freeth/ Stephine Squire

THE APPROVED PROVIDER IS LEGALLY RESPONSIBLE FOR:

- ensuring compliance with the Education and Care Services National Law and Education and Care Services National Regulations
- complying with Family Assistance Law.
- appointing a Nominated Supervisor, an Educational Leader for the Service
- ensuring background checks, including criminal history and working with children checks, are completed for all staff and educators
- determining whether or not a person working in the service is a 'fit and proper person'
- supporting the Nominated Supervisor [Responsible Persons] in their role, providing adequate resources to ensure effective administration of the Service
- developing a clear and agreed philosophy, which guides business decisions and the work of management and staff
- acting honestly and with due diligence
- ensuring there is a sound foundation of policies and procedures that complies with all legislative and regulatory requirements, and that enables the daily operation of the Service to be in line with the Service's philosophy and goals
- maintaining up to date and current policies and procedures for compliance by all educators
- confirming incident, injury, illness or trauma records are stored and kept in a safe and secure place until the child is 25 years of age. In the event of a death of child while being cared for by the service or may have occurred as a result of an incident, the records must be kept until seven years after the death.
- being an employer, including all legal and ethical responsibilities that this entails
- appointing staff and monitoring their performance
- ensuring educator qualification requirements are current
- ensuring all educators and staff have a clear understanding of the hierarchy of management
- providing clear and direct written and verbal feedback and instruction that is suitable and appropriate to the task

- ensuring the Service remains financially viable and can meet its debts and other obligations as they fall due
- managing control and accountability systems
- reviewing the Service's budget and monitoring financial performance and management to ensure the Service is solvent at all times and has sound financial strength
- complying with funding agreements where appropriate
- reviewing the work process regularly
- completing a Quality Improvement Plan (QIP) for the Service and updating it at least annually
- developing coherent aims and goals that reflect the interests, values and beliefs of all stakeholders of the Service
- ensuring the educational program is based on an approved learning framework (MTOF) and contributes to each child's sense of identity and wellbeing
- complying with all other Australian governments' legislation that impacts upon the management and operations of a Service.

THE NOMINATED SUPERVISOR IS RESPONSIBLE FOR:

- adhering to the Education and Care Services National Law and National Regulations
- developing ethical standards and a code of conduct which guide actions and decisions in a way that is consistent and reflective of the Service's expectations
- undertaking periodical planning and risk assessments and having appropriate risk management strategies in place to manage risks faced by the Service
- ensuring that actions taken, and decisions made are clear and consistent and will help build confidence in all stakeholders
- the day to day management of the Service
- the effectiveness of the Service's well-defined partnership between the Management and the Nominated Supervisor. The partnership requires clear understanding of roles and responsibilities, and regular and open communication.
- producing outcomes together with educators and staff. Educators must agree on their responsibilities and work according to current policies and procedures.
- providing educators with training, resources and support

- identifying and reporting if something significant occurs (for example: Work Health and Safety; Fraud Prevention; Complaint handling)
- identifying work required for completion and delegate to the appropriate educator/staff
- ensuring educators and staff do not delegate responsibilities for which they are accountable for or have been delegated to them by Management
- delegate all tasks in writing with a clear due date
- ensuring educators are adhering to service policies and procedures.

SERVICE PHILOSOPHY

- The development and review of the philosophy and policies will be a continuous process on an annual basis or when required.
- The philosophy and associated statement of purpose will reinforce all other documentation and the practices of the Service. The philosophy will reflect the principles of the approved national framework *My Time, Our Place: Framework for School Age Care in Australia*.
- There will be a collaborative and consultative process to support the development and maintenance of the philosophy that will include children, parents and educators.
- All documents will be dated and include nominated review dates.

CODE OF CONDUCT

The standards of behaviour outlined in our *Code of Conduct Policy* provide guidance for all staff to make personal and ethical decisions related to confidentiality, recruitment, duty of care, record keeping, professional relationships and appropriate use of resources within the service.

CONFIDENTIALITY

All members of the Management along with the Nominated Supervisor, Responsible Person, educators, and staff who gain access to confidential information, whether in the course of their work or otherwise, shall not disclose information to anyone unless the disclosure of such information is required by law and will respect the confidentiality of all documents and meetings that occur.

This also includes:

- using information acquired for their personal or financial benefit, or for the benefit of any other person
- permitting any unauthorised person to inspect or have access to any confidential documents or other information
- any information received or transmitted via mobile telephone (including text/SMS) or any other electronic device (e.g. email) shall be treated with the same confidentiality as any other written form of communication and must be stored confidentially.

This obligation, placed on a member of Management, Nominated Supervisor, Responsible Person, educator, and staff shall continue even after the individual has completed their term and is no longer on Management or employed by the Service.

The obligation to maintain confidentiality also applies to any person who is invited to any meetings of the Management Committee.

FINANCIAL DECISION-MAKING

Our Vacation Care Service will make decisions which are consistent with our policies and procedures and that work in conjunction with the Education and Care Services National Law and National Regulations, our approved learning framework (MTOPI), and the ethical standards within the ECA Code of Ethics.

REVIEW AND EVALUATION OF THE SERVICE

- Ongoing review and evaluation will support the continuing development of the Service. We will ensure that the evaluation involves all stakeholders.
- The development of a Quality Improvement Plan (QIP) will form part of the reflection procedure. Reflection on what works within the Service and what needs additional development will be included in the QIP.

MAINTENANCE OF RECORDS

- The Service will adhere to record keeping requirements outlined in the National Regulations (177).
- The Service will adhere to the storage of confidential records outlined in the National Regulations (181-184).

- The Service has a responsibility to keep sufficient records about staff, families, and children in order to operate dependably and lawfully.
- The Service will safeguard the interests of all children, their families, and the staff, using procedures to ensure appropriate privacy and confidentiality practices are upheld.
- The Approved Provider assists in determining the process, storage location, and time line for storage of records, using the National Regulations as a minimum standard.
- The Service's orientation and induction processes will include the provision of significant information to managers, educators, children, and families to comply with National Regulations and Standards.
- The Approved Provider will ensure that the record retention procedure meets the requirements of the following government departments:
 - Australian Tax Office (ATO)
 - Family Assistance Office (FAO)
 - Family Assistance Law
 - National Law and Regulations

MANAGING CONFLICTS OF INTEREST

- Conflict of interest, whether actual, potential or perceived, must be declared by all members of the Management Committee/Nominated Supervisor and managed effectively to ensure integrity.
- Every stakeholder that is in a position of management has a responsibility to ensure their transactions, external business interests and relationships will not cause potential conflicts and to make such disclosures in a timely manner as they arise.
- The following process will be followed to manage any conflicts of interest:
 1. Whenever there is a conflict of interest, the member concerned must notify the Approved Provider about the conflict.
 2. The member with a conflict of interest must not be present during the meeting of the Management Committee or Management meeting where the matter is being discussed or participate in any decisions made on that matter. The member concerned must provide the committee / Licensee with any and all relevant information they possess on the particular matter.
 3. The minutes of the meeting must reflect that the conflict of interest was disclosed, and appropriate processes followed to manage the conflict.

4. A Conflict of interest disclosure statement must be completed by each member of the Management Committee / staff member upon his or her appointment and annually thereafter. If the information in this statement changes during the year, the member shall disclose the change to the Approved Provider/ and revise the disclosure statement accordingly.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014). FDC Guidance *Record keeping in Family Day Care Services* https://www.acecqa.gov.au/sites/default/files/2018-03/FDC_RecordKeeping.pdf

Australian Children’s Education & Care Quality Authority. *Compliance Guide Approved Provider* (2017) <https://www.acecqa.gov.au/sites/default/files/2019-06/FDC-ComplianceGuide-ApprovedProvider.pdf>

Australian Government. Department of Education. *Child Care Provider Handbook*. (2019). <https://www.education.gov.au/child-care-provider-handbook-0>

Early Learning Association Australia (ELLA) *Employee management and development kit* (2014) <https://elaa.org.au/resources/free-resources/employee-management-development-kit/>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018). [Education and Care Services National Regulations](#). (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2018). (Amended 2020).

Revised National Quality Standards. (2018)

Work Health and Safety Act 2011 (Cth)

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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PAYMENT OF FEES POLICY

Out of School Hours Care provides quality education and care for primary school-age children outside school hours and during school holidays. Our Vacation Care Service supports children to engage in play and leisure activities, develop new skills and build relationships with other children and educators whilst supporting workforce participation of parents and carers. Our Vacation Care Service is committed to providing quality education and care to all children at an affordable fee for families.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined, and understood and support effective decision making and operation of the service

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
172	Notification of change to policies and procedures

RELATED LEGISLATION

Child Care Subsidy Secretary’s Rules 2017 A New Tax System (Family Assistance) Act 1999	Family Law Act 1975
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RELATED POLICIES

Arrival and Departure Policy Child Care Subsidy (CCS) Governance Policy Enrolment Policy	Governance Policy Privacy and Confidentiality Policy Termination of Enrolment Policy
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PURPOSE

This policy explains process of fee payment and the necessity of ensuring children's fees are paid on time and consequences for failure to pay fees on time.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care Service.

IMPLEMENTATION

Our Vacation Care Service aims to ensure families understand the fee schedule and payment process required for education and care to be provided for their child. Our Vacation Care Service ensures the confidentiality and privacy of all personal information provided to the Service about the enrolled child and family.

The fee structure of the Vacation Care Service includes:

General Fees

- Fees are charged for each session/ daily for the Vacation Care programs
- Families are required to pay by cash upon signing their child/children into the Vacation Care Service
- A dated receipt will be provided for each payment via email.
- If a session of care falls on a public holiday, Vacation Care will not operate, therefore families are not required to pay normal fees.
- Fees are charged for full sessions only (regardless of the actual attendance hours any day).

Financial Difficulties

- If a family is experiencing financial difficulties, a suitable payment plan may be arranged with authorisation of the approved provider and/or Nominated Supervisor

Late Fees

- Our Vacation Care Service is not licensed or insured to have children on the premises after hours. This is a breach in the Education and Care Regulations.
- It is unacceptable to pick children up late from the Vacation Care Service. A late fee may apply where children are not picked up prior to closing time.

- A review of the child’s enrolment will occur where families are consistently late with fee payment.

Change of Fees

- Fees are subject to change at any time provided a minimum of **four weeks** written notice is given to all families.

Responsibility of Management

The Nominated Supervisor is responsible for:

- ensuring all families are aware of our *Payment of Fees Policy*
- ensuring enrolments are submitted correctly with the appropriate enrolment information
- terminating enrolment of children should fees not be paid
- providing at least 4 weeks written notice to families of any fee increases
- discussing fee payment with families if required

Responsibility of Families

- Ensure payment of fees as per policy

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).

Australian Government Department of Education Child Care Provider Handbook

<https://www.dese.gov.au/resources-child-care-providers/child-care-provider-handbook>

Australian Government Department of Education, Skills and Employment *Early Childhood and Care*

<https://www.education.gov.au/early-childhood-and-child-care-0>

Australian Government Department of Education, Skills and Employment *Information for child care providers when a period of local emergency occurs*

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017)

Guide to the National Quality Framework. (2017). (Amended 2020).

Kearns, K. (2017). *The Business of Childcare* (4th Ed.).

Revised National Quality Standard. (2018)

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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PRIVACY AND CONFIDENTIALITY POLICY

Privacy is acknowledged as a fundamental human right. Our Vacation Care Service has an ethical and legal responsibility to protect the privacy and confidentiality of children, individuals and families as outlined in Early Childhood Code of Ethics, National Education and Care Regulations and the Privacy Act 1988 (Cth). The right to privacy of all children, their families, and educators and staff of the Vacation Care Service will be upheld and respected, whilst ensuring that all children have access to high quality early years care and education. All staff members will maintain confidentiality of personal and sensitive information to foster positive trusting relationships with families.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
181	Confidentiality of records kept by approved provider
181-184	Confidentiality and storage of records

RELATED LEGISLATION

Child Care Subsidy Secretary’s Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	See all related legislation for Child Care Provider Handbook in Appendix 1 https://www.education.gov.au/child-care-provider-handbook-0

RELATED POLICIES

Enrolment Policy Cyber Safety Policy Family Communication Policy Grievance Policy Governance Policy Interaction with Children, Family and Staff Policy	Management Committee Policy Payment of Fees Policy Photograph Policy Record Keeping and Retention Policy Writing Reviewing and Maintaining Policies
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PURPOSE

To ensure that the confidentiality of information and files relating to the children, families, staff, and visitors using the Vacation Care Service is upheld at all times. We aim to protect the privacy and confidentiality of all information and records about individual children, families, educators, staff and management by ensuring continuous review and improvement on our current systems, storage, and methods of disposal of records. We will ensure that all records and information are held in a secure place and are only retrieved by or released to people who have a legal right to access this information. Our Vacation Care Service takes data integrity very seriously, we strive to assure all records and data is protected from unauthorised access and that it is available to authorised persons when needed. This policy provides procedures to ensure data is stored, used and accessed in accordance with relevant policies and procedures, example enrolment policy, CCS Account policy.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Vacation Care+ Service.

IMPLEMENTATION

Under National Law, Section 263, Early Childhood Services are required to comply with Australian privacy law which includes the *Privacy Act 1988* (the Act) aimed at protecting the privacy of individuals. Schedule 1 of the *Privacy Act (1988)* includes 13 Australian Privacy Principles (APPs) which all services are required

to apply. The APPs set out the standards, rights and legal obligations in relation to collecting, handling, holding and accessing personal information.

The Notifiable Data Breaches (NDB) scheme requires Early Childhood Services, Family Day Care Services, and Out of School Hours Care Services to provide notice to the Office of the Australian Information Commissioner (formerly known as the Privacy Commissioner) and affected individuals of any data breaches that are 'likely' to result in 'serious harm'.

Businesses that suspect an eligible data breach may have occurred, must undertake a reasonable and expeditious assessment to determine if the data breach is likely to result in serious harm to any individual affected. A breach of an Australian Privacy Principle is viewed as an '*interference with the privacy of an individual*' and can lead to regulatory action and penalties.

(source: OAIC Australian Privacy Principles)

Further information about the APPs are included in Appendix 1 of this policy.

THE APPROVED PROVIDER/ MANAGEMENT WILL:

- ensure the Vacation Care Service acts in accordance with the requirements of the Australian Privacy Principles and *Privacy Act 1988* by developing, reviewing, and implementing procedures and practices that identify:
 - the name and contact details of the Vacation Care Service
 - what information the Service collects and the source of information
 - why the information is collected
 - who will have access to information
 - collection, storage, use, disclosure, and disposal of personal information collected by the Vacation Care Service
 - any law that requires the particular information to be collected
 - adequate and appropriate storage for personal information collected by the Vacation Care Service
 - protection of personal information from unauthorised access.

- provide staff and educators with relevant information regarding changes to Australian privacy law and Service policy
- ensure all relevant staff understand the requirements under Australia's privacy law and Notifiable Data Breaches (NDB) scheme
- maintain currency with the Australian Privacy Principles (this may include delegating a staff member to oversee all privacy-related activities to ensure compliance).
- ensure personal information is protected in accordance with our obligations under the *Privacy Act 1988* and *Privacy Amendments (Enhancing Privacy Protection) Act 2012*
- ensure all records and documents are maintained and stored in accordance with Education and Care Service National Regulations
- regularly back-up personal and sensitive data from computers to protect personal information collected
- ensure all computers are password protected and install security software- antivirus protection
- ensure families are notified of the time particular records are required to be retained as per Education and Care Services National Regulations [regulation 183 (2)]
- ensure the appropriate and permitted use of images of children
- ensure all employees, students, volunteers, and families are provided with a copy of this policy
- deal with privacy complaints promptly and in a consistent manner, following the Vacation Care Service's *Grievance Policy* and procedures
- ensure families only have access to the files and records of their own children
- ensure information given to Educators will be treated with respect and in a professional and confidential manner
- ensure individual child and staff files are stored in a locked and secure cabinet
- ensure information relating to staff employment will remain confidential and available only to the people directly involved with making personnel decisions
- ensure that information shared with the Service by the family will be treated as confidential unless told otherwise.

THE NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL:

- adhere to Vacation Care Service policies and procedures, supporting management
- ensure educators, staff, volunteers, and families are aware of the privacy and confidentiality policy.

- ensure the Vacation Care service obtains written consent from parents and/or guardian of children who will be photographed or videoed by the service
- ensure families only have access to the files and records of their own children
- ensure that information given to Educators will be treated with respect and in a confidential and professional manner
- ensure only necessary information regarding the children's day-to-day health and wellbeing is given to non-primary contact educators. For example, food allergy information
- not discuss individual children with people other than the family of that child, except for the purposes of curriculum planning or group management. Communication in other settings must be approved by the family beforehand.
- ensure that information shared with us by the family will be treated as confidential unless told otherwise.

EDUCATORS WILL:

- read and adhere to the *Privacy and Confidentiality Policy* at all times
- ensure documented information and photographs of children are kept secure but may be accessed at any time by the child's parents or guardian
- ensure families only have access to the files and records of their own children
- treat private and confidential information with respect in a professional manner
- not discuss individual children with people other than the family of that child, except for the purposes of curriculum planning or group management. Communication in other settings must be approved by the family beforehand
- ensure that information shared with the service by the family will be treated as confidential unless told otherwise
- maintain individual and Service information and store documentation according to this policy at all times
- not share information about the individual or service, management information, or other staff as per legislative authority.

Australian Privacy Principles- Personal Information

Warren Shire Council Vacation Care Service is committed to protecting personal information in accordance with our obligations under the *Privacy Act 1988* and *Privacy Amendments (Enhancing Privacy Protection) Act 2012*.

Personal information includes a broad range of information, or an opinion, that could identify an individual. Sensitive information is personal information that includes information or an opinion about a range of personal information that has a higher level of privacy protection than other personal information.

Source: OAIC-Australian Privacy Laws, Privacy Act 1988

Personal information will be collected and held securely and confidentially about you and your child to assist our Vacation Care Service provide quality education and care to your child whilst promoting and maintaining a child safe environment for all stakeholders.

Personal information our Service may request regarding enrolled children:

- Child's name
- Gender
- Date of birth
- Address
- Birth Certificate
- Religion
- Language spoken at home
- Emergency contact details and persons authorised to collect individual children
- Children's health requirements
- Immunisation records- (Immunisation History Statement)
- Developmental records and summaries
- External agency information
- Custodial arrangements or parenting orders
- Incident reports
- Medication reports
- Medical records
- Permission forms – including permission to take and publish photographs, video, work samples
- Doctor's contact information
- Dietary requirements

Personal information our Service may request regarding parents and caregivers

- Parent/s full name
- Address
- Phone number (mobile & work)
- Email address

- Custody arrangements or parental agreement

Personal information our Service may request regarding staff and volunteers

- Personal details
- Tax information
- Banking details
- Working contract
- Emergency contact details
- Medical details
- Immunisation details
- Working With Children Check verification
- Educational Qualifications
- Medical history
- Resume
- Superannuation details
- Child Protection qualifications
- First Aid, Asthma and Anaphylaxis certificates
- Professional Development certificates
- PRODA related documents such as RA number and background checks

Method of Collection

Information is generally collected using standard forms at the time of enrolment.

Additional information may be provided to the Service through email, surveys, telephone calls or other written communication.

How we protect your personal information

To protect your personal and sensitive information, we maintain physical, technical and administrative safeguards

All hard copies of information are stored in children's individual files in a locked cupboard

All computers used to store personal information are password protected. Each staff member will be provided with a unique username and password for access to program software. Staff will be advised not to share usernames and passwords

Access to personal and sensitive information is restricted to key personal only

Security software is installed on all computers and updated automatically when patches are released

Data is regularly backed up on external drive and/or through a cloud storage solution

Any notifiable breach to data is reported

All staff are aware of the importance of confidentiality and maintaining the privacy and security of your information

Procedures are in place to ensure information is communicated to intended recipients only, example invoices and payment enquiries

Access to personal and sensitive information

Personal and sensitive information about staff, families and children will be stored securely at all times.

The Approved Provider will ensure that information kept in a child's record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates
- a parent of the child to whom the information relates, except in the case of information kept in a staff record
- the Regulatory Authority or an authorised officer
- as expressly authorised, permitted or required to be given by or under any Act or law
- with the written consent of the person who provided the information.

Disclosing personal and sensitive information

Our Service will only disclose personal or sensitive information to:

- Child Protection Agency- Office of the Children's Guardian and Regulatory Authority as per our *Child Protection and Child Safe Environment Policies*
- as part of the purchase of our business asset with parental permission

Complaints and Grievances

If a parent, employee, or volunteer has a complaint or concern about our Vacation Care Service, or they believe there has been a data breach of the Australian Privacy Principles, they are requested to contact the Approved Provider so reasonable steps to investigate the complaint can be made and a response provided.

If there are further concerns about how the matter has been handled, please contact the Office of Australian Information Commissioner on 1300 363 992 or:

https://forms.business.gov.au/smartforms/landing.htm?formCode=APC_PC

For any other general concerns, please contact the Approved Provider directly on: 68476600

APPENDIX

The Australian Privacy Principles (APPs) outline:

- The open and transparent management of personal information, including having a privacy policy
- An individual having the option of transacting anonymously or using a pseudonym where practicable
- The collection of solicited personal information and receipt of unsolicited personal information including giving notice about collection
- How personal information can be used and disclosed (including overseas)
- Maintaining the quality of personal information
- Keeping personal information secure
- Right for individuals to access and correct their personal information

The APPs place more stringent obligations on APP entities when they handle 'sensitive information'. Sensitive information is a type of personal information and includes information about an individual's:

- Health (including predictive genetic information)
- racial or ethnic origin
- political opinions

- membership of a political association, professional or trade association or trade union
- religious beliefs or affiliations
- philosophical beliefs
- sexual orientation or practices
- criminal record
- biometric information that is to be used for certain purposes
- Biometric templates.

Australian Privacy Principles (APPs)

APP 1 – Open and transparent management of personal information

Ensures that APP entities manage personal information in an open and transparent way. This includes having a clearly expressed and up to date APP privacy policy.

APP 2 – Anonymity and Pseudonymity

Requires APP entities to give individuals the option of not identifying themselves, or of using a pseudonym. Limited exceptions apply.

APP 3 – Collection of solicited personal information

Outlines when an APP entity can collect personal information that is solicited. It applies higher standards to the collection of 'sensitive' information.

APP 4 – Dealing with unsolicited personal information

Outlines how APP entities must deal with unsolicited personal information.

APP 5 – Notification of the collection of personal information

Outlines when and in what circumstances an APP entity that collects personal information must notify an individual of certain matters.

APP 6 – Use or disclosure of personal information

Outlines the circumstances in which an APP entity may use or disclose personal information that it holds.

APP 7 – Direct marketing

An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.

APP 8 – Cross-order disclosure of personal information

Outlines the steps an APP entity must take to protect personal information before it is disclosed overseas.

APP 9 – Adoption, use or disclosure of government related identifiers

Outlines the limited circumstances when an organisation may adopt a government related identifier of an individual as its own identifier or use or disclose a government related identifier of an individual.

APP 10 – Quality of personal information

An APP entity must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete. An entity must also take reasonable steps to ensure the personal information it uses or discloses is accurate, up to date, complete and relevant, having regard to the purpose of the use or disclosure.

APP 11 – Security of personal information

An APP entity must take reasonable steps to protect personal information it holds from misuse, interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.

APP 12 – Access to personal information

Outlines an APP entity's obligations when an individual requests to be given access to personal information held about them by the entity. This includes a requirement to provide access unless a specific exception applies.

APP 13 – Correction of personal information

Outlines an APP entity's obligations in relation to correcting the personal information it holds about individuals.

Source

Australian Childcare Alliance. (2019). Changes to Australia's privacy law: What ECEC services need to know:

<https://childcarealliance.org.au/blog/115-changes-to-australia-s-privacy-law-what-ecec-services-need-to-know>

Australian Children's Education & Care Quality Authority. (2014)

Australian Government Office of the Australian Information Commission – Australian Privacy Principles:

<https://www.oaic.gov.au/privacy-law/privacy-act/australian-privacy-principles>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Privacy Act 1988.

Revised National Quality Standard. (2018).

UN General Assembly (1989) United Nations Convention of the Rights of a child

REVIEW

POLICY REVIEWED: JANAUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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PRIVACY AND CONFIDENTIALITY PROCEDURE

Privacy is acknowledged as a fundamental human right. Our Service has an ethical and legal responsibility to protect the privacy and confidentiality of children, individuals and families as outlined in Early Childhood Code of Ethics, National Education and Care Regulations and the Privacy Act 1988 (Cth). The right to privacy of all children, their families, and educators and staff of the Service will be upheld and respected, whilst ensuring that all children have access to high quality early years care and education. All staff members will maintain confidentiality of personal and sensitive information to foster positive trusting relationships with families.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.

STEP 1 – COLLECTION OF DATA

[Name of the Service] [ABN number] is committed to protecting personal information in accordance with our obligations under the *Privacy Act 1988* and *Privacy Amendments (Enhancing Privacy Protection) Act 2012*.

Personal information includes a broad range of information, or an opinion, that could identify an individual.

Sensitive information is personal information that includes information or an opinion about a range of personal information that has a higher level of privacy protection than other personal information.

Source: OAIC-Australian Privacy Laws, Privacy Act 1988

1) Personal information our Service may request regarding enrolled children:

- Child's name
- Gender
- Date of birth
- Birth Certificate
- Address
- Religion
- Language spoken at home
- Emergency contact details and persons authorised to collect individual children
- Children's health requirements
- Immunisation records- (Immunisation History Statement)
- Developmental records and summaries
- External agency information
- Custodial arrangements or parenting orders
- Incident reports
- Medication reports
- Child Care Subsidy information
- Medical records
- Permission forms – including permission to take and publish photographs, video, work samples
- Doctor's contact information
- Centrelink Customer Reference number (CRN)
- Dietary requirements

2) Personal information our Service may request regarding parents and caregivers

- Parent/s full name
- Address
- Phone number (mobile & work)
- Email address
- Bank account or credit card detail for payments
- Centrelink Customer Reference number (CRN)
- Family court documentation- custody arrangements or parental agreement
- Any other information related to Family Assistance Law

3) Personal information our Service may request regarding staff and volunteers

- Personal details
- Tax information
- Banking details
- Working contract
- Emergency contact details
- Medical details
- Immunisation details
- Working With Children Check verification
- Educational Qualifications
- Medical history
- Resume
- Superannuation details
- Child Protection qualifications
- First Aid, Asthma and Anaphylaxis certificates
- Professional Development certificates
- PRODA related documents such as RA number and background checks

STEP 2 - METHOD OF COLLECTION OF INFORMATION

- 1) Information is generally collected using standard forms at the time of enrolment or employment.
- 2) Additional information may be provided to the Service through email, surveys, telephone calls or other written communication.
- 3) Information may be collected online through the use of software such as a program software.

STEP 3 - STORAGE OF PERSONAL INFORMATION

To protect personal and sensitive information, our Services maintains physical, technical and administrative safeguards. All personnel records and personal records related to children and families and other records related to service's provision of education and care will be stored securely and only accessed by authorised personnel.

- 1) All hard copies of information will be stored in children's individual files or staff individual files in a locked cupboard or filing cabinet
- 2) All computers used to store personal information are password protected. Each staff member will be provided with a unique username and password for access to program software. Staff are not permitted to share usernames and passwords

- 3) Access to personal and sensitive information is restricted to key personal only
- 4) Security software is installed on all computers and updated automatically when patches are released
- 5) Data is regularly backed up on external drive and/or through a cloud storage solution
- 6) Any notifiable breach to data is reported
- 7) All staff are bound to respect the privacy rights of children, families, other personnel of the service.
All staff must sign a *Confidentiality Agreement* to maintain the privacy and security of information and agree to delete any confidential information from personal devices, surrender documentation, software and any other materials related to the Service upon ceasing employment with the service.

STEP 4 - ACCESS TO PERSONAL AND SENSITIVE INFORMATION

Personal and sensitive information about staff, families and children will be stored securely at all times.

The Approved Provider will ensure that information kept in a child's record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates
- a parent of the child to whom the information relates, except in the case of information kept in a staff record
- the Regulatory Authority or an authorised officer
- as expressly authorised, permitted or required to be given by or under any Act or law
- with the written consent of the person who provided the information.

STEP 5 - DISCLOSING PERSONAL AND SENSITIVE INFORMATION

Our Service will only disclose personal or sensitive information to:

- Child Protection Agency- Office of the Children's Guardian and Regulatory Authority as per our *Child Protection and Child Safe Environment Policies*
- as part of the purchase of our business asset with parental permission.

STEP 6 - COMPLAINTS AND GRIEVANCES

- 1) If a parent, employee or volunteer has a complaint or concern about our Service, or they believe there has been a data breach of the Australian Privacy Principles, they are requested to contact the Approved Provider so reasonable steps to investigate the complaint can be made and a response provided.
- 2) If there are further concerns about how the matter has been handled, please contact the Office of Australian Information Commissioner on 1300 363 992 or:
https://forms.business.gov.au/smartforms/landing.htm?formCode=APC_PC
- 3) For any other general concerns, parents and families are requested to contact the Approved Provider directly on: 68476600

PROFESSIONAL DEVELOPMENT POLICY

Professional development is a term used which includes workshops, conferences, in-services, training sessions, formal studying, readings, and professional research. The contribution of professional development to developing practice can be a source of deep professional satisfaction, for both individual practitioners and Out of School Hours Care Services collectively.

A commitment to ongoing professional development is the key to effective continuous improvement and the provision of quality school age care. Engaging in professional development helps to identify individual educator's areas of strengths and areas requiring improvement.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
118	Educational Leader
126	Centre-Based services – general educator qualifications
136	First Aid qualifications

138	Application for qualification to be assessed for inclusion on the list of approved qualifications
168	Education and care service must have policies and procedures.

RELATED LEGISLATION

Child Care Subsidy Secretary’s Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	See all related legislation for Child Care Provider Handbook in Appendix 1 https://www.education.gov.au/child-care-provider-handbook-0

RELATED POLICIES

CCS Governance Policy Code of Conduct Policy Child Protection Policy Enrolment Policy	First Aid Policy Payment of Fees Policy Record Keeping and Retention Policy Work, Health and Safety Policy
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PURPOSE

Professional development allows individuals to build and improve their knowledge and skills within the early childhood and school age care sector whilst keeping up to date with current research and recommended practice. The School Age Care sector continues to grow and change and these changes impact on licensing and assessment requirements as well as our interactions and documentation of individual children. To comply and improve we implement procedures for identifying areas in which our educators and staff can enhance skills and knowledge through relevant and effective professional development and training. We aim to review and update individual professional development plans based on performance appraisals detecting strengths, interests, and goals.

SCOPE

This policy applies to educators, staff, and management of the Vacation Care Service.

IMPLEMENTATION

The Early Childhood Australia (ECA) Code of Ethics suggest that in relation to being professional, educators will take responsibility for reflecting on and assessing their professional values, knowledge and practice, and the positive contribution to the early childhood profession. Educators will engage in critical reflection, ongoing professional learning and support research that builds knowledge and that of the profession.

MANAGEMENT WILL ENSURE:

- the nominated supervisor and all staff are aware of Family Assistance Law legislation and enrolment processes
- the roster supports at least one nominated supervisor and person in day-to-day charge of the service, who holds the following qualifications is in attendance at all times at the service when children are being educated and cared for and immediately available in an emergency:
 - ACECQA approved and current first aid qualification including CPR
 - ACECQA approved and current emergency asthma management training
 - ACECQA approved and current anaphylaxis management training
 - child protection training as required in NSW
- the Nominated Supervisor undertakes professional development in accordance with National Regulations, Family Assistance Law, and their individual professional development plan
- all educators and staff are provided with professional learning for the Child Safe Standards
- a budgeted amount is allocated and available to provide relevant training to educators and staff
- approve all professional development prior to booking (for events which are paid for or subsidised by the Service, at the discretion of the Approved Provider). Only professional development which are beneficial to the Service and other educators will be approved for payment, at the discretion of the Educational Leader and /or Approved Provider
- all professional development completed by educators and staff is recorded in individual staff records via the Professional Development Record and relevant materials and information to enhance skills and knowledge is shared with colleagues
- a variety of professional development for educators and staff is provided and encouraged
- professional development is linked to the Quality Improvement Plan
- mentoring programs and management support networks are implemented for educators and staff to receive guidance and inspiration

- opportunities are provided for educators to work closely with more experienced colleagues to assist skills in observations, questioning, critiquing and responding to children's experiences
- they are positive role models for educators and staff
- educators are supported to attend professional development by committing time and resources in order to develop new skills and knowledge that can be shared within the Vacation Care Service.

THE NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- ensure Child Protection training is valid and updated every 12-18 months and whenever significant changes are made to the child protection law or reporting requirements, to maintain skills and knowledge required by National Regulations and best practice
- hold a current ACECQA approved first aid, qualification and ACECQA approved emergency asthma and anaphylaxis management qualifications at all times
- ensure CPR refresher training is completed annually
- complete annual adrenaline auto injector training through ASCIA
- provide documentation of all qualifications to the Approved Provider
- attend a minimum of p 2 professional development/ in-service training events over a 12-month period
- be a positive role model for educators and staff
- collaborate with the Educational Leader to identify training needs across the service and source appropriate training and mentoring for educators
- ensure strategies are implemented by educators to make practical use of the information gained from professional development
- develop a culture of learning through reflective practice
- review Job descriptions as part of the Professional Development Agenda before establishing the Professional Development Plan

THE EDUCATIONAL LEADER WILL:

- support educators to further their professional growth
- complete the simple SWOT analysis for each educator (Strengths, Opportunities, Weaknesses and Threats).

- maintain the Professional Development Record for each educator following the completion of training and workshops
- complete a Professional Development Plan with each educator and discuss with the Nominated Supervisor
- source and schedule in-services, webinars, workshops and other professional development opportunities as per educator Professional Development Plan taking into consideration the service training budget
- facilitate educators to share new knowledge and skills learnt at training and workshops
- facilitate reflective practice as a form of ongoing professional learning for all staff
- support educators to undertake WHS training as a part of their in-service training.

EDUCATORS WILL:

- keep up to date with Child Protection ‘*refresher*’ training ensuring currency and compliance
- hold a current ACECQA approved first aid qualification and ACECQA approved emergency asthma and anaphylaxis management qualifications (as required)
- ensure CPR refresher training is completed annually
- complete annual adrenaline auto injector training through ASCIA
- attend a minimum of 2 professional development/ in-services training over a 12-month period for all staff.
- seek assistance and direction from the Vacation Care Service’s Educational Leader regarding options for in-services and other professional learning opportunities.
- following the attendance of training and workshops, complete a Professional Development Review form
- with the assistance of the Educational Leader, share skills and knowledge learnt from professional development with other team members.

EXAMPLE OF PROFESSIONAL DEVELOPMENT AND IN-SERVICE OPPORTUNITIES

Networking with other services and professionals	Mentoring and coaching programs
In-house or external training (workshops, courses)	Self-paced training packages
Sharing information gained from formal studies	Hands-on job training

- Knowledge and skills sharing
- Visitors from local areas
- Reading professional publication and websites
- Engage in professional reflection (journals)
- Subscribing to professional newsletters
- Formal TAFE, college or University courses (check with [ACECQA for list of approved qualifications](#))
- Conferences
- Meeting discussions
- Viewing professional DVD's
- Reading recently published ECE texts
- Inquiry conversations

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Government Department of Education, Skills and Employment. *My Time, Our Place- Framework for School Age Care in Australia*. (2011).
 Australian Government Department of Education Skills and Employment Child Care Provider Handbook <https://www.education.gov.au/child-care-provider-handbook-0>
 Australian Government Department of Education, Skills and Employment. *Leading Learning Circles for Educators Engaged in Study*. (2016).
 Early Childhood Australia Code of Ethics. (2016).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (Amended 2020).
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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RECORD KEEPING AND RETENTION POLICY

The Approved Provider and Management are responsible for overseeing and ensuring records are maintained and stored in accordance with relevant legislation contained in the National Law and National Regulations, National Quality Standard and Family Assistance Law.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
55	Quality improvement plans
74	Documenting of child assessments or evaluations for delivery of educational program
87	Incident, injury, trauma and illness record
92	Medication record
118	Educational leader
145	Staff record
146	Nominated Supervisor
147	Staff members
149	Volunteers and students

150	Responsible Person
151	Record of educators working directly with children
158	Children's attendance record is to be kept by approved provider
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
167	Record of service's compliance
173	Prescribed information to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider
180	Evidence of prescribed insurance
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents
184	Storage of records after service approval transferred

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Work Health and Safety Act 2011
See all related legislation for Child Care Provider Handbook in Appendix 1	

RELATED POLICIES

Arrival and Departure Policy Administration of First Aid Policy Administration of Medication Policy Child Protection Policy Child Safe Environment Policy Curriculum (Pedagogy) and Educators Training Policy Enrolment Policy Excursion Policy	Governance Policy Incident, Illness, Accident & Trauma Policy Medical Conditions Policy Photograph Policy Privacy and Confidentiality Policy Responsible Person Policy Supervision Policy Unexpected Death of a Child Policy
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PURPOSE

We aim to maintain and manage appropriate records in a private and confidential manner, working in accordance with legislative requirements and best practice.

SCOPE

This policy applies to families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

The Approved Provider is responsible for compliance with record keeping requirements in accordance with Education and Care Services National Law and National Regulations.

This policy encompasses requirements for National Law and National Regulations and Family Assistance Law. Records that are required for Family Assistance Law must be kept for seven years and are highlighted in red.

Prescribed records to be kept by approved provider:

The following records are to be retained in a secure location at the Service:

- complaints made to the provider, or to any of the services of the provider, relating to compliance with Family Assistance Law (records must be kept for seven years)
- children's attendance records (regardless of eligibility for Child Care Subsidy) (Regulation 158) (to be kept until the end of 3 years after the child's last attendance [Regulation 183]. These records are also required for Family Assistance Law (records must be kept for seven years)
- record of any absences from care for all children (regardless of eligibility for Child Care Subsidy- records must be kept for seven years)
- copies of invoices and receipts issued for the payment of childcare fees (records must be kept for seven years)
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record of all staff
- any evidence or information produced to obtain police checks and Working With Children Checks for personnel and to support any statements about these checks in an application for provider or service approval. These records are also required for Family Assistance Law (records must be kept for seven years)
- written record of any notice given to a state or territory body about a child at risk of abuse or neglect (records must be kept for seven years)

- copies of the evidence and information provided with an application for approval about persons with management or control of a provider and persons responsible for the day-to-day operation of the service (records must be kept for seven years)
- educational leader records (Regulation 118)
- an incident, injury, trauma and illness record (Regulation 87) (to be kept until child is 25 years [Regulation 183])
- medication records (Regulation 92) (Keep until the end of 3 years after the child's last attendance [Regulation 183])
- evaluations of the child's wellbeing, development and learning (Regulation 74) (to be kept for 3 years after the child's last day of attendance [Regulation 183]) for services in ACT, TAS, VIC, SA, WA.
- services in NSW and QLD, evaluations for each child are not mandated.
- staff records (Regulation 145)
- record of volunteers and students (Regulation 149)
- records of the Responsible Person at the Service (Regulation 150)
- record of Educators working directly with children (Regulation 151)
- children's attendance records (Regulation 158) (to be kept until the end of 3 years after the child's last attendance [Regulation 183])
- any record relating to the death of a child whilst being educated and cared for by the Service or as a result of an incident whilst being educated and cared for, until the end of 7 years after the death of a child.
- child enrolment records (Regulation 160) (to be kept until the end of 3 years after the child's last attendance [Regulation 183])
- record of the Service's compliance with the Law (Regulation 167)
- a record of each nominated supervisor and any person placed in day to day charge of the education and care service (Regulation 146)
- evidence of prescribed insurance must be available at the education and care service premises (Regulation 180). Current policy of insurance for public liability with a minimum cover of \$10 000 000 (Reg. 29)

Records to be kept in Relation to the Nominated Supervisor (Reg. 146)

- the full name, address and date of birth
- evidence of any relevant qualifications held by the Nominated Supervisor
- if applicable, evidence that the Nominated Supervisor is actively working towards a qualification.

If this is the case, the following must be recorded:

- Proof of enrolment.
- Documentary evidence that the Nominated Supervisor has commenced the course, is making satisfactory progress towards the completion of the course, is meeting the requirements of maintaining the enrolment.
- For Nominated Supervisors who are working towards the completion of a Diploma level education and care qualification, proof that they hold an approved Certificate III level education and care qualification or have as completed the units of study that equate to an approved Certificate III level education and care qualification determined by ACECQA.
- evidence of any approved training (including first aid training, current approved anaphylaxis management training, approved emergency asthma management training and approved Child Protection) completed by the Nominated Supervisor.
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record and/or Australian National Police Check
- the date the check, card, record or registration was and the date this was verified and by whom.

Records to be kept in Relation to Staff and Educators: (Reg: 151, 152)

- the full name, address and date of birth
- evidence of any relevant qualifications
- evidence of any approved training (including first aid training) completed by the staff member
- the identifying number and expiry date of the Working with Children Check (WWCC) and the date this was verified.
- if applicable the identifying number and expiry date of their current teacher registration from state Department of Education and Training.

Records to be kept in relation to the Educational Leader: (Reg: 148)

- the name of the educator who is designated at this role in accordance with Regulation 118.

Records to be kept in relation to Students and Volunteers: (Reg: 149)

- the full name, address and date of birth of each student or volunteer.
- the Approved Provider must also keep a record for each day on which the student or volunteer participates in the Service, the date and hours of participation.

Records to be kept in relation to the Responsible Person: (Reg: 150)

- the staff record must include the name of the responsible person at the Service for each time that children are being educated and cared for by the Service.
- application for approval about the person responsible for day-to-day operation of a Service

Records to be kept in relation to educators working directly with children: (Reg: 151)

- the name of each educator.
- the hours that each educator works directly with children.
- a staff roster or time sheet stating educators contact and non-contact hours/shift.

Records to be kept in relation to incident, injury, trauma and illness: (Reg: 87)

- details of any incident in relation to a child or injury received by a child or trauma to which a child has been subject while being educated and care for by the Service. The following must be included:
 - the name and age of the child, including date of birth
 - gender
 - the circumstances leading to the incident, injury or trauma.
 - the time and date the incident occurred, the injury that was received or the child was subjected to the trauma.
- details of any illness, which becomes apparent while the child is being educated and cared for by the Service. The following must be included:
 - the name and age of the child
 - the relevant circumstances surrounding the child becoming ill and any apparent symptoms

- the time and date of the apparent onset of the illness
 - date when child was last at the service
- details of the action taken by the Service in relation to any incident, injury, trauma or illness which a child has suffered while being educated and cared for by the Service. The following must be included:
 - any medication administered, or first aid provided
 - any medical personnel contacted
 - details of any person who witnessed the incident, injury or trauma, including signature of witness
 - the name of any person who the education and care service notified or attempted to notify of any incident, injury trauma or illness a child has suffered at the Service and the time and date of the notification and notification attempts.
 - the name and signature of the person making an entry in the record and the time and date that the entry was made
 - signed and dated parent/guardian acknowledgement of record
- this record must be recorded as soon as is practicable, but not later than 24 hours after the incident, injury, trauma or onset of illness occurred
- the record must show that a serious incident is entered into the [NQA IT System](#)
- these records must be kept until the child is aged 25 years.

Records to be kept in relation to medication: (Reg: 92, 95)

- the name of the child
- the authorisation to administer medication (including self-administration is applicable) signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication.
- the name of the medication to be administered
- the time and date the medication was last administered
- the time and date or the circumstance under which the medication should be next administered
- the dosage of the medication to be administered
- the manner in which the medication is to be administered

- if the medication is administered to the child:
 - the dosage that was administered
 - the manner in which the medication was administered
 - the name and signature of the person who administered the medication
 - if another individual is required to check the dosage, the name and signature of that person.

Records to be kept in relation to children's attendance: (Reg: 158)

- the full name of each child attending the Service.
- the date and time each child arrives and departs.
- the signature of:
 - the person who delivers and collects the child when he or she arrives and departs or,
 - the Nominated Supervisor or Educator.

Records to be kept in relation to child enrolment: (Reg: 160)

- the full name, date of birth and address of the child.
- the name, address and contact details of:
 - each known parent of the child
 - any person who is to be notified of any emergency involving the child if any parent of the child cannot be immediately contacted
 - any person who is an authorised nominee
 - any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
 - any person who is authorised to authorise an educator to take the child outside the education and care service premises
 - details of any court orders, parenting orders or parenting plans provided to the approved provider relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child
 - details of any other court orders provided to the approved provider relating to the child's residence or the child's contact with a parent or other person
 - gender of the child
 - language used in the child's home

- cultural background of the child and parents
- any special considerations for the child (e.g. cultural, religious, dietary requirements or additional needs).
- authorisations signed by a parent or a person named in the enrolment record as authorised to consent to the medical treatment of the or nominated supervisor to seek:
 - medical treatment for the child from a registered medical practitioner, hospital or ambulance service.
 - transportation of the child by any ambulance service.
- authorisation to take the child on regular outings (additional authorisation is required for regular transportation)
- the name, address and telephone number or the child's registered medical practitioner or medical service
- the child's Medicare number if available
- details of any specific healthcare needs of the child including any medical conditions or allergies including whether the child has been diagnosed as at risk of anaphylaxis, including details of any medical management plan
- details of any dietary restrictions for the child.

Records to be kept in relation to the Service's compliance with the law: (Reg: 167)

- Details of any amendments of the Service Approval made by the Regulatory Authority including:
 - the reason stated by the Regulatory Authority for the amendment
 - the date on which the amendment took, or takes, effect
 - the date (if any) that the amendment ceases to have effect
 - details of any suspension of the service (other than a voluntary suspension) including:
 - the reason stated by the Regulatory Authority for the suspension
 - the date on which the suspension took, or takes, effect
 - the date that the suspension ends.
- details of any compliance direction or compliance notice issued to the approved provider in respect of the service, including:
 - the reason stated by the Regulatory Authority for issuing the direction or notice.

- the steps specified in the direction or notice.
- the date by which the steps specified must be taken.
- this information must not include any information that identifies any person other than the approved provider.
- the Approved Provider must ensure that the documents referred to above in relation to a child enrolled at the Service are made available to a parent of the child on request. Accordingly, if a parent's access to the kind of information referred to in this documentation is limited by an order of a court, the approved provider must refer to the court order in relation to the release of information concerning the child to that parent.
- the record of compliance referred to above must be available for access on request by any person.

Storage of Records (Reg: 183, 184)

Records made by our Service will be stored in a safe and secure location for the relevant time periods as set out above and only made accessible to relevant individuals.

If the record relates to the death of a child while being educated and cared for by the Service or as a result of an incident while being educated and cared for by the Service, the records must be kept for 7 years after the death. In the case of any other record relating to a child enrolled at the education and care service, until 3 years after the last date on which the child was educated and cared for by the service. (see Appendix 2- ACEQCA image)

If a service is transferred under the law, documents relating to a child must not be transferred without the express consent of the child's parents.

Confidentiality of Records (Reg: 182)

The Approved Provider will ensure that information kept in a record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates.

- a parent of the child to whom the information relates, except in the case of information kept in a staff record.
- the Regulatory Authority or an authorised officer.
- as expressly authorised, permitted or required to be given by or under any Act or law.
- with the written consent of the person who provided the information.

Information to be displayed (Reg: 173)

Services must have the following displayed:

- in relation to the provider approval
 - the name of the approved provider
 - the provider approval number
 - any conditions on the provider approval.
- in relation to the service approval:
 - the name of the education and care service,
 - the service approval number,
 - any conditions on the service approval.
- the name of each nominated supervisor.
- in relation to the rating of the service:
 - the current rating levels for each quality area stated in the National Quality Standard, and
 - the overall rating of the service.
- in relation to any service waivers or temporary waivers held by the service, the details of the waivers including:
 - the elements of the NQS and the regulations that have been waived, and
 - the duration of the waiver, and
 - whether the waiver is a service waiver or a temporary waiver.

The service must also display:

- the hours and days of operation of the education and care service.
- the name and telephone number of the person at the education and care service to whom complaints may be addressed.
- the name and position of the responsible person in charge of the service at any given time.

- the name of the educational leader at the service.
- the contact details of the Regulatory Authority
- if applicable, a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service.
- if applicable, a notice stating that there has been an occurrence of an infectious disease at the premises.

Appendix 1: Family Assistance Law

Family Assistance Law is a broad term that encompasses the following legislation:

[*A New Tax System \(Family Assistance\) Act 1999*](#)

[*A New Tax System \(Family Assistance\) \(Administration\) Act 1999*](#)

[*Child Care Subsidy Minister's Rules 2017*](#) (Minister's Rules)

[*Child Care Subsidy Secretary's Rules 2017*](#) (Secretary's Rules)

Any other instruments (including regulations) made under the [*A New Tax System \(Family Assistance\) Act 1999*](#) and the [*A New Tax System \(Family Assistance\) \(Administration\) Act 1999*](#)

Schedules 5 and 6 to the [*A New Tax System \(Family Assistance and Related Measures\) Act 2000*](#).

Appendix 2: ACECQA graphic image



*For preschool programs provided by a school, the service should keep child attendance records in accordance with their state education law or department policy.



https://www.acecqa.gov.au/sites/default/files/acecqa/files/NQF/Record_keeping_A4.pdf

SOURCE

Australian Government Department of Education Skills and Employment Child Care Provider Handbook

<https://www.education.gov.au/child-care-provider-handbook-0>

Australian Legal Information Institute: www.austlii.edu.au

Australian Taxation Office: www.ato.gov.au

Community Early Learning Australia: www.cela.org.au

Department of Community Services: www.community.nsw.gov.au

Child Care Subsidy Secretary's Rules 2017.

Department of the Officer of the Privacy Commissioner: www.privacy.gov.au

Early Childhood Australia: www.earlychildhoodaustralia.org.au

Education and Care National Regulations. (2011).

Education and Care Services National Law Act 2010. (Amended 2018).

Karen Kearns. (2017). *The Business of Childcare* (4th Ed.).

NSW Office of the Children's Guardian: www.kidsguardian.nsw.gov.au

Privacy Act 1988.

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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RELIEF STAFF POLICY

Our Vacation Care Service aims to maintain continuity of education and care and abide by Education and Care National Regulations and National Quality Standard by employing quality relief staff to replace permanent staff on a short-term basis when necessary. We ensure our Vacation Care Service meets or exceeds the minimum educator to child ratios as mandated in National Law to ensure adequate supervision is maintained and educators provide quality education and care in a healthy and safe environment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
10	Meaning of actively working towards a qualification
82	Tobacco, drug and alcohol-free environment
120	Educators who are under the age of 18 to be supervised
123	Educator to child ratios – centre based services
135	Illness or absence of early childhood teacher or suitably qualified person
145	Staff Records
149	Volunteers and Students

151	Record of Educators working directly with children
168	Policies and Procedures

RELATED POLICIES

Code of Conduct Policy	Interactions with Children Families and Staff Policy
Child Protection Policy	Privacy and confidentiality policy
Child Safe Environment Policy	Recruitment Policy
Enrolment policy	Respect for Children Policy
	Staffing Arrangements Policy

SCOPE

This policy applies to management, staff including casual staff of the Vacation Care Service.

PURPOSE

Our Vacation Care Service is committed to be a child safe Early Education and Care Service and uphold the 10 Child Safe Standards as recommended by the National Office for Child Safety. Our recruitment and screening processes for permanent and relief staff play a vital role in protecting children from harm.

IMPLEMENTATION

- Potential relief staff will be required to attend an interview with management to ensure they are a fit and proper person and hold the required ACECQA approved qualifications for the particular roles within the service or be defined as a ‘suitably qualified person’ for the position
 - current Working with Children Check; Vulnerable Person check or Police/Criminal Check (as per state/territory requirements)
 - any other required qualification- (CPR, First Aid, approved asthma management training, approved anaphylaxis management training, approved child protection training)
- The interview process will include management checking references to ensure the applicant is a ‘fit and proper person’ and verify their Working with Children Check (WWCC); Vulnerable Person Check or Police/Criminal Check

- Relief staff will be placed on the casual list and invited to the Vacation Care Service for an orientation prior to commencing any work.

ORIENTATION

Relief staff member are required to undergo a full induction and orientation into the Vacation Care Service to ensure they have a clear understanding of:

- the Service's policies and procedures
- Code of Conduct
- Child Safe Standards
- sign in and out processes
- emergency evacuation procedure
- service amenities
- children's medical and/or dietary requirements and conditions
- the Service's program and routine
- their roles and responsibilities (including mandatory reporting and reportable conduct scheme)
- supervision requirements
- behaviour guidance strategies implemented
- privacy and confidentiality requirements
- Work, Health and Safety

RELIEF STAFF INDUCTION PACK

Relief staff will be issued with an induction pack prior to commencing employment, which will contain:

- staff handbook
- Service philosophy
- job description
- employment contract
- code of Conduct
- copy of the Early Childhood Australia Code of Ethics
- staff detail form
- employee Information form

- immunisation information

SERVICE REQUIREMENTS

Prior to relief staff commencing at the OSHC Service, management must be provided with the following information:

- proof of minimum educational qualification [check your state/territory requirements]
- evidence of completed professional training in:
 - CPR
 - First Aid certificate
 - approved Emergency asthma management training
 - approved emergency anaphylaxis management training,
 - approved Child Protection training (where applicable)
- Working with Children Check number and date of expiry; Vulnerable Persons Check number and date of expiry or Criminal History/Police Check- number and date of expiry.
- banking details for direct deposit wage payment
- signed employment contract and job description
- completed Tax File Declaration form
- superannuation details
- emergency contact details
- medical conditions notification

EMPLOYMENT COMMENCEMENT

- It is a requirement that relief staff arrive 10 minutes prior to their shift to ensure they have adequate time to place their belongings in an allocated locker, read any staff communication, sign on, and be up to date with important information that is relevant and necessary for the day.
- Relief staff members are to follow the directions of the Educational Leader/Responsible Person.
- Under the guidance of Educational Leader or Responsible person, relief staff members are to introduce themselves to families, explain their position within the OSHC Service, inform parents who they are replacing and how long they expect to be placed at the Service.

- All relief staff members are to abide by confidentiality and privacy legislation in regard to staff, management, children and families within their care. They are to treat any information shared with them professionally and sensitively.
- In conjunction with all permanent staff members, relief staff are requested to be mindful of the time taken for breaks and return promptly to minimise any disruption to the set routine and/or ratio requirements.
- It is advised that all staff members, whether relief or permanent, look after their health and keep their immunisations up to date.
- The OSHC Service will aim to maintain a register of relief staff members that are familiar to the families and children, and familiar with the policies and program to ensure consistency for children, families, and the Service.

SERVICE DRESS CODE

Relief staff must ensure they maintain a professional image at all times. Staff are to be clean and tidy at all times with no offensive or controversial clothing to be worn.

Pants/Shorts

- tailored black pants are to be worn
- track pants and jeans are unacceptable to wear at our Service
- shorts and shirts may be worn at an acceptable length, which is considered to be two inches above the knee. Clothing shorter than this is not considered to be acceptable.

Tops

- in maintaining the professional image of our Service, staff need to consider the suitability of tops when deciding what to wear
- T-shirts must cover the shoulders
- singlets, midriffs and strapless tops are inappropriate and therefore will not be accepted in the work environment. If it is deemed that a staff member's top is too revealing or inappropriate for wearing around children and families, they will be asked to return home to change. The staff member will not be paid for the time taken to remedy the clothing situation.

Footwear

- educators must wear enclosed shoes at all times
- enclosed shoes are preferred for all other staff
- thongs are not appropriate dress and are considered dangerous footwear in the workplace.

Sun Safety

- all staff are required to wear a hat when participating in outdoor activities (as an example to children, for your own protection, and to comply with legislation)
- staff will be required to wear a wide brimmed hat (no caps)
- staff will be provided with sunscreen for use
- staff may wear sunglasses in the outdoor environment
- enclosed shoes are to remain on at all times.

ALCOHOL, TABACCO AND OTHER DRUGS

- staff members are not permitted to consume alcohol, tobacco, or other drugs whilst on the premises of a children's service. (Reg: 82)
- staff are not to offer or supply alcohol, tobacco or other drugs to any person at the Service.
- staff are not to obtain alcohol, tobacco or other drugs from any person at the Service
- staff who are under the influence of alcohol or drugs will not be allowed to remain on the Service premises
- any breach of these conditions will result in disciplinary action
- staff who use prescription medication are asked to discuss the possible side effects of these drugs with management to ensure that the staff member and children remain safe at all times.
- relief staff are not permitted to administer prescription medication to children unless approved by management.

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Fair Work: <https://www.fairwork.gov.au/employee-entitlements/types-of-employees/casual-part-time-and-full-time>

Guide to the National Quality Framework. (2017). (Amended 2020).

Guide to the National Quality Standard. (2017).

Karen Kearns. (2017). *The Business of Childcare* (4th Ed.).
Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANAUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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WRITING, REVIEWING & MAINTAINING POLICIES POLICY

While it is important to have policies and procedures in an Out of School Hours Care Service, it is equally important that the policies are regularly reviewed, and amendments made to cater for changes in legislation and researched best practice, and changes to service procedures that aim to support ongoing quality improvement.

Engagement in regular review of policies and procedures ensure that they align with quality practice within the Service and are responsive to feedback identified through the service's risk management and quality improvement systems. Guide to National Quality Framework, 2017 (amended 2020).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

31	Conditions on service approval insurance
55-56	Quality Improvement Plan
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

PURPOSE

To ensure compliance with the National Quality Framework, our Vacation Care Service will review our policies and procedures on an annual basis, or more frequently if required due to changes having occurred within the Service, or if considered best practice in respect of current research. We aim to work in collaboration with our educators and families, gathering feedback when updating our policies and procedures to ensure that the needs of children being educated and cared for are always being met.

SCOPE

This policy applies to children, families, staff, management and visitors of the Vacation Care Service.

IMPLEMENTATION

Policies and procedures are an integral part of the documentation required to meet legislative requirements for all early childhood education and care services. Policies and procedures clearly outline the processes all staff employed by a service will follow and assist all staff to understand their roles and responsibilities. They ensure a consistent approach and embedded practice across all operations and practices of a service and help to inform families how the service operates.

MANAGEMENT WILL ENSURE:

- our policies and procedures are underpinned by the *My Time Our Place Framework* and ECA Code of Ethics and address the Education and Care Services National Law and National Regulations, National Quality Standard and other state/territory laws as applicable
- all policies and procedures will be made available for families and educators to view at all times
- all policies developed will be made in consultation with management, staff and families of children attending the Service
- our educators and staff will ensure that all policies and procedures are reviewed as per the document review routine, or more often if required (e.g. due to changes in regulations, legislation, and/or Vacation Care Service practices). This gives both families and educators opportunities to suggest aspects or areas that may need to be modified or improved.
- each document has a recommended review date stated in the 'Review' section of the policy document and changes are clearly made through version control
- educators, staff, and family members are invited to have input into the policies and procedures at any time of the year, not only at the scheduled review time for a particular policy
- policies include clear, simple statements and are presented in a logical format
- procedures include detailed descriptions of how each policy will be implemented within the service and provide step-by-step instructions to ensure each staff member or any other person can follow in a particular circumstance
- all policies will be signed, sourced/referenced, and dated at each review and educators and other staff will continuously seek out relevant new information and research to be included in policies in order to provide the best possible environment and practices
- policies will be informed by relevant authorities to ensure best practice- eg: KidSafe, Cancer Council, Red Nose
- all stakeholders at the Vacation Care Service must be informed of any changes to policies. This will occur in writing and be provided to families, educators, other staff, management and any other applicable individuals
- families will have the opportunity to revise and help plan policies via Newsletters and specific letters to families discussing the policy or a draft of the proposed policy and given the opportunity to respond

- all policies that are being either reviewed or developed will be displayed in the Vacation Care Service's foyer, so that all stakeholders are always aware of progress and can be involved in the review.

PROCEDURE FOR REVIEWING A POLICY

A policy has been flagged for review due to routine reflection, an incident, feedback, or the 'continuous improvement' process, including the policy review calendar.

- All major stakeholders are invited to review the policy and suggest amendments (this can be done via committee meeting, email, newsletters, and/or a display in the Service's foyer).
- A time frame of 14 days is given for all stakeholders to present information or feedback for the policy after which management will collate all suggestions and create a draft policy.
- The draft policy is made available to all major stakeholders, again via committee meeting, email, newsletters, and/or a display in the Service.
- A time frame of 7 days is given for stakeholders to respond to provide further suggestions/feedback. If the policy draft is agreed upon by all (no objections or further recommendations are received), the draft is reposted as the reviewed and/or amended Service's Policy.
- The Service encourages a holistic approach to policies. Whilst a schedule is maintained to ensure all policies are reviewed regularly, the Service may revise and if necessary, amend unscheduled policies based on the needs of the Service, particularly if there is an incident, regulation change, or feedback received.
- All policies will use information from reliable sources and provide dated references.

ACCORDANCE WITH THE REGULATIONS

Out of School Hour Care services must have policies and procedures in place relating to the categories listed in Regulation 168 of the National Regulations.

Services may have additional policies and procedures dependent upon their unique situation and operation requirements.

The Vacation Care Service must ensure that parents of children enrolled at the Service are notified at least 14 days before making any change to a policy or procedure that may have a significant impact on:

- the Service's provision of education and care to any child enrolled at the service; or
- the family's ability to utilise the Service.

The Vacation Care Service must ensure that parents of children enrolled at the Service are notified at least **14** days before making any change that will affect the fees charged or the way in which fees are collected.

If the Vacation Care Service considers that the notice period would pose a risk to the safety, health or wellbeing of any child enrolled at the Service, the approved provider must ensure that parents of children enrolled at the Service are notified as soon as practicable after making a change.

The Vacation Care Service must ensure that copies of the current policies and procedures are available for inspection at the Service upon request.

SOURCE

[Education and Care Services National Regulations](#). (2011).
 Guide to the National Quality Framework. (2017). (Amended 2020).
 Kearns, K. (2017). *The Business of Childcare* (4th Ed.).
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED: JANUARY 2021	NEXT REVIEW DATE: JANUARY 2022
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