



Willi Wag Tails Childcare Service Policies Reviewed October 2018

Executive Summary

Willi Wag Tails Childcare Centre's policies and procedures are the working guidelines in which we follow and work by. It is important that the staff know the policies and procedures, and refer to them on a regular basis.

It is important that the parents understand the policies in which we work by and refer to, this is done by the policies being available to them in a lever arch file.

Policies and procedures are reviewed on an annual basis or when new information becomes available or applicable. When reviewing, we keep in mind local issues, follow current recommended practices and meet legal requirements. The reviewing process has many steps; they include information and ideas from management, staff and parents. Policies and procedures are discussed at staff meetings and parent committee meetings.

All policies and procedures in the centre main file are referenced and dated on the year in which they were developed, reviewed and updated.

All of the Centre's policies and procedures, Centre's information and other pamphlets can be translated and provided in home languages and relevant resource people can be sought to provide appropriate support, to families where it is necessary.

Willi Wag Tails Childcare Centre aims to provide the best quality care for all children and families that access the centre, this is achievable through adhering to the Centre's policies and procedures.

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Policies sourced from PSC Alliance

www.pscalliance.org.au

1.1 Healthy Eating and Food Handling Policy

Rationale and Policy Considerations

In order for children to grow and develop to their full potential it is beneficial for them to be eating nutritious and appropriate food for their age. At Willi Wag Tails we aim to create a safe and healthy environment for children, and part of this is to encourage a healthy diet in children.

Children are especially prone to food borne illnesses because their immune systems are still developing and they cannot fight infections as well as adults can. The main causes of food borne illnesses are inadequate cooking, improper holding temperatures, contaminated equipment, unsafe food sources and poor personal hygiene.

The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisors and coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection. Willi Wag Tails Childcare Service will obtain professional advice and guidance through initiatives such as Eat Smart, Play Smart, the Australian Healthy Eating Guide, the Dietary Guidelines for Children and Adolescents in Australia, and the Australian Government's Healthy Eating and Physical Activity Guidelines for Early Childhood settings, and professional bodies such as Nutrition Australia and Food Standards Australia and New Zealand.

Legislation and Government Requirements

- Food Act 2008
- Food Standards Australia New Zealand Act 1991
- Education and Care Services National Regulations 2012
- Child Care Services (Child Care) Regulations 2006

Children's Needs

- Balanced diet
- Food preferences to be respected
- Food allergies to be responded to
- Special diets required (where appropriate)
- Appetising, colourful food
- Opportunities to try new foods
- Regular meal times
- Satisfaction of hunger between meals
- Children allowed to eat at their own pace

Families' Needs

- Religious and cultural needs, practices and lifestyles are respected
- Input into what their children eat

Educator/Staff Needs

- Appropriate resources and facilities to provide for each child's daily nutritional needs
- Guidelines for food handlers (where required)

Management Needs

Be informed of any issues in relation to food provision that may impact on the management of the service

National Quality Framework

Education and Care Services National Regulations 77-80; 90-92

National Quality Standard for Early Childhood Education and Care (2018) – Elements 2.2.1, 3.1.1, 3.1.2, 4.2.1, 6.1.2, 6.2.1

Early Years Learning Framework for Australia – Practice: Responsiveness to children, Intentional teaching; Cultural competence – Outcomes 1.2, 2.4, 3.2

Policy Statement

Meal and snack times will provide positive learning experiences for children who will be encouraged to develop healthy eating habits. Parents/Guardians will be consulted and asked to share family and multicultural value and experiences to enrich the variety and enjoyment of food planned to meet each child's daily nutritional needs.

The service will strictly follow recommended safe food storage and preparation guidelines contained within the Dietary Guidelines for Children and Adolescents in Australia to ensure children's protection from food borne illnesses.

Strategies for Policy Implementation

Provision of healthy nutritious snacks and meals

- Food will be prepared, stored and served hygienically. Educators will follow the service's procedures for the safe storage and heating of food and drink.
- Food preparation facilities will be maintained in a hygienic condition in accordance with the Health, Hygiene and Infection Control policy
- The service will ensure it meets all requirements for food handling premises according to WA legislation
- Snack and meal times will be treated as a social occasion. Educators will sit with the children and interact with them to encourage healthy eating habits and an application of a variety of foods. Children will be assisted where required, but will be encouraged to be independent and to help themselves wherever appropriate.
- Water will always be readily available and will be regularly offered to children
- Snack and meal times will be set to a regular schedule, but individual needs will be accommodated and children who are still hungry will be offered small nutritionally appropriate snacks
- Children will not be required to eat food that they do not like, or eat more than they want. However, they will be encouraged to try new things.
- The provision or denial of food will never be used as any form of punishment
- The importance of good healthy food, and hygienic and safe food handling and storage practices will be discussed with children as part of their daily program
- All children and educators/staff will wash their hands with soap and running water and dry well prior to preparing, serving or eating food.
- An Educator can decide not to offer certain items out of a lunch box which does not meet nutritional guidelines. I.e, mars bars, juice box etc.

Feeding Babies

- Babies are always fed individually by educators
- The service will discuss choices regarding breast and bottle feeding with families, will support families who choose to breastfeed their child while they are at the service by providing a comfortable and private place for breastfeeding, and will facilitate the safe storage and heating of breast milk for families who wish to leave expressed feeds at the service for their baby
- Educators will document bottle feed amounts to monitor fluid input/output; especially when the weather is warm and young children are at risk of dehydration. Educators will record the information in a daily record for each child and verbalise the information to parents on arrival.
- Baby bottle should be heated by placing the bottle in warm water and always heat-testing to ensure the milk is warm but not hot before feeding an infant. Microwaves are not to be used for heating baby bottles
- Introducing food and/or solids to babies and toddlers will be done in consultation with families, and in line with recognised nutritional guidelines
- Careful consideration will be given to reducing the risk of choking when choosing foods for young children

Consulting and communicating with families

- Families will be consulted about their child's individual needs and likes and dislikes in relation to food and any culturally appropriate food needs
- Families will be encouraged to share aspects of their family life and culture in relation to mealtimes
- Children will be encouraged to try new foods but will never be forced to eat. Their food likes and dislikes and the family's religious and cultural beliefs or family lifestyle ie: vegetarianism will always be respected. The service will discuss with families which mealtime practices that can be accommodated within the service and those which cannot due to health or hygiene concerns
- Where children are on special diets the parents/guardians will be asked to provide a list of suitable foods and their child's food preferences. A Special Diet Record will be completed by the parent/guardian detailing which foods the child must avoid. Medical confirmation of a child's allergies will be required. Refer also to the services Anaphylaxis Policy and the Medications and Medical Conditions Policy
- Parents/guardians of infants and toddlers will be advised of their child's food intake each day. Parents/guardians of older children will be advised as appropriate.
- Information on nutrition, age appropriate diet, food handling and storage will be displayed at the service and available to parents/guardians.
- Where families provide for the nutritional requirements of their child, they will be encouraged to follow current recommendations from recognised authorities. The service will provide information for families on recommended nutritional intake for their child.
- Food provided by families that include meat, chicken and/or dairy foods are to be refrigerated until ready for consumption.

Dental Health

- The service liaises with families to establish dental health practices that are workable at home and at the service
- The service systematically incorporates information on dental health practices into the children's program, including tooth brushing, 'tooth friendly' snacks, and going to the dentist.

- The service will encourage the drinking of water to quench thirst
- Children will be encouraged to rinse their mouths with water to remove food debris after every meal or snack
- Tooth brushing is the only effective means of removing bacterial plaque from the teeth and gums. Information on effective tooth brushing techniques will be provided to families.
- Staff role model good dental hygiene practices
- Information on dental care principles will be displayed in the reception area and drawn to the attention of all families on a regular basis
- The service will provide information to all families on dental health principles relating to different age groups of children, as recommended by recognised health and dental health authorities.

Procedures

- Hand washing procedure (as displayed in centre)
- Procedure for the safe storage and heating of food and drink (as displayed in kitchen)
- Procedure for cleaning toys, equipment, surfaces, floors etc
- Special Diet record
- Standard hygiene procedure

Links to other policies

- Anaphylaxis
- Health, hygiene and infection control
- Maintenance of a safe environment
- Medication and medical conditions
- Occupational Safety and Health

Sources

Australian Government Healthy Eating and Physical Activity Guidelines for Early Childhood Settings (sourced June 2012) from <http://www.health.gov.au/internet/main/publishing.nsf/content/healthy-eating-guidelines>

Children Youth and Women’s Health Service – Parenting and Child Health – Food Safety (sourced June 2012) from <http://www.cyh.com/HealthTopics/HealthTopicDetails.aspx?p=114&np=303&id=1618>

Children’s Youth and Women’s Health Service – Parenting and Child Health – Teeth – Dental Care for children (sourced June 2012) from <http://www.cyh.com/HealthTopics/HealthTopicDetails.aspx?p=114&np=301&id=2519>

Diabetes Australia website – information about living with diabetes (sourced June 2012) from <http://www.diabetesaustralia.com.au/>

Food Standards Australia New Zealand – food standards, consumer information, fact sheets (sourced June 2012) from <http://www.foodstandards.gov.au> ; **Fresh for Kids website – information on nutrition and recipes** (sourced June 2012) from <http://www.freshforkids.com.au/index2.html>

Healthy Kids Association – information on nutrition and healthy eating (sourced June 2012) from <http://www.healthy-kids.com.au/>

Heart Foundation – Eat Smart Play Smart (sourced June 2012) from
http://www.heartfoundation.org.au/Healthy_Living/Healthy_Kids/Eat_Smart_Play_Smart/Pages/default.aspx

National Health and Medical Research Council – Dietary Guidelines for Children and Adolescents in Australia (sourced June 2012) from
http://www.nhmrc.gov.au/files_nhmrc/file/publications/synopses/n34.pdf

National Health and Medical Research Council – Staying Healthy in Childcare – 4th Edition 2005 – Food Safety (sourced June 2012) from
http://www.nhmrc.gov.au/files_nhmrc/file/publications/synopses/ch43.pdf

Nutrition Australia – resources and fact sheets (sourced June 2012) from
<http://www.nutritionaustralia.org/national/resources>

SIDS and Kids – Information statement – breast feeding (sourced June 2012) from
http://www.sidsandkids.org/wp-content/uploads/Information-Statement-BF-2009_Cit-sug.pdf

The Australian Healthy Eating Guide (sourced June 2012) from
[http://www.health.gov.au/internet/main/publishing.nsf/content/E384CFA588B74377CA256F190004059B/\\$File/fd-cons.pdf](http://www.health.gov.au/internet/main/publishing.nsf/content/E384CFA588B74377CA256F190004059B/$File/fd-cons.pdf)

Policy Creation date: June 2012
Policy Review Date: Oct 2018

1.2 Sun Protection

Rationale and Policy Considerations

All children have the right to experience quality care in an environment which provides for their health and safety. The service has a duty of care which extends to ensuring that appropriate sun protection policies and practices are implemented to adequately protect children, educators/staff and visitors from UV radiation from the sun. The Cancer Council advises that one out of two Australians will develop some form of skin cancer during their lifetime, which childhood exposure being an important risk factor. Young children have very little skin pigment (melanin) to protect them from sun exposure. This means if a child gets too much sun, their skin can be permanently damaged resulting in moles, freckles, wrinkles, sunspots and even skin cancer later in life. It is widely understood that the risk of developing skin cancer is directly related to the intensity and duration of sun exposure. Research now indicates that childhood sun exposure is an important contributing factor to the development of skin cancer later in life, with the majority of damage occurring in the first twenty years of life.

The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection.

Employers and employees have a responsibility to reduce the risk of all types of injuries and risks to health in the workplace. UV radiation exposure from the sun is a hazard, and as such, employers and employees both have roles and responsibilities to ensure appropriate measures are taken to prevent over-exposure.

Legislation and Government Requirements

Federal and State Occupational and Health Safety Legislation
Education and Care Services National Law Act 2010
Education and Care Services National Regulations
National Quality Standard for Early Childhood Education and Care (2018)

Children's Needs

- Individual allergies (in relation to the use of sunscreen products)
- Cultural differences
- Other special needs that may need to be taken into account regarding sunscreen application and outdoor play environment (shade provision) ie: babies special needs
- Encouraging the development of competent learners as children are educated from an early age about the need for sun protection

Families' Needs

Their children will be protected from the harmful effects of exposure to UV radiation from the sun and their children will not be discriminated against regarding their cultural norms.

Educator/Staff Needs

- Education about sun protection strategies
- Use of effective shade
- Appropriate clothing (uniforms/hats)

- Application of sunscreen
- Wearing of sunglasses
- Hygiene considerations
- Importance of role modelling sun-smart behaviours

Management Needs

To be informed and educated in regards to requirements and legislation; to be up to date with current trends; to be assured that the service is meeting legislative requirements and providing best practice.

National Quality Framework

Education and Care Services National Regulations (2012)- 113; 114; 168(2)(a)

National Quality Standard for Early Childhood Education and Care (2018) – 2.1.2; 2.1.3; 2.2.2; 5.1.2

Early Years Learning Framework for Australia- Practices: 1- Holistic Approaches, 4- Intentional Teaching, 5- Learning environment. LO- 1.2, 3.2.

Policy Statement

The education and care service aims to ensure that all children, employees and visitors attending the service are protected from skin and eye damage caused by the harmful UV radiation from the sun. The Cancer Council advises that damage to the skin begins with the first exposure to sunlight, and builds up year and after year, leading to premature ageing of the skin and increased risk of skin cancer developing. The service will therefore become a “Sun Smart Centre” within the Cancer Council program and promote the importance of sun protection for young children in particular.

Strategies for Policy Implementation

Hats

- The service will require children and employees to wear hats that protect the face, neck and ears whenever they are outside, ie: legionnaire style or broad brimmed hats
- Due to the risk of children becoming entangled in hat cords and choking, the service recommends that cords are removed from hats
- Children who do not have their hats with them will be asked to play in an area protected from the sun

Clothing

The service recommends that children and staff wear loose fitting clothing that protect as much of the skin as possible for outdoor activities. Shirts that cover the shoulders and have collars and sleeves that are at least elbow length, and longer style skirts and shorts are most suitable.

Shade and UV index

- Children will be encouraged to use available areas of shade for outdoor play activity. Planned outdoor play and activities will be set up in shady areas. Areas for focused play ie: sandpits, fixed play equipment, will be provided with shade throughout the year. Play areas for babies will be provided with shade all year round.
- Management will ensure there are a sufficient number of shelters and trees providing shade in the service grounds

- Outdoor activities will be scheduled before 10am and after 3pm wherever possible between the months of November and March.
- Outdoor play (unrestricted) may take place between 10am and 3pm provided the UV index is low (<3). The UV index forecast is available at the Bureau of Meteorology website at <http://www.bom.gov.au/australia/uv/index.shtml> and is also reported in some newspaper, radio and television weather reports. If the UV index is moderate (3) or above, appropriate sun protection measures need to be undertaken by all educators/staff and children when outdoors.

Maintaining Hydration levels

- Infants and children's body/water ratio mass is significantly different than from adults, therefore the risk for dehydration from outdoor play and hot weather is high and can be dangerous
- Water will be offered to children throughout the day regardless of indoor or outdoor play settings
- Children are encouraged to bring in water bottles from home and are encouraged to access water to drink throughout the day.
- Cooled boiled water may be offered to infants and young children after bottle feeds if they show signs of continued thirst
- Educators will monitor and document the input/output of infants and young children's fluids

Sunscreen

- SPF30+ broad spectrum water resistant sunscreen will be provided for educators/staff and children's use as necessary. Sunscreen will be applied liberally at least 20 minutes before going outside and not rubbed in. It should be applied every two hours or more frequently if it is likely to have been washed or wiped off. It is recommended that SPF30+ sunscreen for sensitive skin be provided for use by babies and young children aged 0-5 years.
- Any school age child attending care will be encouraged to apply sunscreen themselves, under appropriate supervision to ensure effective application
- Educators will apply sunscreen to infants and younger children (0-5 years) as appropriate
- Parents/Guardians will be encouraged to apply sunscreen for their child/children prior to drop off
- For babies under the age of 12 months old, the educators will keep them fully covered or in full shade whilst outside and sunscreen only applied to areas of skin that cannot be covered by clothing. The service will consult with the parents/guardians about their preference for the baby. A patch test is recommended to ensure no allergy exists before sunscreen is applied.

Sun protection information and role modelling

- Employees and visitors to the service will act as role models by:
 - Wearing appropriate hats, sunglasses and protective clothing when outdoors
 - Using SPF30+ broad spectrum water resistant sunscreen for skin protection
 - Seeking shade whenever possible
 - Looking after their skin and avoiding sunburn
- Learning about skin and ways to protect skin from UV radiation from the sun will be incorporated into programmed activities
- The Sun Protection Policy will be reinforced in a positive way through family newsletters, noticeboards and meetings and will be made available in writing to families on request.
- Educators/staff and families will be provided with educational material on sun protection

- Management will keep themselves informed about current trends, recommendations and legislation that impacts on the Sun Protection Policy by participating in industry networking groups, maintaining regular contact with relevant resource agencies, and providing opportunities for educators/staff to train in current practices
- When enrolling their child, parents/guardians will be:
 - Informed of the Sun Protection Policy (and extract is in the parent handbook)
 - Asked to provide SPF30+ broad spectrum water resistant sunscreen for their child's use (if providing own and not using centre's)
 - Required to give authority and directive for educators to administer sunscreen to their child;
 - Encouraged to practice sun protective behaviours themselves

Procedures

- Duty of care checklist
- Educator/staff Handbook
- First Aid box checklist
- Procedure for a child without a hat
- Risk Assessment for excursions

Links to other policies

- Accidents, Emergencies and First Aid
- Educator/staff dress code (in Educator Handbook)
- Health, Hygiene and Infection Control
- Illness
- Medication and medical conditions
- Occupational Safety and Health

Sources

Cancer Council Australia – state and territory contact details (sourced June 2012), from <http://www.cancer.org.au/ContactUs/StateTerritory.htm>

Cancer Council Western Australia – Sun Smart Centres (sourced June 2012) from <http://www.cancerwa.asn.au/prevention/sunsmart/sunsmartchildcare/>

National Health and Medical Research Council – *Staying Healthy in Childcare* – 4th Edition (2005) (sourced June 2012) from http://www.nhmrc.gov.au/files_nhmrc/file/publications/synopses/ch43.pdf

Policy Creation date: June 2012

Policy Review Date: Oct 2018

1.3 Water Safety

Willi Wag Tails Childcare Centre will ensure that any enrolled child engaged in water play at the water trolley will be directly supervised by at least one dedicated staff member who has:

- a) Reached the age of 18 years OR
- b) If under the age of 18 years has a current first aid certificate or is a qualified rescuer

The water trolley will be stored in such a manner that it will not collect water and is not accessible to children unless they are suitably supervised.

Education and Care Services National Regulations- 115; 168(2(a)(iii), (h)

National Quality Standard for Early Childhood Education and Care (2018) – 2.1.2; 2.2.1; 2.2.2; 3.1.1; 3.1.2; 3.2.2; 4.1.1

Early Years Learning Framework- Principles: Ongoing learning and reflective practice. LO: 2.4, 5.3

1.4 Accidents, Emergencies and First Aid

Rationale and Policy Considerations

All children, employees and contractors within the service have a right to a safe environment that is free from hazards that may cause harm or injury. The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection. The service has a duty of care to respond effectively to accidents and emergencies that occur at the service

Legislation and Government Requirements

Federal and State Work, Health and Safety Legislation

Education and Care Services National Law Act 2010

Education and Care Services National Regulations

Children's Needs

- A safe environment in which to play and learn.
- Appropriate care in the event of an accident, and protection from disasters.

Families' Needs

To feel confident that their child's safety is being assured, and that the service is a safe place.

Educator/Staff Needs

- A safe workplace;
- Appropriate training in first aid (including anaphylaxis, emergency asthma management) and cardiopulmonary resuscitation (CPR);
- Well planned and practised emergency/evacuation procedures;
- Appropriate allocation of resources to maintain a safe environment.

Management Needs

To minimise legal liability of the service and ensure safety issues are brought to their attention.

National Quality Framework

Education and Care Services National Regulations- 85; 86; 87; 89(1)

National Quality Standard for Early Childhood Education and Care (2011) – Elements 2.2.1; 2.2.2; 2.2.3; 3.1.1; 3.1.2

Early Years Learning Framework for Australia- Practices: 4- Intentional Teaching; 7- Continuity of learning and transitions. LO- 1.1, 3.2, 4.3

Policy Statement

Willi Wag Tails Childcare Centre aims to provide a safe environment in which children may play in and explore their world free from harm. In the event of an accident appropriate first aid and/or CPR will be applied by trained staff. If an emergency or natural disaster occurs at the service the children and educators/staff will be well practised in the required procedures to ensure that as far as possible the safety and well-being of each person present.

Strategies for Policy Implementation

- The Emergency Evacuation floor plan and instruction will be clearly displayed near the main entrance and exit in each room, to be followed by the nominated supervisor or educator/staff member in the event of fire, natural disaster or other emergency.
- A risk assessment to identify potential emergencies that are relevant to the service will be conducted by the approved provider/nominated supervisor/coordinator
- Families will be provided with a copy of the emergency evacuation procedures on request
- Each educator/staff member will be provided with a copy of the emergency procedures

Emergency Drills

- Safety drills involving educators/staff and children will be regularly practised randomly without warning and at different times of the day
- A record of each drill of emergency procedures will be made on an Evaluation of Emergency Evacuation Drills form, and retained for a period of 3 years from the day on which the record was made

Evacuation out of the Centre

- Evacuation out of the service may be for any reason including but not limited to a fire, snake, unwelcome visitor, intruder, or earthquake
- The service's evacuation plan will:
 - Determine a safe assembly area, away from the building and access areas for emergency services, with its own escape route
 - A second stage assembly area will be identified in the event that the first assembly area becomes unsafe
 - Unobstructed routes for leaving the building which are suitable to the ages and abilities of the children (with special consideration to be given to the evacuation of children with disabilities eg: injured child who is unable to evacuate themselves – these individuals will be treated the same as babies – evacuated in the evacuation cot).
 - The setting up of an emergency pack which is stored in an easily accessible place and includes items such as blankets, first aid kit, spare nappies etc
 - Nominating who will collect the attendance roll, parents/guardians emergency contact numbers and educator/staff roster and once at the assembly area check the roll and roster to ensure that all children and educators/staff are present
 - Maintaining a current list of emergency services contact number and nominating who will be responsible for phoning the relevant service
 - Determining who will check the building is empty and close all doors and windows to contain the spread of fire
 - How the children will be supervised at the assembly area

Evacuation into the Centre

- Evacuation into the service may be for a variety of reasons including but not limited to bee swarm, rioting, snake, threatening person
- Where a situation arises which requires the bringing of the children into the service in order to secure their safety, the nominated supervisor/educators/staff members will

- Alert all other educators/staff members of the need to bring the children into the service, using an agreed signal ie: whistle
- Gather children together into the building, in a safe and non-hurried manner and collect attendance roll, parent's emergency contact phone numbers, and educator/staff roster. Once everyone is together, the nominated supervisor or an educator/staff member will check the roll and roster to ensure that all educators/staff and children are present
- Educators/staff will quietly and quickly walk around and lock doors and windows to secure the building
- The nominated supervisor or an educator/staff member will contact the police and advise them of the situation, including information about any missing children or educators/staff

Lunch Period Evacuations

- During lunch times the service will ensure that any additional educators/staff that are on the premises assist with the evacuation of children
- On hearing the alarm, any educator/staff member not directly caring for children at the time of the emergency, which could include the nominated supervisor, food coordinator, administration assistant, or educators/staff on their lunch break but still on the premises, will check each room to see who requires assistance to evacuate children safely from the premises
- Educators/staff will check those rooms closest to the potential threat and where children or babies are known to be resting first
- Other adults on the premises at the time of the emergency, such as a parent or tradesperson, may be asked to assist in the evacuation if required.

Fire

- The service will comply with any relevant fire safety requirements of the WA Department of Fire & Emergency Services.
- Fire extinguishers will be installed and maintained in accordance with Australian Standard 2444. Educators/staff will be instructed in the operation of fire extinguishers by authorised trainers. Educators/staff will only attempt to extinguish fires when all of the following is assured:
 - The children have been evacuated from the floor
 - The fire is very small
 - There is no danger to the person who will operate the extinguisher
 - The operator is well trained and confident in the use of the extinguisher
- Smoke detectors will be fitted in accordance with the manufacturer's instructions and will be placed to provide adequate warning of smoke and so that educators/staff will hear the alarm from anywhere within the education and care premises. The approved provider/nominated supervisor/coordinator will ensure that these devices are maintained in working order. A maintenance schedule will be kept to confirm regular checks occur.
- When the emergency services arrive the nominated supervisor or educator/staff member will inform the officer in charge of the nature and location of the emergency and of any missing children and/or educators/staff
- No-one will re-enter the building until advised it is safe to do so by the officer in charge

Lockdown

- Front staff will ask intruder to vacate premises. In the event that this interaction turns hostile, educator will use agreed-upon phrase to notify other staff of lockdown.

- Second staff will quietly gather children, phone, attendance folder and move to safe location in shed, locking door. Staff should then contact shire personnel and request assistance.
- Front staff member should continue to ask intruder to leave, contacting police if necessary.
- Staff and children can exit via shed roller-door if necessary.
- Record incident on emergency form. Report to Regulatory authority and parents.

Critical Incident Management

- Any unwelcome, violent or abusive visitor or intruder (including anyone adversely affected by alcohol or drug) will be calmly asked to leave the service. Refusal to leave will necessitate the nominated supervisor or educator calling the police for the removal of the unwelcome visitor. Educators will not at any time try to physically remove an unwelcome visitor. The service will establish a Critical Incident Management Plan that will isolate children and educators from a violent or abusive visitor or intruder until such time as the police arrive to take control of the situation. This plan will include a warning signal that will alert all educators/staff to the dangers of the situation.

Emergency Procedures

The service will develop procedures for the nominated supervisor/educators/staff to follow to plan or every emergency situation that has been identified through the risk assessment process. These situations may include but are not limited to the following emergencies:

- Fires and/or bushfire
- Lockdown Procedure
- Bomb threats
- Missing child
- Intruders (animal or human)
- Power failures or electrocution
- The involvement of firearms or other weapons
- Structural damage
- Burglary
- Natural disasters, such as flood, thunderstorm or earthquake

The service will seek recommended practices from recognised authorities such as:

- DFES
- WA Police
- St John Ambulance
- Williams Medical Centre or Narrogin/Boddington Hospitals
- State Emergency Services (SES) – Narrogin/Boddington

Accidents

- Parents/Guardians are required to provide written authority (included in the enrolment form) for educators/staff of the service to seek medical attention for their child if required
- When a minor accident occurs at the service, educators who are qualified in first aid will follow the service's Accident Plan:
 - Assess the injury
 - Attend to the injured child and apply first aid

- Check that no-one has come into contact with the injured child's blood or body fluids – require these people to wash any contaminated areas in warm soapy water
- Clean up the spill using disposable gloves if bleeding involved
- Contact the parent/guardian (depending on the nature of the injury). If the parent/guardian is not contacted at the time of the accident, they will be informed about the incident when they arrive to collect their child
- Write full details about the incident and the treatment given on an Accident/Trauma/Illness Report Form, and require the parent to sign this form to confirm their notification of the incident
- When a serious accident which requires more than simple first aid treatment occurs at the service an educator who is qualified in first aid and CPR will:
 - Assess the injury and report to the nominated supervisor/coordinator that an ambulance should be called
 - Provide the child's medical record for the ambulance officer
 - Discuss with the nominated supervisor/coordinator which educator will accompany the child in the ambulance
 - Ensure that any contact with the injured child's blood or body fluids has been appropriately dealt with
 - Complete a full report of the accident detailing the incident and the action taken on an Accident/Illness/Trauma Report Form and require the parent/guardian to sign the form to confirm their notification of the incident
- The nominated supervisor/coordinator/educator will contact the child's parents/guardians or emergency contact person to advise them of the incident and where they may meet their child from the ambulance. Every effort will be made not to panic the parent/guardian at this stage.
- The nominated supervisor/coordinator will arrange for emergency relief educators to attend the service so that an educator can accompany the injured child in the ambulance, or take the child to the Williams Medical Centre or local GP. The remaining children will be kept together until the emergency relief educator has arrived at the service
- The nominated supervisor/coordinator will contact the approved provider to inform them of the incident and the steps taken.
- If there is a death or serious injury of a child whilst the child is in attendance at Willi Wag Tails Childcare service, the nominated supervisor/coordinator will:
 - Contact the approved provider to advise them of the situation and request that they notify the regulatory authority and arrange for trauma counselling for all those who may need it
 - In the event of a child's death, contact the police, who should advise the child's parents/guardians in person and assist them with transport to the service or hospital
 - Contact the parents/guardians of the other children and advise them of an emergency, and request that they arrive and collect their children as soon as they are able. On arrival, parents will be advised of the death, or serious injury of a child and will be given information about trauma counselling for their child if needed
 - At the end of the day, hold a debriefing sessions with all educators/staff and provide information about trauma counselling for those educators/staff who feel they need it
- After a serious incident at the service, educators will comfort children and be aware that some children may have shock reactions to the incident. Educators will do all they can to ensure each child's health and well-being, and will apply appropriate first aid in response to children's shock reactions
- The nominated supervisor/coordinator will notify the service's insurers and provide them with a copy of the Accident/Illness/Trauma Report Form

- The approved provider /nominated supervisor/coordinator will notify the regulatory authority of the death, or injury that results in a child being admitted to hospital, of an enrolled child during a care session, within one working day after the incident occurred.
- All costs incurred in ensuring prompt medical attention for a child will be met by the parent/guardians. The service will provide parents/guardians with information on available insurance cover to insure against these and other accident related costs.
- Accidents which result in death or serious injury to employees must be reported to the appropriate WA occupational safety and health authority.
- The nominated supervisor/coordinator will be responsible for completing an evaluation of all the Accident/Illness/Trauma Reports at the end of each month. This is to be tabled for discussion at educator/staff meetings.

First Aid

- At least one educator with a current approved first aid qualification that is appropriate to children will be on duty at the service at all times children are on the premises
- At least one educators who has undertaken anaphylaxis training will be on duty at the service at all times children are on the premises
- At least one educator who has undertaken emergency asthma management training will be on duty at the service at all times children are on the premises
- At least one fully equipped and properly maintained first aid kit will be kept at the service in a locked cupboard which is out of reach of children but is easily accessed by educators
- The first aid box or cabinet together with someone in charge must also comply with the applicable occupational safety and health legislation
- A cold pack will be kept in the freezer for the treatment of bruises and sprains
- Each first aid kit will be checked regularly using the service's First Aid Box Checklist to ensure it is fully stocked, and that all medications are within the expiry date.
- First Aid will only be administered by qualified first aiders in the event of minor accidents or to stabilise the patient until expert assistance arrives.
- The approved provider will ensure that adequate funds are allocated in each annual budget to ensure that educator's first aid qualifications and emergency asthma and anaphylaxis management training are updated as required.

Procedures

- Accident/Illness/Trauma Report
- Accident/Illness Patterns Evaluation Form
- Critical Incident Management Plan
- Educator/staff Code of Ethics (in Educator Handbook)
- Evaluation of Emergency Evacuation Drill Form
- First Aid Box Checklist
- Procedure for dealing with snakes
- Lockdown procedure

Links to other Policies

- Educator/Staff Dress Code (in Educator Handbook)
- Health/Hygiene and Infection Control
- Maintenance of a safe environment
- Medications and Medical Conditions

- Occupational Safety and Health
- Sun Protection
- Use of Tobacco, Alcohol and other Drugs

Sources

National Health and Medical Research Council – *Staying Healthy in Childcare* – 4th Edition 2005
(sourced June 2012) from www.nhmrc.gov.au/files_nhmrc/publications/attachments/ch43.pdf

Fire Protection Association Australia (FPAA) website (sourced June 2012) – www.fpaa.com.au

St John Ambulance (WA) – First Aid Fact Sheets and First Aid Kits (sourced June 2012) from www.ambulance.net.au

Policy Creation date: June 2012

Policy review date: Oct 2018

1.5 Sleep and Rest Policy

Rationale and Policy Considerations

All children have the right to rest and sleep in an environment which caters for safe sleep and rest practices. The service has a duty of care which extends to ensuring that appropriate sleep environments are produced. The Red Nose Foundation advises that young children, particularly in the first 12 months, are most at risk of Sudden Unexpected Death in Infancy (SUDI). Young children, especially babies, have very little control over their developing bodies which places them at higher risk of SUDI. It is widely understood that children's sleep practices should follow certain guidelines to ensure safety and health is upheld. Research indicates a series of guiding principles that should be adhered to in ECE services.

The *Education and Care Services National Regulations 2012* requires that approved provider/nominated supervisor/coordinators take reasonable steps to ensure that the children's needs for sleep and rest are being met, whilst taking into account age, developmental stage and individual needs.

Employers and employees have a responsibility to provide all children with a safe environment in which to rest, relax and sleep.

Legislation and Government Requirements

Federal and State Occupational and Health Safety Legislation

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's Needs

- Safe and secure rest environment
- Cultural differences
- Other special needs that may need to be taken into account (medical concerns, comforters)
- Supporting children's learning and physical growth by being responsive to children's sleep cues.

Families' Needs

- Children's health and physical development is being supported through the encouragement of rest.
- Families cultural/home practices are respected

Educator/Staff Needs

- Education about safe sleep practices
- Use of effective environments
- Appropriate bedding (beds, cots, sheets, blankets)
- Application of relaxation music
- Temperature control
- Hygiene considerations
- Importance of role modelling rest-conducive behaviours

Management Needs

To be informed and educated in regards to requirements and legislation; to be up to date with current trends; to be assured that the service is meeting legislative requirements and providing best practice.

National Quality Framework

Education and Care Services National Regulations 2012 – 81 (1), (2); 90 (c)(iv); 91; 103 (1); 105; 106 (1), (2); 107 (3)(iv); 168(a)(v)

National Quality Standard for Early Childhood Education and Care and School Age Care (Nov 2010) – Elements 2.1.1; 2.1.2; 2.2.1; 3.1.1; 3.1.2; 5.1.2; 5.2.2; 6.1.2

Early Years Learning Framework for Australia- Principles: 1 Secure, respectful and reciprocal relationships; 3 High expectations and equity. Practices- 2 Responsiveness to children. LO- 1.1, 1.2, 3.1, 3.2

Policy Statement

All children have the right to sleep and rest. Staff will ensure that children's needs are being met, whilst working in conjunction with families. Children will be empowered to communicate their sleep and rest needs and trust that educators will respect their needs.

Strategies for Policy Implementation

Comforters

- The service will respect family wishes in allowing children's comforters from home for rest periods (dummy, blanket, teddy, etc.)
- Due to the risk of SUDI, children will not be given comforters until they are able to effectively roll from their back to stomach.

Clothing

- The service recommends that children wear comfortable, non-restrictive clothing. Thick jumpers and shoes should be removed before bed.
- Babies may use safe baby sleeping bags (fitted neck and arm holes, correct size, no hood).

Temperature and hygiene control

- Children will be supplied with blankets when cold, and adequate air flow to promote health and hygiene.
- Staff will ensure that bedding is effectively stored in a hygienic manner.
- Staff will ensure that bedding is laundered following a schedule based on enrolled days or at the end of every week.
- All pillowcases will be washed at the completion of the month.
- Children will be encouraged to develop self-help skills by assisting with bed making and packing away.

Family input

- All children will have access to a minimum of 30-40mins uninterrupted sleep time.
- In the event that parents request limited sleep/rest time, written requests need to be made.

- Written requests need to reflect requested sleep time in mins/hours, reasons for limit and notification of medical reasons (if applicable).
- Sleep times will be recorded for parental viewing inside main playroom.

Cot room

- *Red Nose Foundation* Safe Sleeping Practices will be followed for all children; Babies will be placed on their backs at all times in the cot room. Baby's head and face will be uncovered.
- Cots must comply with Australian Standards (AS/NZS 2172-2010).
- Cots must not be placed near blind cords, heaters, power points.
- Regular cot room checks must be signed by staff at 10min intervals (records stored for 3 years after child's last attendance).

Procedures

- Duty of care checklist
- Educator/staff Handbook
- Bottle preparation, storage and heating procedure
- Cleaning toys, equipment, surfaces and floors procedure
- Laundry procedure
- SUDI safe sleeping checklist

Links to other policies

- Health, Hygiene and Infection Control
- Providing a Child Safe Environment

Sources

Red Nose Foundation- Safe Sleeping (sourced Oct 2018) from <https://rednose.com.au/section/safe-sleeping>

Early Childhood Australia Newsletter (sourced Oct 2018) from http://www.earlychildhoodaustralia.org.au/ngs/plp/wp-content/uploads/2012/05/NQS_PLP_E-Newsletter_No29.pdf

Policy Creation date: Oct 2018

Policy Review Date: Oct 2018

2.1 Medication and Medical Conditions

Rationale and Policy Considerations

Families that utilise education and care services place a high level of trust and responsibility on educators in the belief that, in their absence, their children will be kept safe and secure and their well-being protected. This is particularly the case in the administration of medication to children, or the supervision of older children to self-administering medication. Administering medication to children is considered a high risk practice, and legislative requirements contained in the Education and Care Services National Regulations and the Child Care Services Regulations 2006, and any other relevant legislation, is to be strictly adhered to by service educators/staff.

Those educators/staff responsible for administering medications must be trained in the administration of medications and also know what first aid measures to take should an adverse reaction to the medication occur. The service is aware of the fact that educators are not qualified medical practitioners and will therefore never attempt to diagnose a child's illness or decide on the dose of medication to be given.

Legislation and Government Requirements

Laws relating to duty of care and negligence

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Federal/state occupational safety and health legislation

Child Care Services Regulations (WA)

Children's Needs

To feel physically and emotionally well, and to feel safe in the knowledge that their well-being and individual health care needs will be met when they are not well. If school aged children are cared for, they will be given greater responsibility for their own health care as appropriate eg: asthma inhaler.

Families' Needs

Families expect that staff will:

- Act in the best interests of the children in their care at all times;
- Meet their children's individual health care needs;
- Support and supervise competent school age children during the self-administration of medications eg: asthma inhaler;
- Maintain continuity of medication for their children when the need arises;
- Provide information with regard to the service's policy on administering any medications

Educator/Staff Needs

In caring for children, staff need to:

- Feel competent to perform their duties
- Understand their liabilities and duty of care requirements

- Be provided with sufficient information and training regarding the administration of medications and other treatments appropriate to the child care service agreement

Management Needs

In operating a facility for the care of children, management needs to:

- Have confidence in educators/staff and trust them to meet their duty of care and liability as prescribed by law;
- Ensure clear policies are in place which are implemented by all educators/staff;
- Have practices in place that enable educators/staff to feedback to management when policies are not clear, inadequate or unworkable;
- Provide educators/staff training by suitably qualified professionals
- Provide clear administrative procedures to identify when staff qualifications and clearances need renewing;
- Facilitate clear communication with families
- Be consistent in policy implementation and application with all families

National Quality Framework

Education and Care Services National Regulations- 90; 91; 92; 93; 95; 96;

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – Elements 2.1.1; 2.1.2; 2.2.2; 5.1.2; 6.1.2; 6.2.2; 7.1.3

Early Years Learning Framework for Australia- Principles: 2 Partnerships. LO: 1.2, 3.2

Policy Statement

Willi Wag Tails Childcare Service aims to provide a safe environment for all enrolled children and ensures that the high risk practice of administering medications to children is carefully monitored to reduce any risk to the health and well-being of the child.

Educators/Staff are not medically trained and therefore cannot diagnose appropriate treatment. Consequently, educators/staff will NOT:

- Administer medications to children without written parental/guardian authority;
- Administer non-prescribed medications that are required for more than one day without written medical authority;
- Perform any treatments without first receiving appropriate professional training
- Accept children into the service who require a care regime which uses medical procedures, before staff are appropriately and professionally trained, and feel confident and comfortable with that training and the process of administering any required medication;
- Accept a child with special health needs without a risk minimisation plan being completed on an enrolment of the child;
- Accept a child for care without their prescribed special needs medication

Strategies for Policy Implementation

Administering Medication

Whenever possible, medication should be administered by parents/guardians at home. However this will not always be feasible. Therefore to ensure children's safety and welfare, the giving of medication will be strictly monitored.

General Considerations

- Parents/guardians should consider whether their child who requires medication is well enough to be at the service, and to keep the child at home if unwell.
- If children are receiving medication at home but not at the service, the parent/guardian should advise the educator of the nature of the medication and its purpose and any possible side effects it may have for the child.
- Only prescribed medications or medications accompanied by an Emergency Action Plan, a Special Health Needs Support Plan, or an explanatory letter from the child's doctor will be administered by educators for any period longer than one day. Educators must be fully trained to all requirements contained within Action and Support Plans.

Storage

- Medication must be given directly to the educator and not left in the child's bag or pigeon hole.
- All prescribed medications must have the original pharmacist's dispensing label, or details provided by the doctor giving the child's name, name of medication, dosage, frequency and way it is to be administered, date of dispensing and expiry date.
- All medications will be stored safely out of reach of children, but readily accessible to authorised educators/staff, and in accordance with the medication requirements.

Non-prescribed medications / Over the counter medications

- Non-prescribed medications (other than those applications listed on the enrolment form) that are authorised by the child's parent/guardian are applicable to the child's age, in the original packaging with clear dosage instructions, and within the expiry date of the medication, will be administered for one day only per week.
- If a child needs medication for a longer period, the parent must take their child to the doctor to obtain prescribed medication or the doctor's letter confirming that the over the counter medicine can continue to be administered for a specified length of time.
- Parents/guardians are required to sign an endorsement to confirm their child has had the non-prescribed medication before on at least 3 occasions, and has not had a previous allergic reaction to the medication. They must also print the child's name clearly on the medication to ensure the correct medicine is given to the correct child.

Multiple medications

- Where a child is unwell to the point of needing more than one medication, that child will be deemed unfit for child care, unless a Doctor's Clearance Certificate Form stating the child as "fit for child care, and will not jeopardise the health of other children or educators", is provided.
- Children on regular drugs for chronic conditions eg: insulin, anti-epileptic medication, adrenaline auto-injector etc. may be prescribed more than one medication and be deemed fit for child care.

Training/Authority to treat

- The definition of 'trained educator/staff member' in this policy refers to those educators/staff who have received relevant professionally run training in the treatments or techniques required to administer medication. Medication will only be administered by an educator/staff member who holds a current First Aid Certificate, who is trained as defined above, and there the:
 - Conditions as listed above are met, and
 - The parent/guardian has completed and signed an Authority to Administer or Self-Administer Medication Form on the day on which the medication is to be administered.
- Where specific training is required, and a staff member is prepared to undertake the training, any costs incurred will be borne by the child's parent/guardian.
- Where the service cannot provide sufficient numbers of adequately and appropriately trained educator/staff members who feel comfortable and confident to perform medical procedures or administer medication to the child, it may be agreed that the parent will come to the service to administer medication to the child, or arrangements made for a health professional to administer the medication at the service. Without one of these strategies in place, care at the service will not be possible.

Administration of medications

- Before medication is given to a child the trained educator/staff member will verify the correct dosage and child with another educator/staff member. After giving the medication the educator/staff member will complete the following details on the Authority to Administer or Self-Administer Medication Form – date, time, dosage, medication given, person who administered, person who verified, and signed by both educators/staff.
- Medication must NEVER be put into a baby's bottle or drinking cup.
- Where the medication requires administration via other than an oral route or external application, only those educators/staff who have a current First Aid Certificate and have received specific instruction from a health care professional, will administer the medication.

Application of ointments or creams

- The service will provide a list of the brands of ointments, creams and applications used at the service, such as sunscreen, insect repellent, antiseptic cream, nappy rash cream, teething gel,

band aids etc, that it provides for first aid, or to offer protection from the sun or biting insects, or to soothe nappy rash or sore gums during teething, to families during enrolment.

- When choosing ointments, creams and applications for use at the service, every attempt will be made to choose a product that is appropriate to the age of the children, and contains no additives that may cause allergic reactions in some children. The advice of a pharmacist will be sought when necessary.
- At enrolment, families will be required to confirm that to their knowledge their child is not allergic to the service's brands, and to sign their consent that these preparations can be applied to their child, or may opt to provide the service with an alternative brand for their child's use. Whenever a family provides their own brand, the parent/guardian will be required to complete and sign an Authority to Administer on the day which the medication is to be administered.
- Educators/staff will not apply ointments, creams or applications to children whose parents/guardians have not provided written consent.
- Other creams or ointments not listed by the service as being regularly applied to children, must be detailed on an Authority to Administer or Self-Administer Medications Form, and will only be applied by educator/staff for one day within the week, unless prescribed by the child's doctor.

Self-Administration of Medication

School age children with long term medical conditions such as asthma or diabetes, may be used to managing their own medication, and be competent to self-administer their medication whilst at the education and care service whilst under the supervision of an educator/staff member.

General Considerations

- Children will always be supervised when self-administering medication and the educator/staff member will record details of the administration of medication.
- The child's ability to self-administer medication and any assistance the child may need to do this, will be discussed with the family at enrolment or when the condition is first diagnosed, and details to be written on the child's Special Health Needs Support Plan.
- When considering the child's ability to self-administer medication, the following criteria will be applicable:
 - Age of the child
 - Period of time over which the child has self-administered
 - Child's competence to self-administer
 - Level of support required for the child to self-administer
 - Route by which medication is to be taken
 - The medication to be administered
 - Child's doctor's recommendations on the Special Health Needs Support Plan
 - Parent/guardian and child's desires

Storage

- Medications that are to be self-administered must be given directly to an educator/staff member and not left in the child's bag or on their person, and must adhere to all other requirements for the storage of medication.
- Medication that are to be self-administered must have the original pharmacist's dispensing label, or be clearly identified with the child's name, name of medication, dosage, frequency and way it is to be administered, date of dispensing and expiry date.

Authority from Parents/Guardians

The parent/guardian must provide their written authority for their child to self-administer their medication by completing and signing an Authority to Administer or Self-Administer Medication Form and a Special Health Needs Support Plan for their child.

Administration of Medication

- An educator/staff member will supply the medication, confirm the correct dose with the child, and stay with the child while the child self-administers the correct dose. A second educator/staff member will check the medication and dose prior to the child's self-administration.
- After the child has self-administered the medication, the educator/staff member will complete the following details on the Authority to Administer or Self-Administer Medication Form – date, time, dosage, medication given, person who supervised the child's self-administration, second person who checked, and both educators/staff to sign the form.

Medical Conditions

Children with Special Health Needs

- On application for enrolment families will be required to complete full details about their child's medical needs. The service will assess whether educators/staff are appropriately trained to manage the child's special health needs at that time.
- Where children require medication or have special medical needs for long term conditions or complaints, the child's doctor or allied health professional and parent/guardian must complete a Special Health Needs Support Plan and/or and Emergency Action Plan. Such a plan will detail the child's special health support needs including administration of medication and other actions required to manage the child's condition.
- The service will also consult with the child's family to develop a risk minimisation plan. This plan will assess the risks relating to the child's specific health care needs, on a regular basis, depending on the specific child's medical condition.
- If a child's medical, physical, emotional or cognitive state changes, the family will need to complete a new Special Health Needs Support Plan and the service will re-assess its ability to care for the child, including whether educators/staff are appropriately trained to manage the child's ongoing special needs.

- The family will be provided with a copy of the Medications and Medical Conditions Policy on enrolment or when their child is first diagnosed with a specific health need or other medication.
- If an enrolled child with special health needs presents for a session of care at the service without their medication, they will not be accepted by the nominated supervisor until their prescribed medication is available.

Asthma Reliever medications

- Asthma reliever medications (Ventolin, Asmol, Ariomir, Epaq) will be stored out of reach of children in an easily accessible central location.
- Reliever medications together with a spacer will be included in the service's First Aid Kit in case of an emergency situation where a child does not have their own reliever medication with them.
- The Asthma Foundation provides training in Emergency Asthma Management (EAM) which instructs on all aspects of asthma management and administration of asthma reliever medications. Educators/staff who will be responsible for administering asthma reliever medication to children diagnosed with asthma in their care, should attend either an Asthma Education in-service or EAM course. It is a requirement that at least one educator or other person that is trained in EAM is at the service at all times children are present.
- The Asthma Foundation produces recommended guidelines on asthma management within the child care setting, including the Asthma First Aid Plan and Asthma Record Card, which should be completed for each child diagnosed with asthma.

Asthma Emergencies

- In the case of an asthma emergency, medication may be administered to a child without written parent/guardian authorisation. If medication is administered, the parent/guardian of the child or the child's registered practitioner will be contacted as soon as possible.
- The National Asthma Council (NAC), which is the national governing body for best practice asthma management, recommends that should a child not known to have asthma, appear to be in severe respiratory distress, the Asthma First Aid Plan should be followed immediately. The following steps are recommended:
 - If someone collapses or appears to have difficulty breathing, call an ambulance immediately, whether or not the person is known to have asthma;
 - Give 4 puffs of a reliever medication and repeat if no improvement;
 - Keep giving 4 puffs every 4 minutes until the ambulance arrives;
 - No harm is likely to result from giving reliever medication to someone who does not have asthma;
 - For further information, contact the WA Asthma Foundation office or the National Asthma Council on 1800 032 495
- In any emergency situation, the parent/guardian should always be contacted at the earliest convenience. Refer to Accidents Emergency and First Aid Policy.

Links to other policies

- Accidents, Emergencies and First Aid
- Anaphylaxis
- Educator/staff immunisation
- Health Hygiene and Infection Control
- Illness
- Maintenance of a safe environment
- Occupational Safety and Health
- Sun Protection

Sources

Asthma Australia – *Information about asthma management and links to State/Territory Asthma Foundations* (sourced June 2012) from <http://www.asthmaaustralia.org.au/intro/index.php>

Mayo Clinic – *Cold Medicines for kids: What's the risk?* (sourced June 2012) from <http://www.mayoclinic.com/health/cold-medicines/CC00083>

National Asthma Council of Australia – *First Aid for Asthma* (sourced June 2012) from <http://www.nationalasthma.org.au/content/view/281/572/>

National Health and Medical Research Council – *Staying Healthy in Child Care – 4th Edition 2005* (sourced June 2012) from http://www.nhmrc.gov.au/_files_nhmrc/file/publications/synopses/ch43.pdf

Policy Creation date: June 2012

Policy Revision date: Oct 2018

2.2 *Anaphylaxis Management Policy*

Rationale and Policy Considerations

Philosophy

- Protection of children in the service ;
- Inclusiveness / non-discrimination;
- Educating parents;
- Raising community awareness.

Legislation

Duty of Care requirements;

Equal Opportunity – Anti-discrimination;

Privacy Act 1988; Child Care Services Act 2007 and relevant regulations (WA);

Poisons Act 1964;

Poisons Regulations 1965;

Children's needs

- To be accepted as normal – not singled out as different;
- To feel safe:
- To be protected from their allergens.

Families' needs

- To reduce their anxiety and feel confident that their child is safe;
- To feel that their concerns are taken seriously.

Educator / Staff needs

- Training;
- Clear action plans to follow;
- Opportunities to practice and refresh knowledge;
- To reduce their anxiety in dealing with an anaphylactic response;
- To debrief after an incident;
- Sufficient notice of the introduction of new policy.

Management Needs

- That parents/guardians understand the serious nature of some allergies and how they can assist the service to avoid allergens;
- To be informed and educated in regard to anaphylaxis;
- Appropriate policies are written, adhered to and regularly updated;
- Staff are prepared to act in emergency situations;
- Action Plans are prepared with input from a child's medical practitioner and parent/guardian, and endorsed by both.

Background

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The prevalence of allergies is increasing with approximately 1 in 20 Australian children having food allergy and approximately 1 in 50 having peanut allergy.

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 in child care services is knowledge of those children who have been diagnosed as at risk, awareness of allergens, and prevention of exposure to those allergens. Communication between child care services and parents/guardians is important in helping children avoid exposure.

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

Scope

This section of the policy applies to:

- All children diagnosed by a medical practitioner as being at risk of anaphylaxis;
- All children enrolled at the service including their parents/guardians;
- Relevant members of the service community (e.g. volunteers working at the child care service);
- All staff and the licensee.

Policy Statement

This child care service is committed to:

- Providing, as far as practicable, a safe and supportive environment in which children at risk of anaphylaxis can participate equally in all activities;
- Raising awareness about anaphylaxis and the child care service's anaphylaxis management policy in the child care community;
- Engaging with parents/guardians of children at risk of anaphylaxis in assessing risks and developing risk minimisation strategies for the child.

The Purpose

The aim of this policy is to:

- Minimise the risk of an anaphylactic reaction occurring at the child care service.
- Ensure members of staff are adequately trained to respond appropriately and competently to an anaphylactic reaction.
- Raise awareness about diagnosis throughout the child care community through education and policy implementation.

When introducing the Anaphylaxis Management Policy to staff it is important to first meet with them to explain the new policy, what it entails and when it will commence. Give them sufficient notice to ask questions and have any concerns addressed prior to it being introduced.

PROCEDURE

Identifying allergic children

Prior to enrolment or as soon as an allergy is diagnosed, the child care service will develop an Individual Anaphylaxis Health Care Plan for the child in consultation with the child's parents/guardians and appropriate health professionals.

Whenever a child with severe allergies is enrolled at the child care service, or newly diagnosed as having a severe allergy, all staff will be informed of:

- The child's name
- Where the child's ASCIA Action Plan will be located;
- Where the child's adrenaline auto injector is located;
- Which staff member(s) will be responsible for administering the adrenaline auto injector.

New and relief/casual staff will be given information about children's special needs (including children with severe allergies) during the orientation process.

The child care service will discuss the provision of a Medic Alert bracelet for the child at risk of anaphylaxis with parents/guardians.

Staff Training

An appropriate number of staff will be trained in the prevention, recognition and treatment of anaphylaxis in child care settings, including the use of adrenaline auto injectors.

Each child care service will need to determine which of their staff should be trained to ensure that someone in close proximity to the child is always on hand to act in an emergency. In a small service this may mean that all staff should be trained, whilst in a larger service it may be sufficient for only those staff who work with the child to be trained. Best practice, however, would be for all staff to undergo training so there is always support in any situation.

The child care service will have available adrenaline auto injector trainers to allow staff to practice using the devices.

Anaphylaxis emergency procedures will be conducted and evaluated every six months to ensure staff are confident in the procedure and able to act in an emergency.

Emergency Procedures

The child's Individual Anaphylaxis Health Care Plan should be completed in consultation with the child's parents/guardians. Such consultation includes:

- approval of the Plan
- consent to display the child's ASCIA Action Plan
- consent for the information contained within the Plan to be made available to both child care staff and emergency medical personnel (if necessary)

The child's Individual Anaphylaxis Health Care Plan must include information relating to the immediate transport to hospital in an ambulance after an anaphylactic reaction. Repeat episodes of anaphylaxis may necessitate the child requiring additional medical treatment.

The child's ASCIA Action Plan will be placed in a prominent position. This will ensure it can be regularly read by child care staff where the child may be present during the day. The need to display the child's ASCIA Action Plan will be fully discussed with the child's parents/guardians and their authorisation obtained for this.

The Supervising Officer will inform the child care service management of the agreed Individual Anaphylaxis Health Care Plan for the child and obtain their endorsement for the Plan to proceed.

All information on the child's Individual Anaphylaxis Health Care Plan should be reviewed annually with the child's parents/guardians to ensure information is current to the child's developmental level.

The child's Individual Anaphylaxis Health Care Plan should be reviewed prior to any special activities (e.g. excursions) to ensure information is current and correct, and any specific contingencies are pre-planned.

It is understood that early recognition and prompt treatment for an anaphylactic reaction can be life saving. Staff will therefore routinely review a child's ASCIA Action Plan to ensure they feel confident in how to respond quickly in an emergency.

Parents/guardians are responsible for supplying the adrenaline auto injector and ensuring that the medication has not expired.

After each emergency incident, the Individual Anaphylaxis Health Care Plan will be evaluated to determine if the child care service's emergency response could be improved.

The child's adrenaline auto injector (and any other medication), must be labelled with the name of the child and recommended dosage. Medication must be located in a position that is out of reach of the children, but readily available to child care staff. Consideration must also be given to the need to keep the adrenaline auto injector away from excessive light, heat or cold when deciding on a suitable location.

The expiry date of the child's adrenaline auto injector will be included on the Individual Anaphylaxis Health Care Plan. Child care staff will check the adrenaline auto injector regularly to ensure it is not

discoloured or expired and therefore in need of replacement. Staff will advise the parents/guardians at the earliest opportunity if the adrenaline auto injector needs to be replaced.

Adrenaline auto-injectors are available in different dosages, namely:

- a smaller (junior) dosage of adrenaline for children between 10-20kg (1-5 years of age);
- a higher dosage of adrenaline for children over 20kg (or children over five years of age).

Where it is known a child has been exposed to their specific allergen, but has not developed symptoms, the child's parents/guardians should be contacted. A request should be made to collect the child and seek medical advice. The child care service should closely monitor the child until the parents/guardians arrive. Immediate action should be taken if the child develops symptoms.

It is quite possible that a child with no history of a previous anaphylaxis, may have their first anaphylactic reaction whilst at the child care service, as these reactions only occur after the second exposure to the allergen. If child care staff believe a child may be having an anaphylactic reaction and the child care service has an adrenaline auto injector for general use, this should be administered immediately and an ambulance called. If the child care service does not have an adrenaline auto injector for general use, staff must follow emergency First Aid procedures and ring for an ambulance immediately.

Risk minimisation strategies

In the child care environment, strategies used to reduce the risk of anaphylaxis for individual children will depend on the nature of the allergen, the severity of the child's allergy and the maturity of the child.

Wherever possible the child care service will minimise exposure to known allergens by:

A child at risk of food anaphylaxis should only eat lunches and snacks that have been prepared at home or at the child care service under strictly supervised conditions. Children should not swap or share food, food utensils and food containers.

Special care will be taken to avoid cross contamination occurring at the child care service by providing separate utensils for a child with allergies, taking extra care when cleaning surfaces, toys and equipment, and ensuring strict compliance with the child care service's hygiene policies and procedures.

Only appropriately trained staff are to prepare, handle and serve the allergic child's food, thus minimising the risk of cross contamination occurring.

For some children with food allergy, contact with small amounts of certain foods (e.g. nuts) can cause allergic reactions. For this reason, all parents/guardians will be advised of specific food allergies and how they can assist the child care service minimise the risk of exposure to known allergens.

Some children have severe allergic reactions to insect venoms. Prevention of insect stings from bees and wasps include measures such as:

- wearing shoes when outdoors
- closing windows in cars and buses
- taking great care when drinking out of cans, walking around pools, at the beach, or when walking in grasses which are in flower.

Child care staff will regularly inspect for bee and wasp nests on or near the property and store garbage in well-covered containers so that insects are not attracted.

Particular care will be taken when planning cooking or craft activities involving the use of empty food packaging to avoid inadvertently exposing the child to allergens. The same level of care will be employed to outside activities.

Child care staff will help the child at risk of anaphylaxis to develop trust and confidence that they will be safe while they are at the child care service by:

- talking to the child about their symptoms to allergic reactions so they know how to describe these symptoms to an educator when they are having an anaphylactic reaction;
- taking the child's and their parent's/guardian's concerns seriously;
- making every effort to address any concerns they may raise.

Education of children

Child care staff will talk to children about foods that are safe and unsafe for the anaphylactic child. They will use terms such as 'this food will make sick', 'this food is not good for', and '..... is allergic to that food'.

Staff will talk about symptoms of allergic reactions to children (e.g. itchy, furry, scratchy, hot, 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.

Child care 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 involved in the situation are to complete an Incident Report, which will be countersigned by the person in charge of the child care service at the time of the incident;
- If necessary, send a copy of the completed form to the insurance company; and
- File a copy of the Incident Report on the child's file.
- The Supervising Officer will inform the child care service management about the incident.
- The Supervising Officer or the Licensee is required to inform the Child Care Licensing and Standards Unit about the incident.

Staff will be debriefed after each anaphylaxis incident and the child's Individual Anaphylaxis Health Care Plan evaluated. Staff will need to discuss their own personal reactions to the emergency that occurred, as well as the effectiveness of the procedures that were in place. It is important to learn from each incident.

Time is also needed to discuss the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

Legislation

The child care service will ensure personal details provided by parents/guardians are collected, used, disclosed, stored and destroyed (when no longer needed) according to the Privacy Act 1988 and other regulatory requirements. The need to display personal details included on the child's ASCIA Action Plan will be discussed with parents/guardians, and their written consent obtained prior to display.

The licensee must ensure that, except in an emergency, medication is not administered to an enrolled child without the written authority of the parent/guardian. In all other circumstances, the child care service will require the parent/guardian's written authority (including the Child's ASCIA Action Plan) to administer any medication to their child.

The child care service may confirm with their insurance company that child care staff who administer adrenaline using an adrenaline auto injector, are covered under the child care service's professional indemnity insurance cover.

All staff must comply with the:

Child Care Services Regulations 2012- 85(b), (c); 86; 87(1), (3); 90(1); 91; 92; 93; 94; 95; 168(2)(d)
National Quality Standard for Early Childhood Education and Care and School Aged Care (2018)-
2.1.2; 2.2.1; 2.2.2; 3.2.1; 5.1.2| 6.1.2; 6.1.3; 6.2.2; 7.1.2; 7.1.3; 7.2.1
Early Years Learning Framework- 3 High expectations and equity. LO- 1.1, 3.2

Child care services have a duty of care to take reasonable care for the health and well-being of children placed in their care.

This duty of care requires staff members to:

- Take reasonable care to eliminate or minimise foreseeable risks of personal injury to children under their supervision, due to the susceptibility of some children to allergies, special care must be taken to protect these children if the condition is known or ought to be known and exposes them to special risk of injury.
- Seek appropriate medical assistance for children in the event of an allergic reaction such as calling an ambulance or seeing a medical practitioner
- Render whatever first aid is reasonable in circumstances where there is insufficient time to arrange for a child to be seen by a medical practitioner or be admitted to hospital via ambulance

The *Poisons Regulations 1965* have been amended and child care staff are able to supply (and administer) a general use adrenaline auto injector to a child in their service experiencing an anaphylactic reaction.

In order for a child care service to discharge its duty of care, the service will need to ensure that members of staff are appropriately trained in the prevention, identification and treatment of children who may experience an allergic reaction.

Links to other policies

- Accidents, Emergencies and First Aid
- Anaphylaxis
- Educator/staff immunisation
- Health Hygiene and Infection Control
- Illness
- Maintenance of a safe environment
- Occupational Safety and Health
- Sun Protection

Sources

Anaphylaxis Australia – *Schools and Childcare Centres State Guidelines* (sourced June 2012) from <http://www.allergyfacts.org.au/schools.html>

Australian Society of Clinical Immunology and Allergy – *Action Plan for Anaphylaxis* (sourced June 2012) from http://www.allergy.org.au/images/stories/anaphylaxis/action_plan_epipen_general_2011.pdf

Australian Society of Clinical Immunology and Allergy – *ASCIA guidelines for prevention of food anaphylactic reactions in schools, preschools and childcare* (sourced June 2012) from <http://www.allergy.org.au/content/view/31/258/>

Government of Western Australia – *Anaphylaxis Management Guidelines – Western Australia Child Care and Outside School Hours Care Services* (sourced June 2012) from http://www.health.wa.gov.au/anaphylaxis/docs/child_care/Guidelines_Child.pdf

Policy Creation date: June 2012

Policy Revision date: Oct 2018

2.3 *Illness*

Rationale and Policy Considerations

Families that utilise education and care services place a high level of trust and responsibility on educators in the belief that, in their absence, their children will be kept safe and their health and well-being protected.

All children have the right to develop to their full potential in an environment which provides for their health, safety and well-being. Effective infection control procedures assist services to protect all persons from, and minimise the potential risk, of disease and illness. Children that are unwell pose a risk of infection to other children and educators/staff.

The *Education and Care Services National Law Act 2010* requires that the approved provider/nominated supervisor/coordinator take reasonable care to protect children from foreseeable risk of infection. The Education and Care Services National regulations require the service to take appropriate action to prevent the spread of an infectious disease at the service and to notify parents/guardians as soon as possible if there is an occurrence of an infectious disease at the education and care service.

Legislation and Government requirements

Federal and State Health and Work Safety and Health legislation

Education and Care Services National Law Act 2010/11

Education and Care Services National Regulations 2012

Children's Needs

- Protection from infection
- To feel physically and emotionally well
- To feel safe in the knowledge that their well-being and individual health care needs will be met when they are not well

Families' Needs

Families expect that staff will care for their children appropriately should they become unwell while in the care of the service, and keep them informed about their child's well-being whilst at the service. Families expect that their children will be protected from unnecessary exposure to infection.

Educator/Staff Needs

- Protection from infection
- To receive management support through clear written policies and understanding the issue regarding the care of children who are feeling unwell (ie: 1 to 1 with sick child)
- Maintain good communication with families
- Have specific written policies to give to families
- Families to take responsibility for their child when sick
- Current information on childhood illness
- Communicable and notifiable diseases and vaccinations offered to educators at risk

Management Needs

Educators/staff to take action when they suspect a child is not well enough to be at the education and care service. For families to cooperate in keeping sick and infectious children away from the service.

National Quality Framework

Education and Care Services National regulations 2012- 85(b); 86; 87; 88

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 2.1.1.2; 2.1.2; 7.1.2

Early Years Learning Framework for Australia- Principles- 3 High expectations and equity. LO: 1.1, 3.2

Policy Statement

Willi Wag Tails Childcare Service operates to provide care for well children and aims to ensure a safe and healthy environment for all children in its care. The service is not able to provide 1:1 support that the sick child requires to ensure their well-being, and has a responsibility not to compromise the health and safety of other children and staff members.

Strategies for Policy Implementation

Management of unwell children

Sick children, as defined below, cannot be admitted to the centre to safeguard the health of other children and staff members.

Exclusion criteria

A child who has any of the following symptoms cannot be admitted to the service:

- eye, ear or discoloured nasal discharge
- an undiagnosed rash
- high temperature (see Indicator below)
- infectious sores or diseases (children need a Doctor's clearance before re-admittance)
- vomiting or abnormally loose bowel actions for that child (exclude for 24 hours after last bout). The service will contact the local public health unit when 2 or more children or staff present with a gastroenteritis illness at the same time.
- any obvious signs of ill health (children with asthma - obvious difficulty breathing, barking cough, rib retraction etc)

Staff with symptoms listed above will not attend work or will be replaced and sent home if they start to display these symptoms while at work.

Onset of illness at the service

If a child becomes unwell whilst at the centre, the parents/guardians will be notified and asked to pick the child up and remove him or her from care as soon as possible. All illness at the service is recorded on an Accident/Illness/Trauma Report Form.

If parents/guardians and/or emergency contact cannot be contacted or cannot collect the child, relief educators will be employed to care for the child at the parent/guardian's expense. This is to ensure

the child can be properly cared for away from other children (thus reducing the risk of spread of any infection), and the requirements educator: child ratios are maintained for the remainder of the children in care. This information will be provided to families at the time of enrolment.

If a child has a temperature over 37.2 degrees and is also displaying signs of ill health such as drowsiness, paleness, breathing difficulty, less urine than usual or any of the symptoms listed in the exclusion criteria above, the child's parents/guardians will be notified and asked to take the child home. If the parent/guardian cannot attend to collect the child, an ambulance will be called. While waiting for the ambulance educators will take physical steps to try to reduce the child's temperature ie: removing excess clothing, laying the child in a cool place, encouraging the child to take sips of cool water etc.

High Temperatures Indicator

The temperature 37.2 degrees centigrade is the lower end of the range of temperatures classed as high by medical practitioners. Individual centres may decide to monitor the child who has a temperature of 37.2 and when the temperature reaches 37.5-38 degrees, call the ambulance if the parent/guardian has not arrived to collect the child.

It is recommended that digital thermometers are most appropriate for the child care setting. Mercury thermometers are no longer used with small children due to risk of breakage and leakage of mercury. Aural (in the ear) temperatures are quick and easy but accurate readings depend on the use of good technique.

Where a parent/guardian is asked to seek medical advice regarding their child's health, the service will provide (for the Doctor's information), details about the child's symptoms and any illnesses that have recently affected children and/or educators staff attending the service. All names other than the said child will be kept confidential. The Doctor will be asked to complete a **Doctor's Clearance Certificate Form** to pronounce the child fit for child care and that other children are not at risk of infection through exposure to this child, before the child can return to the centre.

In an event of an outbreak of a communicable disease at the service, educators, staff, families, visitors and the local public health unit will be notified immediately and in accordance with the NHRMC, recommended notifiable diseases, to help minimise the number of children and staff that become unwell.

Teething

Parent/guardians should advise the educators/staff when their child is teething so that the child's needs are met.

When the child who is teething becomes unwell and displays symptoms which include: high temperature, flushed cheeks, drooling, the service will contact the parent/guardians who will either:

- come to the service to collect the child; or
- Provide written authority for the educator to administer ONE child dose of panadol (or may have previously provided this advice in advance on the enrolment form). All over the counter medications must also meet policy requirements described in the service's Medications Policy.

A child who is teething may be administered more than one dose of Panadol in the week, but only one dose during each day (refer: Medications and Medical Conditions Policy).

Information for Families

Children in the education and care service are at greater risk of catching coughs and colds because of increased exposure to infections in the group care situation. The service will therefore provide information to families about infection control requirements of the service eg: hand hygiene, respiratory etiquette.

The service acknowledges that medications contain potent chemical active agents which affect the body's metabolism and should be treated with due respect and care at all times, and will encourage families to only use over the counter medications when directed to do so by their child's doctor.

Supporting Procedures

- Accident/Illness/Trauma Report Form
- Accident/Illness Patterns Evaluation Form
- Authority to Administer or Self Administer Medication Form
- Doctor's Clearance Certificate Form

Links to other Policies

The following may be linked to this Policy:

- Accidents, Emergencies and First Aid
- Educator/staff immunisation
- Health, hygiene and Infection Control
- Healthy Eating and Food Handling
- Maintaining a Safe Environment
- Medications and Medical Conditions
- Occupational Safety and Health
- Records Management
- Sun Protection

Sources

Johanna Briggs Institute - *Management of the Child with Fever - Evidence Based Practice Information Sheet for Health Professionals* – sourced June 2012 from
<http://connect.jbconnectplus.org/ViewSourceFile.aspx?0=4323>

National Health and Medical Research Council - *Staying Healthy in Child Care - 4th Edition 2005* – sourced June 2012 from
http://www.nhmrc.gov.au/files_nhmrc/file/publications/synopses/ch43.pdf

National Institute of Neurological Disorders and Stroke - *Febrile Seizures Fact Sheet* – sourced June 2012 from:
http://www.ninds.nih.gov/disorders/febrile_seizures/detail_febrile_seizures.htm?css=print

Policy Creation Date: June 2012
Policy Revision Date: Oct 2018

2.4 Health, Hygiene and Infection Control

Rationale and Policy Considerations

Willi Wag Tails Childcare Service understands it has a duty of care to ensure that all persons are provided with a healthy and safe environment in which to play and work. To this end all educators/staff will be fully informed about their responsibilities to implement and adhere to the service's health policies and procedures.

All children have the right to develop to their full potential in an environment which provides for their health, safety and well-being. Effective hygiene strategies and practices assist services to protect all persons from, and minimise the potential risk of communicable diseases. Experiences that promote basic hygiene awareness assist children to become competent and independent, and develop valuable life skills.

The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection.

Legislation and Government Requirements

Federal and State Health and Occupational Safety and Health Legislation (WA)
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2012

Children's Needs

- Healthy, clean, hygienic environment in which to play and learn;
- Protection from infection
- Instruction about personal hygiene

Families' Needs

- Reassurance that health and safety standards are maintained at the service and their children are safe;
- To feel confident that their child's health, well-being and development is assured

Educator/Staff Needs

- Protection from infection
- Clean, hygienic environment
- Appropriate equipment to ensure high levels of hygiene
- Clear guidelines in relation to their duty of care

Management Needs

- Staff to maintain appropriate levels of hygiene and cleanliness to meet required standards;
- Families to cooperate in keeping sick and infectious children away from the service

National Quality Framework

Education and Care Services National Regulations 2012: 77; 88(1), (2); 106; 109; 110; 112(2), (3)(b); 168(2)((c), (h).

National Quality Standard for Early Childhood Education and Care and School Age Care (Nov 2010)

– Elements 2.1.2, 2.1.3, 2.1.4, 2.3.1, 2.3.2, 3.1

Early Years Learning Framework for Australia- Practices: 5 learning environment. LO: 2.4, 3.2.

Policy Statement

Willi Wag Tails Childcare Service aims to promote a healthy and safe environment in which children will grow and learn about the world around them. The service is committed to protecting its stakeholders through the implementation and monitoring of simple hygiene and infection control strategies. The application of preventative measures through an infection control program aims to prevent the spread of infections and will be followed by all people in the education and care service at all times.

Strategies for Policy Implementation

Hygiene

- All educators/staff are required to observe and maintain high standards of hygiene in the provision of the education and care service.
- Educators/staff will be provided with training on infection control.
- Educator's role model personal hygiene and discuss hygiene practices with children.
- Hand hygiene considered to be the most effective way of controlling infection in the service. Educators/staff and children should wash their hands:
 - When arriving at the service to reduce the introduction of germs;
 - Before all clean tasks eg: handling and preparing of food and eating;
 - After all dirty tasks eg: nappy changing, toileting, cleaning up urine, faeces, vomit or blood, wiping a nose, playing outside, handling animals or after removing gloves;
 - Before going home to prevent taking germs home.
- The service has provided an adequate number and placement of hand washing basins and is committed to maintaining these in a hygienic and serviceable condition.
- Notices which clearly explain effective hand washing procedures will be displayed next to hand washing basins.
- The service has access to laundry facilities on-site that are adequate and appropriate for the needs of the service, and are located and maintained in a way that prevents unsupervised access by children. It is not recommended that educators/staff take centre laundry home to wash.
- Soiled laundry will be hygienically stored in a sealed container in an area inaccessible to children, until such time as it is laundered or removed from the premises. Items returned to a child's home for laundering will have soiling removed and it will be placed in a leak proof container and not placed in the child's bag in contact with personal items. It is not recommended that educators/staff rinse soiled clothes due to risk of contaminating their clothing which can then be a source for transporting germs.
- Educators will wear gloves when handling soiled linen and will follow recommended procedures for washing soiled linen.

- Educators/staff will use separate cloths or tissues to wipe different children's faces and noses. Tissues will be disposed of immediately after wiping a child's nose. Hand hygiene will be performed between each child after wiping noses and disposing of tissues.
- Educators/staff will use colour coded sponges for cleaning different areas (ie: blue for kitchen, yellow for bathroom) and will wear rubber gloves when cleaning and hang them outside to dry when finished, including rubber gloves.
- The service will use detergent and warm water to clean except where the public health authority recommends a particular disinfectant for an outbreak of an infectious disease.
- Each child will have their own bedding which will be washed at least once per week or after soiling. Educators will follow recommended procedures for dealing with a child's soiled bedding (*Staying Healthy in Childcare* refers).

Toileting and nappy changing

- Nappy changing will be done only in the nappy change area which will be properly stocked with gloves, paper towels, towelettes, plastic bags, fresh nappies, clean clothes, rubbish bin with sealed lid lined with plastic. After each nappy change the child's and the educator's hands will be washed and the change table or mat cleaned with detergent and warm water. At the end of each day the nappy change area will be washed with warm water and detergent and left to dry, preferably in the sun. The procedure for nappy changing will be displayed in the nappy change area.
- Educators will discuss signs of toileting readiness with parents and work with families to develop a consistent approach to toilet training.
- Educators will not begin toilet training of a child until there are definite indications that the child is developmentally and emotionally ready.
- The service will ask families whose children are toilet training to supply several changes of clothing. Educators will follow recommended procedures for assisting children during toilet training and dealing with children's soiled clothes.
- Educators will always encourage children's efforts to develop independence.
- Nappy changing and toileting is flexible and responsive to children's individual needs.
- Nappy changing and toileting procedures are displayed in the nappy change and toileting areas.
- Educators may recommend a variety of training methods to parents who have requested assistance in toileting.
- Educators will interact with children in a relaxed and positive way during nappy changing and toileting as this is an excellent time to continue verbal interactions with children especially as it is one to one time.
- The service will ensure that developmentally and age appropriate toilets, hand washing facilities and products are easily accessible to children. Children will be supervised and encouraged to flush toilets and wash and dry their hands after use.
- Incontinent children will never be embarrassed by educators/staff in regard to toileting habits. Educators will discourage any negatives from families within a child's hearing.

Cleanliness of toys and equipment

- Toys, equipment and dress up clothes will be washed regularly (eg: daily, after being mouthed by a child and after being handled by a child who is sick) in warm water and detergent, and one criteria for selecting new toys will be their ease to clean. Toys accessed by babies will not be shared in order to protect babies against the spread of infection. The sharing of toys will be limited when children are not toilet trained, and/or are mouthing, to reduce the spread of infection.

- Surfaces will be cleaned with detergent and warm water after each activity and all surfaces cleaned thoroughly daily. Floors will be washed each day. Areas contaminated with blood and body fluids will be cleaned as per *Staying Healthy in Childcare*, depending on the size and type of spill.
- Bottles, dummies and teats will be cleaned with detergent and warm water and rinsed after each use. Dummies will be stored out of reach of children, in individual plastic containers with the child's name clearly displayed.
- Each child will be provided with their own drinking and eating utensils at each mealtime. These utensils will be washed in detergent and warm water after each use. Educators/staff will encourage children not to use drinking and eating utensils which have been used by another child or dropped on the floor.
- Educators/staff will ensure that children do not eat food that:
 - Has been dropped on the floor; or
 - Has been handled by another child, except where that child has followed hygiene procedures and been involved in the preparation of the food
- The rules of hygiene will be included in the child's program and staff will initiate discussion about these subjects with groups and individual children at appropriate times.
- Information on hygiene principles and practices will be displayed in the reception area and drawn to the attention of all families on a regular basis.

Immunisation against infectious disease

- Parents/guardians will be encouraged to immunise their child against all diseases appropriate to the child's age. A record of the child's current immunisation status will be kept at the service.
- Children who are not immunised, do not have a complete immunisation record, or are immunosuppressed or who are receiving medical treatment causing immunosuppression such as chemotherapy will be excluded from care during outbreaks of some infectious diseases in accordance with the National Health and Medical Research Council exclusion guidelines, even if their child is well.
- The service will keep a stock up of up-to-date information/pamphlets for parents and educators/staff on immunisation and common infectious diseases and will contact the public health unit if they have any questions regarding infectious diseases.
- All workers at the service will be encouraged to have all immunisations recommended in the Staff Immunisation Policy.

Exclusion due to infectious disease

- Information about the service's exclusion policy is in accordance with the National Health and Medical Research Council's exclusion periods and is provided to families in the Parent Handbook.
- Children and staff with infectious diseases will be excluded from the service in accordance with the National Health and Medical Research Council guidelines. A medical certificate is required after contracting an infectious disease which must state that the child/staff member is well enough to return and does not pose a health risk to other attendees before the adult or child can be re-admitted to the service.
- The service will display a notice at the entrance and use the SMS/email or distribution of letters/fact sheets where appropriate to notify educators/staff members, families or enrolled children and visitors to the service of exclusion due to infectious disease.
- If a child is unwell at home parents/guardians are asked not to bring the child to the service.

- If an educator/staff member is unwell, they should not report to work. Educators/staff members should contact the approved provider/nominated supervisor/coordinator at the earliest possible time to advise of their inability to report to work.
- If a child becomes unwell whilst at the service the service's Illness Policy will be followed.
- In the case of a serious ill health or hospitalisation, the child or educator/staff member will require a medical certificate verifying that their recovery is sufficient to enable their return to the service, from their medical practitioner or specialist.

Blood borne viruses

- It is unlawful to discriminate against anyone infected with blood borne viruses including HIV, Hepatitis B and Hepatitis C. As blood borne viruses are not transmitted through casual contact, a child with a blood borne illness or any other blood borne impairment shall be treated and comforted as any other child, ie: by cuddling, giving hugs, holding hands etc.
- If an educator/staff member is notified that a child or the child's parent/guardian or any other educator/staff member is infected with a blood borne virus, the information will remain confidential. Only with the consent of the person with the virus, or the parent/guardian, can this information be shared with other educators/staff. Deliberate breaches of confidentiality will be a disciplinary offence preceding normal consultative action.

Head Lice

- Educators/staff will examine the heads of children who scratch their heads a lot to look for eggs (nits) or lice near the scalp.
- Educators will ensure that a child suspected of being infested does not have close contact with other children for the rest of the day.
- When families come to collect their child they will be asked to commence treatment to keep the child away from the service until the day after appropriate treatment has been started, and the lice are removed. If they begin treatment prior to the next day exclusion is not necessary.
- The child may return to the service the day after treatment has commenced and all live head lice have been removed. A few remaining eggs are not a reason for continued exclusion. However, the family must continue treatment until all eggs and hatchlings have been removed, usually over the following ten days.
- When an incident of head lice occurs at the service, a notice will be displayed and/or SMS/email will be used to advise parents to check their children. A letter will be given to all parents advising how to check hair effectively using hair conditioner. It is recommended that children with long hair have their hair tied back to reduce the chance of reinfestation.
- All educators/staff will be given information and training on detecting head lice.
- Educators with long hair will be required to wear their hair tied up while they are at the service. This will help to prevent them from becoming infected in the event of an outbreak.
- Where an educator becomes infected with eggs or lice they will be required to commence treatment on their hair that evening.
- If a child's family supplies a hair brush or comb for their child to use at the service, this must be kept in the child's bag to prevent use by other children.

Cleaning up spills of blood and other body fluids

It is considered that the best way to prevent infection is to follow standard precautions at all times. Standard precautions support the assumption that all blood and body fluids are potentially infectious, therefore hygiene practices that promote infection control are adopted for all contact with blood and

body fluids. Educators/staff will follow recommended guidelines for dealing with spills of blood, faeces, vomit, urine, nasal discharge and other body fluids as explained in *Staying Healthy in Childcare* in order to protect the health and safety of all children and adults within the service. Disposable gloves will be readily available for use in dealing with spills and hands will be washed after removal of gloves.

Healthy Environment

- All staff will ensure that every effort is made to maintain a high standard of hygiene in the provision of the education and care service including supporting the nominated provider in the maintenance of all equipment and furnishings in a thoroughly safe, clean and hygienic condition and in good repair. In this regard, staff will report any equipment and/or area that is not clean or in a safe condition or any evidence of vermin to the Coordinator.
- The service is a non-smoking environment. Passive smoking harms the lungs of young children and may trigger an asthma attack. Refer to Occupational Safety and Health Policy.
- To ensure all children and educators attending the service are protected from skin damage caused by harmful UV rays of the sun, educators will consistently follow the service's Sun Protection Policy.
- The service's Sun Protection Policy is provided to families both within the Parent Handbook and on a printed handout which is available on request.
- All rooms used within the education and care service will be well ventilated to prevent:
 - Reduced concentration span;
 - Lack of energy;
 - Tiredness and lethargy;
 - Increased risk of infection and possible asthma attacks.
- All windows and doors will be flyscreened (where possible), or buildings will be protected against flying insects (eg: use environmentally friendly spray such as Coopex under eaves)
- The educator will ensure that lighting, heating and noise levels are comfortable and take into account specific activities (eg: sleep time) and individual needs.

Procedures

The service will ensure that there are procedures to support the following:

- Cleanliness and Hygiene Checklist
- Hand washing procedure
- Head lice checking procedure
- Laundering procedures
- Nappy changing procedure
- Procedures for cleaning toys, equipment, surfaces, floors etc
- Standard hygiene procedure
- Toileting procedure

Links to other policies

The following policies may be linked to this policy:

- Accidents, emergencies and first aid;
- Educator/staff immunisation
- Healthy eating and food handling
- Illness
- Maintenance of a safe environment
- Medication and Medical conditions

- Occupational safety and health
- Sun Protection

Sources

National Health and Medical Research Council –*Staying Healthy in Childcare – 4th Edition 2005* – sourced June 2012 from http://www.nhmrc.gov.au/files_nhmrc/file/publications/synopses/ch43.pdf

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Medicare Australia – *Australian Childhood Immunisation Register* – includes links to state/territory government health departments and other relevant internet sites – sourced June 2012 from <http://www.medicareaustralia.gov.au/public/services/acir/index.jsp>

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Worksafe WA – *Reducing the risk of infectious diseases in child care workplaces Guidance note* – sourced June 2012 from http://www.commerce.wa.gov.au/WorkSafe/PDF/Guidance_notes/Guide-diseases_in_child_care.pdf

Policy Creation date: June 2012
Policy Review date: Oct 2018

3.1 Excursions & Transport

Rationale and Policy Considerations

Conducting excursions or inviting visitors to the service can build valuable links between the service and the community, particularly when these are more than one off experiences. Linking excursions and visits to other experiences for children reinforces children’s learning outcomes and strengthens with, and understanding of their community.

The *Education and Care Services National Law Act 2010* requires that approved provider/educator/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and illness. Extra diligence is required by educators to ensure children are closely supervised during excursions. The regulations require that services conduct a risk assessment for each excursion undertaken by the service.

Traffic related injuries remain one of the leading preventable causes of death or serious injury for young children. The most critical times of the day for road safety in education and care services occur during children’s arrival and departure times. The service will promote road safety in discussions with families and children. Excursions provide young children with the opportunity to practice walking safely with adults in real traffic environments.

Legislation & Government Requirements

Federal and State Occupational Safety and Health Legislation

State and Territory Road Traffic and Transport Licensing legislation (including car restraint laws

Education and Care Services National Law Act

Education and Care Services National Regulations 2012

Children’s Needs

- Safe stimulating environment in which to play and learn;
- Wide range of experiences;
- Safety whilst travelling in a vehicle;
- Safety whilst on an excursion outside the education and care setting.

Families’ Needs

- Reassurance that safety standards are maintained and their children’s safety is assured when on outings/excursions or being transported by the service for any other reason;
- To be fully informed about their child’s excursions;
- To be able to withdraw their child from an excursion if they wish.

Management Needs

- To ensure parental permission is obtained in writing;
- Excursions are conducted safely, and in accordance with legislative requirements;
- Reliable transport system (if applicable).

National Quality Framework

Education and Care Services National Regulations 2012- 100(2), (4); 101; 102; 136; 168(2)(g), (i)
National Quality Standard for Early Childhood Education and Care and School Age Care (2018) –
Elements 1.1.3; 1.2.2; 1.3.3; 2.1.3; 2.2.1; 2.2.2; 4.1.1; 6.2.3

Early Years Learning Framework for Australia – Practice, Holistic approaches, Responsiveness to Children, Intentional teaching, Learning Environments – Outcomes 2.1, 2.2, 2.4, 4.4

Policy Statement

Excursions are considered to be an integral part of the children’s program and will be arranged accordingly to provide a broad range of learning experiences for children, including opportunities for children to expand their understanding of the arts ie: theatre, music, dance, drama, art exhibitions etc. and to strengthen their connections with and understanding of their community.

Educators/staff will closely supervise children whilst they are on excursions or out of the service for any other reason, as the potential for harm is greater outside of the safety of the education and care environment. The service will conduct a risk assessment before taking children on an excursion. Permission for children to attend will be sought from parents/guardians or another authorised person for all excursions in compliance with the Education and Care Services National Law Regulations.

The service is committed to ensuring children are carefully supervised to protect their well-being and safety during any excursion or journey from or to the service that involves travel in a vehicle organised by the service.

Strategies for Policy Implementation

Excursions

- On excursions from the service children will at all times be in the charge of a responsible educator. The nominated supervisor will appoint a person in charge for each outing.
- The educator to child ratios will be maintained in accordance with the Education and Care Services National Regulations. Additional responsible adults may accompany children on an excursion. In determining the required adult to child ratio for each outing, the following will be considered:
 - The age and abilities of the children;
 - The destination and length of the excursion;
 - The methods of transport
 - The previous experience of the accompanying adults;
 - The type of activities.
- The nominated supervisor/educator will complete an excursion plan which includes a risk assessment for each excursion that will identify and assess risks that the excursion may pose to the health and safety or well-being of any child, and will specify how identified risks will be managed and minimised. The assessment will consider:
 - The proposed route and destination;
 - Transport to and from the destination;
 - Proposed times of departure and return;
 - The numbers of adults and children involved;
 - The educator to child ratio required under regulations;
 - The assessment on whether additional responsible adults are required to provide appropriate supervision;

- Any water hazards;
- The proposed activities;
- Items that should be taken on the excursion ie: mobile phone, emergency contact list, portable first aid kit;
- Contingencies for possible changes in weather and temperature;
- Sufficient shaded areas for protection from the sun;
- Safety measures and emergency plans.
- The emergency plan will identify:
 - Who will deal with the emergency;
 - Who will supervise the remaining children;
 - How parents will be contacted; and
 - How children will be returned to the service in the event of an emergency.
- All excursions will be publicised to all parents/guardians with full details of destination, times of departure and return, educators and volunteers attending, any special items children are required to bring. There will be no change to the publicised itinerary unless the person in charge of the excursion decides it is necessary for the safety and well-being of the children.
- Children may be taken on regular outings within the community. These outings may be a walk, or a trip to a destination that the service regularly visits as part of its education program. On these outings, depending on their age, children will be restrained where appropriate in a pram or stroller, or by other suitable means. The parent/guardian or other authorised person's authorisation for this type of outing is only required once in every 12 month period, provided that the circumstances relevant to the risk assessment are the same in each outing.
- On walking outings educators will talk to young children about traffic and road safety including:
 - What they are doing when they cross the road;
 - Why they've stopped at the kerb;
 - What they're looking for when crossing the road;
 - What sounds they're listening for when crossing the road;
 - When it is safe to cross;
 - Why they have to keep checking until they're safely on the other side.
- Written permission will be obtained from families whose children are participating in the excursion. The parent/guardian or other authorised person's signed Parent/Guardian Excursion Authority will include:
 - The child's name;
 - The reason the child is being taken outside the premises;
 - The date of the excursion;
 - Description of the proposed destination;
 - Method of transport;
 - Proposed activities to be undertaken by the child during the excursion;
 - Period the child will be away from the premises;
 - Number of children going on the excursion;
 - Ratio of educators to children on the excursion;
 - Number of other staff and responsible adults who will supervise children on the excursion;
 - That a risk assessment has been prepared and is available at the service.
- The educators in charge of the excursion will have a list of the children on the excursion and the emergency contact details that have been provided by families on the Parent/Guardian Excursion Authority.
- The educator in charge of the excursion will have a mobile telephone, which is turned on, and on which he/she may be contacted at all times during the excursion.

- Guidelines for each excursion will ensure all adults attending the excursion are advised of their responsibilities which will include:
 - Advising the educator in charge of the excursion immediately of any incident, emergency or identified risk;
 - Remaining calm in the event of an emergency and signalling for immediate assistance, including what signals will be used;
 - The name of the person who will have charge of the First Aid Kit during the excursion, and which educators are qualified to administer First Aid;
 - Ensuring that all children they are assigned stay with them at all times;
 - Making regular head-counts of the children they are supervising in order to account for children at all times.
- Where children are taken on an excursion that is close to a body of water additional adult supervision will be organised to ensure children's safety. Direct and constant supervision is required at all times children are in or near water. Educators/staff will have constant visual contact and be in close proximity to all children at all times.
- Adult volunteers may be used to augment adult to child ratios on outings. Family members may be invited to assist in this regard.
- Adult volunteers should be in possession of a Working With Children Check or be able to produce a form confirming their application for one.
- A fully equipped and properly maintained First Aid kit will be taken on all excursions from the premises.
- Alternative arrangements will be made for children not participating in outings.
- Parents/guardians are requested not to send their child on an excursion if they display any signs of being unwell. This is in the interests of all concerned.
- Educators will strictly follow the services excursion guidelines.
- A record of each excursion will be retained for a minimum of 3 months, and will include:
 - Name of each enrolled child that attended;
 - Parent/guardian authorisations;
 - Destination, times of departure and return;
 - Copy of the risk assessment.

Motor Vehicle transport

- Children will not be transported in a motor vehicle without the written authorisation of the parent/guardian of the child.
- Pre-school age children will be walked to and from the vehicle in groups of no more than four (4) children and carefully supervised by an educator. Educators will be aware of the possible dangers and risks involved in escorting children to and from vehicles and will take appropriate precautions including being watchful and alerting children to the dangers.
- School age children will be required to walk in an orderly manner to and from the vehicle under the supervision of an educator who will ensure that a safe route is chosen. Educators will be aware of the possible dangers and risks involved in escorting children to and from vehicles, and will take appropriate precautions including being watchful and alerting children to the dangers.
- The driver of the vehicle to be used in transporting children from the service cannot be counted as one of the adults in the educator: child ratio. The vehicle must:
 - Be licenced and insured
 - Not to be used for any other purpose whilst transporting children
 - Not to be driven in an unsafe or damaged condition

- Not to be driven by a person with the correct or current licence for the said vehicle and the driver is not to be under the influence of intoxicating liquor or deleterious drugs.
- Children travelling in a private vehicle that is fitted with seat belts must be restrained by a seat belt or safety capsule at all times in compliance with relevant state and territory laws.
- Appropriate educator to child ratios will be maintained during journeys in vehicles. Additional adult supervisors may be included depending on the developmental or other needs of the group.
- The service will develop behaviour rules for the collection and transport of children. School aged children will be involved in the development of these rules, which will focus on safety issues and courtesy to other travellers and the driver. Unacceptable behaviour will be dealt with immediately by a supervising educator. Reoccurring behaviour management issues will be dealt with in accordance with the Guiding Children’s Behaviour Policy.
- Educators who supervise children in the vehicle will involve them in activities that will encourage compliance with the behaviour rules, and make the journey a pleasant experience for all.

Collecting children from service

- Children who are walked from school to the service will meet the educator at the service, or as close to the service as possible. All children will be required to walk together with the educator to the education and care service.
- The service will negotiate a safe, supervised pick-up point for children awaiting a car to transport them to the service. Contingencies will be established for wet weather if applicable.
- All children must be waiting at the pick-up area at the arranged arrival time, and be prepared to alight the vehicle. The service will make every effort to ensure the transport arrives to collect the children at the allocated time, although there may be instances when the car is unavoidably late.
- Families are responsible to liaise with service staff to ensure that their children know where the pick-up point is, and that they must be there on time, and the approved provider/nominated supervisor/coordinator makes reasonable attempts to ensure the children are returned on time.

Collecting or taking children to school

- The service will provide full details of the type of vehicle used, Working with Children Check and the qualifications of the driver of the vehicle.
- The service will negotiate with the school to hand over or collect the children directly from a school staff member.
- Families are responsible to liaise with service staff to ensure their children are ready for the pick up at the time agreed with the education and care service.

Engaging the services of transport providers and volunteer drivers

- Volunteer drivers will be required to sign a written agreement detailing the responsibilities and requirements of their contract to transport children for the service.
- Volunteer drivers are held to the same standards as educator assistants, including WWCC, National Records Check and First Aid qualifications.
- Volunteer drivers will be advised of all relevant insurance and taxation requirements and will be required to meet all conditions set out in the Third Party Policy issued in conjunction with the Motor Vehicle licence, thus ensuring both driver and passengers are covering appropriate insurance: ie:
 - The vehicle has a current licence, or registration, and is insured;
 - The vehicle is not used for any purpose other than that stated by the owner when applying for the licence;
 - The vehicle is not driven by a person without the correct and current driving licence for the vehicle, or who is under the influence of intoxicating liquor;
 - The owner ensures the vehicle is kept in a roadworthy condition under the regulations of the relevant State or Territory Transport Licensing Division.
- Contracted drivers will be required to provide a current criminal record check or current Working with Children Check.

Procedures for breakdown, accident or other emergency

- Should the vehicle in which the children are passengers break down, or become involved in an accident or other emergency, the educator in charge will:
 - Assess the danger
 - Assess the safest place for the children to wait for a replacement vehicle, or for repairs to be carried out;
 - Call an ambulance and/or administer first aid if required;
 - Contact the service to advise them of the situation.

Links to other Policies

The following policy areas may be linked to this policy:

- Accidents, emergencies and First Aid
- Delivery and Collection of Children
- Enrolment and Orientation
- Establishing a Protective Environment
- Guiding Children's Behaviour
- Illness
- Interactions with Children
- Medication and Medical Conditions
- Maintenance of a safe Environment
- Sun Protection

Sources

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Kids Safe Fact Sheets – Bicycle safety, Pedestrian safety, Safety in the driveway – sourced June 2012 from <http://www.kidsafewa.com.au/factsheets.htm>

Tansey, S – Supervision in children’s services – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 15, September 2005.

Policy creation date: June 2012

Policy review date: Oct 2018

3.2 Providing a Child Safe Environment Policy

Rationale and Policy Considerations

All children have the right to experience quality care in an environment which provides for their health and safety. The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection.

Legislation and Government Requirements

Federal and State Workplace Health and Safety Legislation

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's Needs

Safe and healthy environment in which to play and learn.

Families' Needs

Reassurance that health and safety standards are maintained at the service and the children's health and safety is assured.

Educator/Staff Needs

- A safe and healthy environment in which to provide experiences for children;
- Appropriate allocation of resources to maintain a safe and healthy environment

Management Needs

To minimise legal liability of the service and ensure health and safety issues are brought to their attention.

National Quality Framework

Education and Care Services National Regulations – 97; 103(1); 104; 105; 106; 109; 112(4); 115; 123; 136; 168(2)(h).

National Quality Standard for Early Childhood Education and Care and School Age Care (2012)- 2.1.2; 2.2.1; 2.2.2; 2.2.3; 3.1.1; 3.1.2; 4.1.1; 5.1.1; 5.1.2; 7.1.1; 7.1.2

Early Years Learning Framework for Australia- Principles: 3 High expectations and equity. Practices: 1 Holistic approaches, 2 responsiveness to children, 4 intentional teaching. LO: 1.1, 1.2, 1.4, 2.1, 2.2, 2.3, 3.1, 5.1

Policy Statement

Willi Wag Tails Childcare Service aims to provide and maintain a safe and healthy environment in which children may play in and explore their world free from harm. The service will protect the health and safety of children and every person who enters the service's premises or uses the service's equipment by keeping informed about and complying with the applicable workplace health and safety legislation, complying with the Education and Care Services National Law Act (as applicable) and

ensuring appropriate Codes of Practice, Standards and recommendations from recognised authorities are followed at the service to protect persons from harm, injury , illness or abuse.

Strategies for Policy Implementation

- The service plan, which clearly defines boundaries and areas where children in each age grouping may safely play, is displayed in the reception area. Educators/staff will become familiar with the plan and will reinforce the importance of staying within the boundaries with the children. Educators will ensure play areas are always appropriately supervised.
- Staff will ensure play areas are always supervised in a manner that is sufficient to ensure the safety and well-being of the children appropriate to their stage of development.

Maintenance of Buildings and Outdoor Areas

- A maintenance register will be maintained to track the maintenance of buildings and equipment and monitor the effectiveness of safety checks.
- Educators/staff will complete Daily Safety Checklists to assess the safety of all areas of the service.
- The education and care premises will comply with the Education and Care Services National Regulations in regards to:
 - Premises , furniture and equipment to be safe, clean and in good repair
 - Indoor space requirements
 - Outdoor space requirements
 - Ventilation and natural light
 - Toilet and hygiene facilities
 - Laundry and hygiene facilities
 - Food and beverage storage and handling facilities
 - Furniture, materials and equipment
 - Fencing and security
 - Swimming pool prohibition
 - Administrative space
 - Nappy change facilities
 - Visibility
 - Outdoor space and natural environment
 - Shaded outdoor space
 - Glass
- All heating systems used in the education and care centre will meet the requirements of the applicable workplace health and safety legislation
- All requirements for electrical installations set down in AS/NZS 3000:2007: Electrical Installations (known as Australia New Zealand Wiring Rules) will be met. Power points will be to an approved safety standard and will be out of reach of all children, or fitted with approved safety shutters or with an earth leakage circuit breaker.
- Electrical appliances and cords will be kept out of reach of all children.
- Wall mounted fans will have blade guards fitted in accordance with the manufacturer's instructions. Wall and ceiling fans will not be operated whilst children are present if they pose a hazard to children. Free standing fans will only be used in areas not used as play areas. This may include: office, kitchen, cot room, educator/staff room. The educator will ensure free standing fans are located so that children are adequately protected from inadvertent physical contact with the blades.
- The service will meet standards for glazing in public buildings set down in the Building Code of Australia and the windows when opened do not create a hazard to children.

- The service will ensure that hot water taps to which a child has access to will be thermostatically controlled at less than 42°C or will be fitted with a device that prevents the operation of the tap by a child.

Equipment

- All equipment and toys purchased for the service will meet Australian Standards for safety.
- The Australian Standards relating to the construction and installation of fixed and temporary outdoor play equipment will be adhered to, to ensure children's safety when using outdoor play equipment. This includes the type of materials and installation requirements used for outdoor surfaces. The service will access current information from KIDSAFE about the installation and use of outdoor play equipment.
- The approved provider/nominated supervisor/coordinator will ensure that the outdoor play equipment does not pose a hazard to children because of its design, manufacture, installation or use.
- All educators will be diligent to ensure that all equipment and toys are kept in thoroughly safe, clean and hygienic condition and in good repair at all times, and stored in a safe manner.
- Educators who become aware of faulty or broken equipment will remove this equipment from use and advise the approved provider/nominated supervisor/coordinator of the need for its replacement or repair. All such incidents will be noted on a Hazard Report.
- The service will ensure that adequate furniture is available to meet the physical and developmental needs of children attending the service.
- The service will ensure that the nominated supervisor/coordinator and educators/staff members have ready access to an operating telephone or other similar means of communication, whenever children are present at the education and care service.
- Sandpits will be covered at night and raked daily to dispose of any animal faeces, or other contaminants or potentially dangerous objects.
- The outside playing area will be checked regularly to ensure poisonous vegetation is not accessible to children
- Children will be carefully introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Children using play equipment will be supervised at all times. Equipment that should only be used under supervision will be stored in a safe place out of reach of children.
- Wading or paddling pools will only be used under the direct supervision of an educator. When not in use this equipment will be emptied and stored in such a manner that it cannot collect water. Wading and paddling pools must be of a size that can be emptied by one person.
- Children will only use a trampoline, vortex or water trolley whilst under the direct supervision of an educator.

Storage of Potentially Dangerous Products

- All educators/staff will be made aware of which products may pose a danger to children in the service and will do their best to minimise the use of these products without jeopardising the hygiene of the children or themselves.
- The service will purchase and use less toxic substances whenever possible.
- The service will maintain a register of all hazardous substances kept on the education and care premises.
- All potentially dangerous products will be clearly labelled and stored in their originally labelled containers with the relevant Material Safety Data Sheets (MSDS) for that product, out of reach of all children, or unauthorised adults. Storage areas will be clearly labelled to assist relief educators/staff.

- All hazardous products are used in accordance with the manufacturer's written instructions and specific workplace procedures, and dangerous chemicals are only used when children are not present at the service.
- First Aid Action Plans are developed for each hazardous product kept on the education and care premises.
- Flammable materials are stored separately from anything that constitutes or is likely to constitute a fire hazard.
- Educators will discuss the dangers of certain products with the children.

Protection of Visitors

- Visitors may be present at the service from time to time and will have their safety assured whilst at the service through the following procedures:
 - The service will require visitors to report to the nominated supervisor/educator/staff member on arrival;
 - The nominated supervisor/educator/staff member will be aware of where visitors are at all times;
 - Educator/staff will accompany visitors where possible;
 - Visitors will be restricted from any hazard area;
 - Educators/staff will be inducted on safety issues concerning visitors;
 - Visitors will be inducted about hazards on premises (if any).

Procedures

- Car park safety checklist
- Children's toys safety checklist
- Daily safety checklist
- Cleaning checklists
- Food safety standards checklist
- Duty of care checklists
- Equipment safety checklist
- Hazardous chemicals and substances safety checklist
- Hazard report
- Register of hazardous substances
- Security checklist
- Storage of equipment and toys safety checklist
- Vehicle safety checklist

Links to other Policies

- Accidents, emergencies and first aid
- Delivery and collection of children
- Educator/staff dress code (in Educator Handbook)
- Establishing a protective environment
- Excursions and transport
- Health, Hygiene and infection control
- Healthy eating and food handling
- Guiding children's behaviours
- Illness
- Medications and medical conditions

- Occupational safety and health
- Sun Protection
- Use of tobacco, alcohol and other drugs

Sources

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Safe Work Australia - *Model Work Health and Safety Laws Fact Sheet* - sourced June 2012 from
<http://safeworkaustralia.gov.au/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/553/ModelWorkHealthAndSafetyLawsFactSheet.pdf>

SAI global - *portal for purchasing Australian Standards* -sourced June 2012 from
<http://infostore.saiglobal.com/store2/>

Worksafe ACT - *Links to national health and safety sites, and national worker's compensation sites*
- sourced June 2012 from
<http://www.worksafety.act.gov.au/links>

Policy creation date: June 2012
Policy review date: Oct 2018

3.3 Supervision (including absent/indisposed staff)

Rationale and Policy Considerations

Willi Wag Tails Childcare Service understands it has a duty of care to ensure that children are provided with a safe, secure education and care environment that is effectively supervised. Educators have a duty of care to ensure that all areas accessible to children are safe, free from hazards, and adequately supervised by sufficient numbers of educators. The type of supervision required is dependent on the type of activities that children are participating in, the specific environment and its possible hazards, and the age, needs and propensities of the individual children.

It is a requirement under the *Education and Care Services National Law 2010* that all children being educated and care for by the service are adequately supervised at all times that the children are in the care of that service, and that the children must be protected from harm and hazards.

Philosophy

Documented approach to provision of a safe and healthy environment for children and acting in the best interests of the child; approach to professionalism, duty of care and ethical conduct.

Legislation and Government Requirements

State laws relating to Occupational Safety and Health

Laws of negligence and duty of care

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's Needs

To be able to learn and grow in an environment that ensures potential risks are recognised and appropriate supervision provided to allow children to explore and push the boundaries of their abilities.

Families' Needs

To feel confident that their child is in a safe secure environment and adequately supervised by qualified educators at all times.

Educator/staff Needs

- Sufficient educator to child ration to ensure adequate supervision at all times;
- Special plans for beginning and end of day and lunch time periods when educator levels may be reduced;
- Well-designed play space that maximises supervision;
- Understanding of duty of care responsibilities towards children;
- Training in supervision skills.

Management Needs

- To feel confident that supervision of children is maintained by all educators/staff at all times;

- All educators/staff undertake their duty of care responsibilities to children diligently and consistently.

National Quality Framework

Education and Care Services National Regulations 2012 – 115; 120; 122; 123

National Quality Standard for Early Childhood Education and Care and School Age Care 2018 – 2.2.1; 2.2.2; 4.1.1; 4.1.2; 4.2.2; 5.1.1; 7.1.2; 7.1.3; 7.2.3

Early Years Learning Framework for Australia - Practice: Holistic approaches; Responsiveness to children; Intentional teaching; Learning environments - Outcomes 2.1, 3.1, 4.3.

Policy Statement

The service will ensure educator supervision of children is appropriate to the activities children are engaged in; the characteristics and developmental level of the children; the setting in which the activities are taking place; the potential risk to children's safety; and the experience, knowledge and skill level of educators.

Educators will engage in active supervision of children by actively watching and monitoring the learning and leisure environment, observing children's play and anticipating potential dangers. The service's supervision policy is committed to:

- complying with the Education and Care Services National Regulations educator/child ratios;
- ensuring that the children are supervised at all times;
- considering the design and arrangement of children's environments to support active supervision;
- using supervision skills to reduce or prevent injury or incident to children and adults;
- guiding educators to make decisions about when children's play needs to be interrupted and redirected;
- providing consistent supervision strategies when the service requires relief educators; and
- acknowledging and understanding when supervision is required for high risk experiences and/or the ratio of adults to children need to be increased.

Strategies for Policy Implementation

- Educators are fully induced in their duty of care responsibilities to children and understand how this duty impacts on the supervision of children.
- When educators are on duty they are responsible for the direct supervision of children. This requires that each child will be within sight and/or hearing of an educator at all times. Educators will arrange play areas to ensure children can be effectively supervised, and will communicate effectively with each other about the supervision of children ie: inform each other before leaving the room.
- Educators will adopt the following strategies to ensure children's adequate supervision:
 - be in close proximity to children to supervise activities that involve some risk ie: wood work activities; cooking; playing on high play equipment etc;
 - always face the children and position themselves to allow maximum observation of the area in which children are playing;
 - keeping an eye on large groups of children by scanning and regularly looking around the area;
 - being alert to sounds that may indicate a problem or need for intervention or assistance;

- anticipating what may happen next when watching children's play, and being prepared to intervene where there is potential danger;
- planning activities and arranging the environment to ensure there are sufficient educators to attend to children's needs;
- regularly inspecting the environment to check for hazards or potential dangers;
- being vigilant during children's departure from the service and being aware of the people who have authority to collect the child.
- Educators that are 'on duty' will not engage in cleaning, administrative or other duties, except where this involves undertaking minor duties such as marking the roll for a care session, or carrying out minor cleaning duties arising directly from the care of an enrolled child.
- Educators will be alert to and aware of potential hazards and risk of injury to children and will use their knowledge of each child to ensure children are adequately supervised at all times.
- Levels of supervision will be adapted in relation to:
 - size of group;
 - number of educators supervising;
 - experience of educators and their personal knowledge of the children;
 - individual characteristics, developmental level, and age range of the group of children;
 - types of activities taking place;
 - children's previous experience of the activity;
 - size of, and potential hazards within the play area;
 - transitions from one activity to another ie: are children hyped up; excited; tired; just awakening from sleep etc.
- Educators will foster children's independence and competence by supporting children to undertake some activities that involve risk taking. However, educators will always intervene to prevent harm, whenever this is necessary.
- The service will identify circumstances in which increases to the adult ratios above regulatory requirements are needed to improve children's safety. This can be during excursions, when children are playing near large volumes of water (swimming pools or fishponds), or when children are unwell.
- Educators are aware that at times older children require privacy and the space to be independent. Educators will develop supervision strategies that monitor these areas and allow older children to self-manage their play and limit setting.
- Educator/staffing arrangements will allow flexibility within daily routines and supervision of individuals or small groups of children during meal times, sleep or rest times etc.
- The service will roster experienced educators that are familiar with the service's facilities, building and procedures, and know most of the children and families, to open and close the service.
- When educators are leaving for the day they will ensure their colleagues who are closing the service know which children are still in care, any information to be shared with families, or any changes to the person authorised to collect the child that day. This will be achieved through the use of handover diaries, communication books or messages on whiteboards.
- Educators regularly evaluate supervisory practices, and especially after accidents or incidents, excursions, or the introduction of new activities.

Staffing Plan

- The service will establish a Staffing Plan to ensure appropriate levels of supervision are maintained at all times and in accordance with the Education and Care Services National Regulations 2011. This plan will include:
 - Name of the nominated supervisor;

- Names of those certified supervisors that have agreed to take on the role of acting nominated supervisor when the nominated supervisor is not on duty;
- Relief educator list and procedures for updating this list;
- List of educators holding a current approved first aid qualification;
- List of educators that have undertaken anaphylaxis management training;
- List of educators that have undertaken emergency asthma management training;
- Absent or indisposed educator procedures
 - Early morning procedures if rostered educators are absent
 - Procedures when educator is required to leave at short notice
- Procedures for ensuring maintenance of records and updates to educator's clearances and qualifications;
- Procedure for ensuring educator/staff time sheets are maintained and retained;
- List of educators for each age grouping within the service;
- Educator meal and rest break arrangements;
- Supervision for special activities ie: excursions; transport; water play; trampolines; play equipment etc;
- Supervision of children who are ill, injured, unacceptable behaviour etc.;
- Induction procedures for new educators/staff.

Nominated Supervisor

- The approved provider (Shire of Williams) will appoint the most appropriately experienced and qualified certified supervisor as nominated supervisor; and will ensure this person has adequate resources and support to achieve their responsibilities for the day-to-day supervision and control of the service.
- The approved provider will also seek the consent of a number of appropriately experienced and qualified certified supervisors to be available to act in place of the nominated supervisor when the nominated supervisor is not on duty.

Absent/Indisposed educators

- Educators must inform the nominated supervisor, or certified supervisor acting in place of the nominated supervisor, as early in the day as possible if they are unable to report to work, so that relief educators can be arranged.
- Should an educator fail to report for duty the following procedures will apply:
 - The most senior educator present will contact the nominated supervisor or directly contact an educator who is rostered to work later that day or a relief educator from the Relief Educator/ Staff List to arrange for someone to report to work as soon as possible.
 - Once the maximum educator to child ratio has been reached, families who arrive to drop off their children will be asked to wait with their children at the service until an additional educator arrives.
- Should an educator become ill or injured, or otherwise be required to leave the service at short notice:
 - The nominated supervisor will contact an educator not rostered to work, or a relief educator from the Relief Educator/Staff List, to arrange for someone to report to work to replace the indisposed educator as soon as possible
 - The indisposed educator will whenever possible remain at the service, until a replacement educator has arrived.
 - In the event that the educator cannot be replaced, the nominated supervisor may be required to reduce the number of children in care by contacting families of lower

priority children (Priority of Access Guidelines) to advise them of the situation, and ask them to collect their children from care.

Relief Educators

- A Relief Educator/Staff List will be maintained by the nominated supervisor. The Relief Educator/Staff List will identify each person's qualifications, relevant clearances with expiry dates, dates of previous work at the service and room/age grouping in which they worked. Each person on the Relief List will be contacted regularly to confirm their continuing availability.
- The service will regularly advertise for new relief educators, to ensure the most experienced and qualified persons are available.
- New relief educators will be oriented to the service and invited to spend some time at the service to confirm their suitability. Whenever possible new relief educators will be placed with regular educators and closely supervised.
- Experienced educators will support and oversee relief educators to ensure the maintenance of continuity in the service's practices and standards.

Ensuring Correct Educator to Child Ratios

- The nominated supervisor will ensure that appropriate educator to child ratios are maintained for each age grouping of children in accordance with the Education and Care Services National Regulations.
- The nominated supervisor will encourage families to keep to agreed starting and finishing times so that the service can maximise the use of educators and ensure appropriate educator to child ratios are maintained in each age grouping at all times.

Procedures

- Absent of indisposed educator procedures
- Early morning procedures if rostered educators are absent
- Educator meal and rest break procedures
- Procedures when educator is required to leave at short notice
- Procedure for ensuring maintenance of records and updates to educator's clearances and qualifications
- Procedure for ensuring educator/staff times sheets are maintained and retained (this will be done by Shire of Williams as approved provider of service)
- Procedure for the supervision of children who are ill or injured
- Procedure for supervision of children displaying unacceptable behaviour
- Procedure for supervision of children on climbing equipment
- Procedure for supervision of children participating in special activities or excursions

Links to other Policies

- Confidentiality and privacy
- Delivery and collection of children
- Enrolment and orientation
- Establishing a protective environment
- Excursions and transport
- Guiding children's behaviour
- Illness

- Interactions with Children
- Maintenance of a safe environment
- Medications and medical conditions

Sources

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http://www.pscwa.org.au/getdoc/02f1ca90-bca8-464c-a65d-46663a4f434c/Workingtoachieveasafeenvironment_000.aspx

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<http://www.pscwa.org.au/getdoc/d4f3ca91-a179-4de0-bbf1-42e01bf9d608/HumanResourceManagementChecklist.aspx>

Morton, S - *Duty of Care Risk Register- PSCWA Factsheets* - sourced June 2012 from
<http://www.pscwa.org.au/getdoc/71f5d325-7771-48fd-bf75-d42616d268b9/DutyofCareRiskRegister.aspx>

DEEWR Childcare Service Handbook 2011-12

Section 6.5 - What are my services responsibilities to parents?

Section 6.6 - What are my responsibilities to children?

Sourced from: www.deewr.gov.au

Early Childhood Australia (ECA)(2005) - *The Code of Ethics* - sourced June 2012 from
http://www.earlychildhoodaustralia.org.au/code_of_ethics/early_childhood_australias_code_of_et_hics.html

Tansey, S - *Supervision in children's services* - extract from *Putting Children First*, newsletter of the National Childcare Accreditation Council - Issue 15, September 2005 - sourced June 2012

UNICEF(n.d). *Fact Sheet: A Summary of the rights under the Convention on the Rights of Children* - sourced June 2012 from
http://www.unicef.org/crc/files/Rights_overview.pdf

Policy creation date: June 2012

Policy review date: Oct 2018

4.1 Educator Handbook

See Educator Handbook (separate document).

National Quality Framework

Education and Care Services National Regulations 2012- 171

National Quality Standard for Early Childhood Education and Care 2018- 4.2.1; 4.2.2; 7.1.3; 7.2.1; 7.2.3

Early Years Learning Framework- LO: 1.1

4.2 *Responsible person*

All of the staff employed at the Centre will have qualifications (or working towards completion of qualifications) and experience relevant to the Child care industry.

The Shire of Williams, as the Approved Provider/Licensee, is ultimately responsible for the employment of all the staff.

The staff will be made up of a Co-ordinator, permanent part-time educators and casual/relief staff as required. All staff are to be recruited in an open, fair and accountable manner, by the Shire of Williams.

See attached Procedure for Orientation of Relief Staff and Management of Relief Staff.

A responsible person is an Approved Provider or a Nominated Supervisor placed in day-to-day charge of the approved service.

Refer to Policy 3.3 – Supervision, which includes reference to Absent/Indisposed staff.

4.3 *Participation of volunteers and students on practicum placement*

Student Placement

Willi Wag Tails Childcare Centre will accept student placements at the Co-ordinator's discretion, and with approval from the CEO of the Shire of Williams (as Approved Provider/Licensee).

Students may include TAFE, University or nursing students or work experience students from the regional High Schools. Relevant Educational Institutions will provide the Centre with Insurance details and training documents as required by the student. Students over the age of 18 years need to obtain a Working with Children Check Card.

- Students are responsible to the Co-ordinator and/or the Qualified Educator.
- Students will adhere to the training agency and the Willi Wag Tail Childcare Centre's dress code.
- Students will sign a confidentiality agreement before commencement of placement.
- A photo and brief description of the placement will be provided by the student and will be displayed in the Centre for the benefit of families.
- Students are required to adhere to the Centre's Policy and Procedure Manual.
- Qualified staff may sign a student's assignment to verify the reading of certain policies.
- Students DO NOT take the place of staff members and all tasks carried out by a student must be supervised by a staff member.
- Students are supervised at all times by staff members. Students are never left alone with children.

National Quality Framework

Education and Care Services National Regulations 2012- 149(1), (2); 155; 168(2)(i)(iii)

National Quality Standard for Early Childhood Education and Care 2018- 4.2.1; 4.2.2; 7.1.3

Early Years Learning Framework- Principles: 1 Secure, respectful and reciprocal relationships. LO: 1.1, 4.3, 5.1

4.4 Educator/staff immunisation

Rationale and Policy Considerations

All educators/employees and contractors within the service have a right to a safe and healthy workplace. Employers have a duty under state/territory and federal legislation to ensure Health and safety in the workplace. Employees and contractors also have obligations under law to make reasonable care to protect themselves and others in the workplace, and to follow health and safety instructions of the employer.

The *Education and Care Services National Law Act 2010* requires that the approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of infection. This responsibility is related to the immunisation of educators/staff members, so that they do not themselves pose a risk to the infection of children.

Legislation and Government Requirements

Federal and State and Health and Workplace safety and Health legislation

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's Needs

Protection from infection from educators/staff at Willi Wag Tails Childcare Service.

Families' Needs

Reassurance that health and safety standards are maintained to reduce the spread of infectious diseases within the service and to feel confident that their child's health, well-being and development is assured.

Educator/Staff needs

Protection from infection. To be kept up to date with information on best practice in minimising the risk of contracting contagious diseases and spreading infection to others in the education and care service.

Management needs

Minimising the risks of spreading infectious diseases through education and staff immunisation. Information about educator/staff members' current immunisation status.

National Quality Framework

Education and Care Services National Regulations 2012 - 88

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 2.1.3; 4.2.2; 7.1.3; 7.2.3

Early Years Learning Framework for Australia- LO: 3.2

Policy Statement

Willi Wag Tails Childcare service aims to minimise the risk of spreading infectious diseases by encouraging educators/staff at occupational risk to obtain vaccinations as identified in the National Health and Medical Research Council in the most recent edition of the Australian Immunisation Handbook. In addition to this, the Approved Provider will provide up to date information on both vaccine preventable and non-vaccine preventable diseases and safe work practices which will minimise the risk of acquiring and spreading infections.

Strategies for Policy Implementation

- In recognition of duty of care responsibilities, educators/staff member will be required to complete an Educator/Staff Immunisation Record and keep this up to date. This information will remain confidential and will be kept in the educator/staff member's file at the place of employment. Educators/staff are responsible for updating this record as their immunisations are updated.
- The approved provider/nominated supervisor/coordinator will encourage those non-immune educators/staff to be vaccinated against:
 - Hepatitis A
 - MMR (Measles, Mumps, Rubella) - immunity to measles requires two (2) doses of MMR and those born during or since 1966 may not be immune.
 - Varicella (Chicken Pox)
 - Pertussis (Whooping Cough) - immunity requires a dTpa booster. Anecdotal evidence suggests that educators/staff members assume that they have lasting immunity from childhood immunisation/infection alone.
- The educator/staff member will be responsible for the upfront costs associated with the visit to their local GP and the administration of any of the above vaccinations.
- Educators/staff members who do not take up the offer to have vaccinations will be required to sign a statement to this effect. 'Educators/staff choosing not to immunise' disclaimer form.
- Educators/staff members that contract a communicable disease will be excluded from the service until they are pronounced non-infectious by their GP.
- During outbreaks of measles and whooping cough, non-immune educators/staff will be excluded from the service for the period recommended by the National Health and Medical Research Council (NRMCC).
- The service will consult with a Public Health Unit when there is an outbreak of a vaccine-preventable disease (not just measles and whooping cough) so that non-immune educators/staff can be provided with chemoprophylaxis/vaccination if available (eg: NHIG or hepatitis A vaccine during a hepatitis A outbreak).
- Specific extra procedures will be put into place for:
 - non-immune educators/staff members during outbreaks of other vaccine-preventable diseases such as rubella, hepatitis A and varicella (eg: adoption of hygiene practices, work restrictions - if relevant) during an outbreak at the service, referral for chemoprophylaxis/vaccination (if available) during an outbreak; and
 - children during such outbreaks if educators/staff members do not receive dTpa (eg: work restrictions on working with infants).
- Educators/staff with an immune deficiency or receiving medical treatment that causes immunosuppression, such as chemotherapy, will be excluded from the centre on full pay during outbreaks of measles, whooping cough or chicken pox for the recommended period. Confirmation of the staff member's medical condition is required from their GP or Specialist Physician.

- Educators/staff members are required to inform the approved provider/nominated supervisor/coordinator as soon as possible if they are pregnant and follow procedures as outlined in the service's Managing Pregnancy Policy.
- Vaccine-preventable diseases that pose risks to:
 - non-immune pregnant educators/staff members are varicella and rubella and
 - the reproductive health of non-immune male educators/staff members is mumps.
- All educators/staff members will be provided with up-to-date information about vaccine preventable diseases.
- The approved provider/nominated supervisor/coordinator will be responsible for providing fact sheets on the following diseases and making these available at the service for educators/staff and parents.

Vaccine Preventable Diseases

Hepatitis A, B
 Measles
 Mumps
 Rubella
 Pertussis (Whooping cough)
 Varicella (Chicken Pox)

Non-vaccine Preventable Diseases

Cytomegalovirus (CMV)
 Human Immunodeficiency Virus (HIV)
 Parvovirus B19
 Hepatitis C

- Educators/staff will be kept up to date with information available on minimising the risks of spreading infectious diseases through fact sheets, brochures and information
- All educators and staff are responsible for following the Health and Hygiene procedures and practices to minimising the risk of spreading infection. Educators/staff must take responsibility for following all hygiene policies and procedures outlined in the service policy manual and the Australian Government publication, *Staying Healthy in Childcare*.

Procedures

- Duty of Care Checklist
- Educator/employee Injury/Accident/Illness Report
- Educator/staff choosing not to immunise disclaimer
- Educator/staff code of ethics
- Educator/staff immunisation record
- Educator/staff orientation checklist

Policy creation date: June 2012
 Policy revision date: Oct 2018

4.5 Recruitment of Educators, Staff and Volunteers

Rationale and Policy Considerations

Willi Wag Tails Childcare service understands how the recruitment and selection of childcare professionals affects the health and well-being of children, families and peers. The service seeks to promote diversity and equity, and in this regard considers it is crucial to establish legal and ethical recruitment and selection policies and procedures. The service endeavours to establish a decision making processes for staff selection that are transparent and which clearly define accountability.

The service has an understanding of equal employment opportunities legislation, the Fair Work Act and other relevant award/enterprise agreement conditions; and the requirements for staffing the service contained within the Education and Care Services National Law. The service also understands its responsibilities under Occupational Safety and Health law to ensure that workers are suitably qualified for their work, and are given adequate supervision and on the job training to enable them to work safely.

Education and Care services also need to be child safe. This requires a selection process that attracts positive role models for children and people who will embrace the child protection principles held by the service. The service will therefore be vigilant in the recruitment and selection of staff and volunteers to reduce the risks of appointing unsuitable people.

Legislation and Government Requirements

Federal and State Occupational Safety and Health Legislation

Federal and State Equal Opportunity Legislation

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Fair Work Act 2009 and any other relevant industrial awards

Children's Needs

- Continuity of care
- Child safe environment
- Warm and caring educators
- Educators with appropriate knowledge to provide educational learning programs and developmentally appropriate routines.

Families' Needs

- Introductions to new educators/employees
- Opportunities to communicate openly with educators
- Confidence that the service only appoints suitable educators/staff or volunteers

Educator/Staff Needs

- Fair selection procedures
- Secure employment
- Fair conditions of employment
- People who can work as part of a team
- Recognition of qualifications and experience

- Support from the employer to become familiar with workplace policies and procedures

Management Needs

- To attract suitably qualified and experienced child care professionals to the service
- To appoint the best applicants to the positions available
- To oversee an ethical and non-discriminatory selection process
- To ensure continuity of educators to maintain quality education and care for families

National Quality Framework

Education and Care Services National Regulations 2012- 118; 120; 121; 122; 123; 125(a); 126; 129; 130

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 4.1.1; 4.1.2; 4.2.1; 4.2.2; 5.1.1; 7.1.3; 7.2.3

Early Years Learning Framework for Australia – Principles – Ongoing learning and reflective practice; Holistic approaches

Policy statement

Educator/staff and volunteer recruitment at the service will be conducted in a fair and consistent manner which is ethically and legally responsible, reflects equal employment opportunity legislation and aims to appoint the best person available for the position advertised. All educators/staff and volunteers are offered a position at the service will be screened carefully to identify individuals who would pose an unacceptable risk to children and the organisation. Recruitment planning is viewed as an on-going process which complements performance reviews and professional development opportunities.

The policy also aims to ensure:

- The continuity of educators/staff to maintain quality education and care for children and families;
- Sufficient number of educators/staff maintained to meet all regulatory requirements;
- Volunteers are used to augment educators/staff and add specific skills or attributes to the service; and
- Educator/staff selection procedures are transparent and clearly accountable.

Strategies for Policy Implementation

- The approved provider will ensure that the service is appropriately staffed at all times to meet all requirements of the *Education and Care Service National Law Act*.
- Only educators that are working directly with children will be included in calculating the educator to child ratios for service.
- The approved provider will employ sufficient educators/staff to implement the service's policies in regards to supervision.

Identifying the need for recruitment

The following criteria may highlight the need for recruitment:

- Resignation or departure of a child care professional;
- Changes to service approval and other regulatory requirements in line with the *Education and Care Service National Law Act*;

- The need for specialised skills, abilities or knowledge such as early childhood teachers, managers, administration staff, support workers for children with additional needs and volunteers with special skills;
- Maintaining quality of education and care services provided through appointment of additional educators/staff or volunteers over the legislated educator/child ratios during busy periods of the day such as meal times or excursions;
- Development or review of a list of reliable relief educators/staff that may be required when permanent educators/staff are unable to work; or
- The result of a change in service provision such as a service catering primarily for pre-school age children expanding to include school age children and therefore needing to employ additional educators with experience/qualifications in school age education and care.

When seeking to recruit new educators/staff the following criteria will be determined and used to develop selection criteria for the position:

- Required qualifications including degrees, diploma's or first aid certificates;
- Child protection requirements such as 'working with children' or national police checks;
- Required personal attributes;
- Required years of relevant working experience for the position;
- Age requirements for the position;
- Required references.

Selection criteria will also be determined when volunteers are sought, or approach the service. The following criteria will be developed:

- Child protection requirements such as 'working with children' or national police checks;
- Required personal attributes, abilities or skills;
- Previous experience working with children; and
- Required references.

Advertising

All employment positions will be advertised according to equal employment opportunity legislation and request applications in writing that address selection criteria for the position and include names and contact numbers of two referees. Applicants will be asked to contact the Shire of Williams (as the employer) for an Application Package that will include:

- Information about the service, including the service's philosophy and statement about the organisation's commitment to child care;
- Information about the selection process, reference and qualifications checks etc;
- Job description;
- Selection criteria;
- Educator handbook;
- Award or enterprise agreement information – level of position and wage scale;
- Contractual information (if relevant)
- Name and contact details for further information;
- Closing date; and
- Address for applications to be posted/emailed.

The service considers which media is most appropriate for each position to be advertised. This may include: newspapers, websites, employment agencies, local networks or associations, child care publications etc.

The service has a template for all advertisements that is reviewed and updated each time it is used to ensure that:

- The language in the advertisement reflects diversity and equity legislation;
- The services commitment to child protection is clearly stated;
- Realistic timeframes are set between advertising and close of applications for the position;
- Where possible there are opportunities for applicants to apply in a variety of ways such as by post, email or website.

The nominated supervisor/coordinator, together with the Shire of Williams CEO (as the employer) will ensure that the position's job description:

- Reflects the centre's philosophy;
- Outlines the roles, responsibilities and accountability of the position
- Accurately describes the requirements of the position;
- Lists all relevant qualifications and clearances to meet legislated requirements;
- Is current and pertinent to the position.

The selection process

The service aims to recruit staff and volunteers who are positive adult role models, who have a healthy self-esteem, stability and positive interest in their lives (this will effectively screen out unsuitable applicants).

The Shire CEO will be responsible for reviewing the applications, and make recommendations in consultation with the Co-ordinator as needed. Interviews will be conducted as required.

Before offering an applicant a position, the service will:

- Always conduct reference checks;
- Check identification of the candidate (if not known to the CEO)
- Ask for a verified academic transcript of qualifications or check details with the educational institution;
- Carefully look at the applicant's employment history and seek explanations for any gaps (study, travel, family);
- Ensure that the applicant has a current working with children card and national police clearance.

A letter of appointment will be sent to the successful applicant detailing:

- The position
- Award or enterprise agreement coverage
- Wages, salary and other benefits
- Date and time of commencement
- Terms of contract (if applicable)
- Contact person
- Probationary period (normally 3 months)

After the successful candidate has accepted the position, the unsuccessful applicants will be advised that the position has been filled.

Prior to commencement of employment, the new employee will be given a written contract of employment (if applicable), a copy of their conditions of employment and a job description of the position.

The employment of casuals and relief educators/staff

- A list of relief and casual employees will be maintained by the Coordinator and the Shire CEO. The list will identify each person's qualifications, relevant clearances and expiry dates, dates of previous work at the service.
- Each person on the relief and casual employees list will be contacted regularly to confirm their continuing availability.
- The service will regularly advertise for new relief or casual staff, to ensure that the most experienced and qualified persons are available.

Procedures

- Advertising template (Shire of Williams has this)
- Application kit
- Educator Handbook
- Job Description
- Letter of appointment pro-forma (Shire of Williams has this)
- Selection criteria

Links to other Policies

- Confidentiality and privacy
- Diversity and inclusion
- Educator/staff immunisation
- Establishing a protective environment
- Occupational safety and health
- Supervision

Sources

Australian Human Rights Commission – *Federal Discrimination Law* – sourced June 2012 from www.hreoc.gov.au/legal/FDL/index.html

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– sourced June 2012 from <http://www.worksafety.act.gov.au/links>

Policy creation date: June 2012

Policy revision date: Oct 2018

4.6 Occupational Safety and Health

Rationale and Policy Considerations

All employees and contractors within the service have a right to a safe and healthy workplace. Employers have obligations under state/territory law and federal legislation to provide a safe and healthy workplace. Employees and contractors also have obligations under law to take reasonable care to protect themselves and others in the workplace.

All children have the right to experience quality care in an environment which provides for their health and safety. The *Education and Care Services National Law Act 2010* requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection.

Philosophy

Documented approach to provision of a safe and healthy environment for both employees/contractors and children/families; approach to educator/staff professionalism and responsible conduct.

Legislation and Government Requirements

Federal and State Occupational Safety and Health legislation
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2012

Children's Needs

A safe and healthy environment in which to play and learn.

Families' Needs

Reassurance that health and safety standards are maintained at the service, and that the safety of the children is paramount.

Educator/staff Needs

A safe and healthy workplace; clear guidelines for occupational safety and health in the workplace.

Management Needs

Clear guidelines about their responsibilities for occupational safety and health in the workplace. Employees' co-operation in following health and safety instructions.

National Quality Framework

Education and Care Services National Regulations 2012 – 77; 85-102; 107; 108; 165; 168(2)
National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 21.1.1; 2.1.2; 2.2.1; 2.2.2; 2.2.3; 3.1.1; 3.1.2; 7.1.2
Early Years Learning Framework for Australia- Principles: 3 High expectations and equity. Practices: 5 Learning environment. LO: 1.1, 2.1, 3.2, 4.3, 4.4

Policy Statement

Willi Wag Tails Childcare Service protects the health and safety of children, educators, staff, families, students, volunteers and visitors to the service by keeping informed about and complying with the applicable safety and health legislation (refer to WA legislation). Complying with the *Education and Care Services National Law Act* (refer to WA legislation), and ensuring that the appropriate Codes of Practice, Standards and recommendations from recognised authorities are followed at the service to protect persons from hard, injury, illness or abuse.

The service is committed to implementing OSH practices to support its duty of care responsibilities that include:

- Developing and implementing OSH risk management systems;
- Regularly evaluating and updating OSH procedures and practices;
- Consulting and communicating widely with all stakeholders on OSH matters;
- Maintaining OSH records in accordance with federal/state OSH legislation;
- Providing orientation and professional development for educators/employees on OSH;
- Ensuring appropriate return to work programs are in place for injured employees.

Strategies for Policy Implementation

- An **Occupational Safety and Health Handbook** concerning policies and procedures regarding the OSH of the occupants and users of the service will be produced and followed. All educators/staff and management will be provided with a copy of the handbook (once completed).
- The approved provider/nominated supervisor/coordinator will ensure that information about OSH legislation, codes of practice and guidelines are made available to educators/staff and families of children attending the service.
- Employee and Employer responsibilities for occupational safety and health are included in the **Handbook**. These responsibilities are highlighted to new educators/staff as part of their induction. The approved provider/nominated supervisor/coordinator will ensure that young workers are given adequate supervision and on the job training to enable them to work safely.

OSH representative

- A safety and health representative may be elected by the staff at the service. The approved provider/nominated supervisor/coordinator may decide to appoint the most senior staff member to this role, particularly if the staff have not elected their own representative, or where the approved provider/nominated supervisor/coordinator is not on hand to monitor safety and health at the service on a daily basis.
- The elected or appointed OSH representative will be responsible to receive and investigate all hazards and reports of breaches to the safety and health of employees, in consultation with the approved provider/nominated supervisor/coordinator.
- The approved provide/nominated supervisor/coordinator understands their responsibility to consult and co-operate with an elected OSH representative, other employees, in regards to OSH issues, and will actively support and encourage educator/staff involvement in these areas.
- An OSH committee may be elected, that will oversee policy development, planning, monitoring programs, emergency procedures, safety and health training, trends in accident

and illness reports, accident investigations and the introduction of any new processes or tasks that could affect employees' safety and health in the workplace.

Professional development

A training program is organised every 12 months to ensure the approved provider/nominated supervisor/coordinator and educators/staff can identify:

- Key elements of the relevant OSH Act, including the content in general terms, responsibilities that apply to them, and the consequences of failing to comply;
- The services health and safety policies and procedures;
- Safe and healthy workplace practices, including immunisations, hygiene practices, special requirements for employees with special health needs, pregnancy, young employees etc.
- How to report hazards
- How to have a say in safe work practices and procedures.

Risk Management Strategies

- Educators/staff must report all incidents leading to risk of injury including those leading to high stress levels, and positive steps will be taken to remove hazards and understand and minimise stress suffered by individual educators/staff members.
- Play areas and equipment will be checked daily by the educators/staff to ensure that they are in a hygienic, clean and safe condition and do not pose a hazard to children; and that soft fall surfaces (where applicable) under and around outdoor play equipment are adequate and evenly spread. Educators/staff will notify the OSH representative of any equipment and/or area that is not clean or in a safe condition, and will write details on a **Hazard Report**.
- All new equipment will be checked against Australian Standards.
- The approved provider/nominated supervisor/coordinator will ensure that furnishings and equipment used will limit risk of injury or ill health in the workplace ie: adult sized chairs for educators/staff; appropriate storage systems, safe electrical appliances and circuit breakers installed etc.
- The approved provider/nominated supervisor/coordinator will ensure that health and safety practices followed in the service comply with federal and state legislation and will allocate sufficient resources in the annual budget to ensure a healthy and safe environment. This will cover direct costs such as provision of safety equipment, maintenance of buildings, fittings and equipment, purchase of safety and health advice, training and resources.
- All work related injuries and diseases or "near misses" will be investigated to determine the causes, and action taken to prevent similar events in the future.
- Educators/employees with special needs including pregnancy, a medical condition such as epilepsy or asthma, physical or intellectual disabilities, dyslexia or any other condition that means the person is unable to read, and people who are young and inexperienced, will be given special consideration for their safety and health needs. This will be achieved through careful consultation with the employee, and documentation, monitoring and review of the strategies established to ensure their special needs are met.
- OSH issues and incidents will be regularly discussed at educator/staff meetings.
- The approved provider/nominated supervisor/coordinator will review OSH policy with the educators/staff team at least annually, or after a major incident has occurred, to ensure that the system in place is working, and as a general rule there is enough time for educators/staff to complete OSH tasks allocated to them. The review will identify who is responsible for various tasks, what resources are required, and when tasks are to be completed.

- The service is a non-smoking area. This includes all indoor and outdoor play areas and anywhere that is within sight of the children. Passive smoking harms the lungs of young children and may trigger an asthma attack.
- Whenever the education and care service is operating the approved provider/nominated supervisor/coordinator and educators/staff members or volunteers present will not be affected by alcohol or drugs that adversely affect the person's ability to educate and care for children.

OSH records

- Educators/staff will record their daily checks on a **Daily Safety Checklist**.
- Educators/staff will record all injuries or illness to children on the service's **Accident/Illness/Trauma report**. Details entered will include: date, time, and place of incident, injury or condition, brief description of events, adult witnesses, any anticipated treatment or outcome.
- Injuries or illness to educators/staff must be recorded on the **Educator/Employee Injury/Accident/Illness report**.
- Educators/staff will record all incidents with the potential to cause injury or illness on a **Hazard Report**.
- The approved provider/nominated supervisor/coordinator will ensure any other records required to be kept in compliance with OSH legislation and regulations will be maintained as appropriate.
- The approved provider/nominated supervisor/coordinator will complete a **Duty of Care Checklist** annually to ensure that all duty of care responsibilities are completed.

Worker's compensation and rehabilitation

- The approved provider/nominated supervisor/coordinator will ensure that appropriate workers compensation cover is available to all employees of the service, and that employees understand the importance of reporting injuries/illness which occurs during the course of their work. Employees will also be informed about the time deadlines for completing workers compensation forms, and be provided with information about what can be compensated.
- The approved provider/nominated supervisor/coordinator will ensure that injured employees are provided with appropriate rehabilitation and health care services and that a flexible rehabilitation program is implemented in the service until they are fully recovered.

Procedures

- Accident/illness/trauma report
- Daily safety checklist
- Duty of care checklist
- Employee/educator injury/accident/illness report
- Educator handbook
- Educator/staff orientation checklist
- Hazard report

Links to other policies

- Accidents, Emergencies and First Aid
- Delivery and collection of children
- Educator/staff dress code (Educator Handbook)

- Educator/staff immunisation
- Establishing a protective environment
- Health, hygiene and infection control
- Healthy eating and food handling
- Illness
- Guiding children’s behaviour
- Maintenance of a safe environment
- Managing pregnancy with Education and Care Services
- Medications and Medical Conditions
- Sun Protection
- Supervision
- Use of tobacco, alcohol and other drugs

Sources

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Worksafe WA – Reducing the risk of infectious diseases in childcare workplaces – Guidance Note – sourced June 2012 from http://www.commerce.wa.gov.au/WorkSafe/PDF/Guidance_notes/Guide-diseases_in_child_care.pdf

Worksafe ACT – Links to national health and safety sites, and national worker’s compensation sites – sourced June 2012 from <http://www.worksafety.act.gov.au/links>

Policy creation date: June 2012
Policy revision date: Oct 2018

4.7 *Managing Pregnancy within Childcare*

Rationale and Policy Considerations

All employees within the service have a right to a safe and healthy workplace. Employers have obligations under state/territory and federal legislation to provide a safe and healthy workplace. Employers and contactors also have obligations under law to take reasonable care to protect themselves and others in the workplace. Employers that are pregnant will have additional needs to ensure their continued health and safety in the workplace.

The Fair Work Act and Paid Parental Leave Scheme establishes that employees are entitled to both paid and unpaid parental leave, flexible working arrangements to help to balance work and family responsibilities and protection from discrimination due to their pregnancy or family responsibilities including breastfeeding/expressing.

Legislation and Government Requirements

Federal and State Occupational Safety and Health Legislation

Federal and State Equal Opportunity Legislation

Paid Parental Leave Scheme

Fair Work Act 2009 (and any other relevant industrial awards or enterprise agreements)

Children's Needs

Continuity of care

Families' Needs

Reassurance that health and safety standards are maintained at the service and their children are safe.

Educator's Needs

A safe and healthy workplace; equity in continuing employment whilst pregnant; information about the health risk to themselves and their unborn child; support from the employer to continue to work in a safe and healthy environment; opportunity to return to flexible work hours; access to childcare; other educators/staff needs are to be considered and supported by the employer.

Management Needs

To know and understand current legislation and their responsibilities to pregnant employees; employees to be up front and truthful about any difficulties they are experiencing so that issues can be addressed and their safety and health needs are assured; other staff to support pregnant employees.

National Quality Framework

Education and Care Services National Regulations - 88(1); 90; 168(2)

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 3.2.1; 4.1.1; 4.2.2; 7.1.2; 7.1.3

Early Years Learning Framework for Australia- Principles: Respect for diversity. Practices: Continuity of learning and transitions.

Policy Statement

The service is committed to providing a safe and healthy workplace for all employees including pregnant workers. The centre understands that pregnancy can bring many changes to women's ability to manage certain types of work, particularly in the later stages of pregnancy. The service will therefore work with all employees to negotiate a supportive working environment that will assist them to be healthy and productive members of the workplace.

Strategies for Policy Implementation

Occupational Safety and Health

- The service considers that any workplace hazard for pregnant employees may also be a hazard for other employees. Therefore procedures to reduce risk of injury or ill health will be discussed with all employees in accordance with the service's Occupational Safety and Health Policy.
- Where there is an identifiable risk associated with pregnant educator/employees work, the nominated supervisor/coordinator will consult with the employees to examine how the work can be modified to eliminate or minimise risk.
- The employer will maintain current information about their occupational safety and health responsibilities to their employees and where practicable, maintain a safe workplace for all employees.
- The employer will keep an Educator/Staff Immunisation Record of current immunisations for all educators/staff employed at the service.
- In regard to infectious diseases, the employer will alert all educators/employees to the potential risk to health that may arise through their employment at the service. Female educators will be advised they should have their immunity to Rubella, Measles, Chicken Pox and Cytomegalovirus (CMV) infections tested well before pregnancy.
- Services may decide to ask educators/employees to sign a declaration stating they have been advised of these facts as part of the orientation process. It is also advisable to remind educators/employees about the potential risk on a regular basis ie: a notice in the staff room, discuss at staff meetings, annual letter of reminder from employer.
- An educator can be immunised against Rubella before pregnancy although care should be taken not to fall pregnant within 3 months of immunisation.
- As there is no immunisation against CMV, should an educator who is planning pregnancy be found to be in the seronegative (non-immune), they should discuss this with their employer and health professional to identify measures that will minimise any risk potential during pregnancy. This will include increased vigilance in ensuring universal hygiene procedures are followed.

Employee Responsibilities

- It is necessary that employees inform the employer of their pregnancy as early as possible so that any potentially adverse risks can be averted, and alternative arrangements be made if necessary.
- Pregnant employees have an obligation to inform the employer in writing of the expected date of birth and the intention to take parental leave including the dates on which the employee wishes to start and finish the leave. A doctor's certificate confirming the pregnancy and expected date of birth is required to prove entitlement to take parental leave.

- 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.
- The employer required that pregnant employees raise any difficulties that they are experiencing in regard to performing their duties at the service, so that potential risk to health can be avoided and quality child care maintained.
- Employees have a responsibility under Occupational Safety and Health legislation to take reasonable care to protect themselves (and others) in the workplace. This includes co-operating with the employer on health and safety matters, such as taking appropriate precautions to avoid health risks during pregnancy.

Industrial Issues

- The employer will maintain current information about their industrial responsibilities to their employees included in the Fair Work act, the relevant industrial award or enterprise agreement, and will be registered through Centrelink for the Paid Parental Leave Scheme.
- The employer will ensure that all employees are made aware of their legal right to paid and unpaid parental leave during orientation to their position, or at the time the employee advises of their pregnancy.

Managing the Work Environment

- The employer will be as flexible as possible, within the constraints of the education and care workplace, to ensure the special needs of pregnant employees are considered and options to address their needs implemented wherever possible. This may include all or some of the following, depending on the specific needs of the individual:
 - Review the employee's duties and negotiate alternative duties where that is necessary and possible in consideration of operational and other educator/staff member's needs.
 - Review work practices in conjunction with the educator/staff team, to address specific issues for pregnant employees ie: manual handling aids or support from other educators/staff; ability to set up heavy or awkward equipment; appropriate seating; toilet breaks; heat tolerance; review aspects of universal hygiene procedures.
 - Ensure all educators are supported by another educator in line with establishing a Protective Environment Policy - thus confirming the pregnant employee is always supported by another educator/staff member and protected from aggressive actions when dealing with distressed children or difficult behaviours.
 - Seeking the co-operation of the educator/staff team to be flexible and supportive of the pregnant employee.
 - Review educator rosters to accommodate health issues such as morning sickness, increased fatigue, ante-natal visits, doctor's appointments etc.
 - Consideration given to educators/staff wearing maternity uniforms where the service has a uniform for educator/staff.
- The employer will support liaison with medical practitioners by providing a Pregnant Employee Medical Information Sheet, 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.

Returning to work after Maternity Leave

- The employee is required to take a minimum of 6 weeks compulsory leave after giving birth, before returning to work.
- The employee is required to confirm her intention of either returning to work or extending the period of parental leave in writing to the employer not less than four weeks prior to the expiration of her period of parental leave. She shall be entitled to the position she held immediately prior to taking leave, or in the case of an employee who has transferred to alternative duties, to the position she held immediately prior to this transfer. Where such a position no longer exists, but other positions are available for which the employee is qualified and capable of performing, she will be entitled to a position as nearly comparable in status and salary to her former position.
- The employer must inform replacement employees engaged as a result of an employee taking maternity leave of the temporary nature of the employment and the rights of the employee being replaced to return to work.
- Employees returning to work after the birth of their child will not be discriminated against in regard to accessing education and care for their child within the service or expressing/breastfeeding. To ensure the professional integrity of the service, employees will not work directly with their child where possible. Should issues arise in relation for an employee's child, the options for a change in care arrangements will be discussed with the employee, with the aim of reaching an agreed resolution.
- The employer will support the returning employee to settle back into the work environment and have concern for their physical and emotional well-being.
- In the interests of maintaining a supportive and healthy workplace, and to encourage employees to return to work after parental leave, thus maintaining continuity of care for children, the employer will, where practicable, offer flexible work hours to the employee on their return to work.

Procedures

- Educator/staff injury/accident/illness report
- Educator handbook
- Educator/staff immunisation record
- Educator/staff orientation checklist
- Pregnant employee medical information sheet

Links to other Policies

- Educator/staff dress code (in Educator Handbook)
- Educator/staff immunisation
- Educator/staff and Volunteer Orientation (forms in procedure file)
- Educator/staff Grievances and disputes (refer to Educator Handbook)
- Establishing a Protective environment
- Health, hygiene and infection control
- Illness
- Maintenance of a safe environment
- Medications and medical conditions
- Occupational safety and health
- Supervision

Sources

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Ways to Work - *Laws affecting pregnancy and work* - sourced June 2012 from <http://ways2work.business.vic.gov.au/employers/pregnancy-and-work/Laws-affecting-pregnancy-and-work>

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Policy Creation Date: June 2012
Policy Review Date: Oct 2018

4.8 Use of tobacco, alcohol and other drugs

Rationale and Policy Considerations

All employees and contractors within the service have a right to a safe and healthy workplace. Employers have obligations under state and federal legislation to provide a safe and healthy workplace. Employees and contractors also have obligations under law to take reasonable care to protect themselves and others in the workplace.

All children have the right to experience quality care in an environment, which provides for their health and safety. The *Education and Care Services National Law Act 2010* requires that approved providers/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm.

Both adults and children at Willi Wag Tails Childcare service are entitled to be protected from the effects of environmental tobacco smoke, and the actions of people under the influence of alcohol or other drugs. Staff with health issues that require on-going medications/drugs, may need special consideration in relation to this policy.

Philosophy

Documented approach to provision of a safe and healthy environment for both employees/contractors and children/families; approach to educator/staff professionalism and responsible conduct.

Legislation and Government Requirements

Federal and State Occupational Safety and Health legislation
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2012

Children's Needs

Safe and healthy environment in which to play and learn; educators are healthy and do not expose children to hazards.

Families' Needs

Reassurance that health and safety standards are maintained at the service and their children are safe.

Educator/staff Needs

A safe and healthy workplace; clear guidelines about their responsibilities for occupational safety and health; protection from injury or harm due to impairment through environmental tobacco, alcohol or drugs.

Management Needs

To meet their legal obligations to ensure a safe and healthy workplace; reduce absenteeism due to accidents caused by alcohol or drug use.

National Quality Framework

Education and Care Services National Regulations – 82; 83; 99; 168(2)

National Quality Standard for Early Childhood Education and Care and School Age Care – 4.2.2; 5.1.2; 7.1.2; 7.1.3

Early Years Learning Framework for Australia- Practices: learning environment.

Policy Statement

The Education and Care Services National Law specifies that educators/staff/nominated supervisors must not be affected by alcohol or drugs that adversely affect that person's ability to educate and care for children whilst on the education and care services premises when the service is operating. Children that are being educated and cared for by the service must be provided with an environment that is free from the use of tobacco, illicit drugs and alcohol. To meet its obligations under these and occupational safety and health legislation the service has adopted a smoke-free workplace policy that will eliminate smoking in the workplace and prevent exposure of workers and visitors to environmental tobacco smoke. The service will also act promptly to remove any person considered to be affected by alcohol, illicit drugs or other potentially deleterious substance.

Strategies for Policy Implementation

- The use of tobacco, alcohol and other drugs policy will be highlighted to all educators/staff during their orientation to the service when first employed, and educators/staff will be regularly reminded during educator/staff meetings or through staff room notices that they must not smoke in the buildings, outside play areas or parking areas of the service, or report to work if they are impaired from the use of drugs of alcohol as this will compromise their duty of care to the children and to their work colleagues.
- Educators/employees will be provided with access to resources that explain the risk to occupational health and safety that environmental tobacco smoke in the workplace, and the consumption of alcohol or other drugs poses, and the relevant legislative provisions banning these activities in the workplace.

Smoking

- NO SMOKING signs are displayed at entrances and throughout the premises to alert employees and visitors entering the service to the non-smoking policy.
- Smoking is not permitted at functions such as professional meetings, parent evenings, training sessions etc, held in the education and care premises.
- If driving a private car (for work purposes) and another employee or a child is present, smoking is not permitted.

Use of alcohol and drugs

- Employees must notify the nominated supervisor of any changes or additional to current personal medication. This is to ensure the safety of the employee and their co-workers in the event that they have an adverse reaction to the medication being taken. This includes all over the counter medication as well as prescription medication.
- Employees must not use recreational drugs or consume alcohol for a minimum of 8 hours before their shift begins.

- If the nominated supervisor/coordinator suspects an employee of being impaired from alcohol or other drugs during their work shift they will immediately consult with the employee to identify the extent of the problem and allow the employee to respond to any issues.
- If another educator/staff member suspects a work colleague of being impaired from alcohol or other drugs they should immediately report their concerns to the nominated supervisor/coordinator.
- If after consultation the employee admits to being impaired from alcohol or other drugs, the employee will be warned that their behaviour was unacceptable and that a repeat will be seriously dealt with, and he/she will be instructed to leave the workplace immediately.
- If the employee does not admit to being impaired from alcohol or other drugs, but the nominated supervisor/coordinator believes that their behaviour and responses to questions indicates otherwise, this will be explained to the employee and one of the following options will be implemented depending on the specific situation
 - The employee will be asked to undergo an alcohol or drug test;
 - The employee will be allocated duties which do not require contact with enrolled children;
 - The employee will be required to leave the workplace.
- Where a positive test result is received, the employee will be warned that their behaviour was unacceptable and that a repeat will be considered to be a serious misconduct, and will be handled in line with standard grievance procedures.

Supporting employees to better health

- The service will encourage, support and assist employees who wish to give up smoking where practicable.
- Where the employee has a specific problem that is contributing to their behaviour, the service will support them through some or all of the following means:
 - Suggesting the employee contact his/her personal doctor for initial assessment and treatment, and helping the employee locate a doctor if he/she does not have a personal doctor.
 - Identifying community-based organisations, including those of medical and non-medical nature, and self-help groups that may be useful to employees in dealing with their alcohol or drug-related problems, and refer the employee to those organisations.
 - Identify professionals and services which specialise in the counselling, treatment and rehabilitation of alcohol and drug-related problems in the community.
- The level of support the service is able to provide the employee will be dependent upon:
 - The seriousness of the employees actions;
 - The employee's length of service and past record;
 - The service's ability to provide support.

Maintaining a safe premises

- Any further incident in which the employee is found smoking or impaired from alcohol or other drugs during their work shift will be considered to be a serious misconduct, and will be handled in line with standard grievance procedures.
- The nominated supervisor/coordinator will ensure that neither tobacco, alcohol or drugs nor other potentially deleterious substances are present on the premises whilst children at the service, with the exception of medications for children or staff that are authorised according to service policy.

Procedures

- Duty of care checklist
- Educator/employee injury/accident/illness report
- Educator handbook
- Educator/staff orientation checklist.

Links to other Policies

- Accidents, Emergencies and First Aid
- Educator/staff and volunteer orientation
- Establishing a protective environment
- Health, hygiene and infection control
- Maintenance of a safe environment
- Medications and medical conditions
- Occupational Safety and Health
- Supervision

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Policy creation date: June 2012

Policy revision date: Oct 2018

5.1 Delivery and Collection of Children

Rationale and Policy Considerations

All children have the right to experience quality care in an environment which provides for their health and safety. The *Education and Care Services National Law Act* (as applicable) requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm. Ensuring that children are only released to authorised persons is a key aspect of children's safety.

Legislation and Government requirements

State/Territory laws relating to child protection

Education and Care Services National Law Act 2010 (as applicable)

Education and Care Services National Regulations 2012

Children's Needs

Arrival and departure routines to be relaxed and happy and transitions from the service to home protect the child's well-being.

Families' Needs

- Delivery and collection of their child to be stress free and provide reassurance that their child will be safe and not be released to unauthorised persons;
- Clear late pick up procedures;
- Understanding if they are unavoidably delayed

Educator/staff Needs

- Time to discuss matters with families at the beginning and end of the day;
- Clear guidelines to follow in the event that a child is not collected when expected;
- Their own commitments after normal working hours not to be compromised;
- Overtime pay (where applicable)

Management Needs

- Parents take responsibility for their child and not misuse the services offered by the service;
- Dependable staff;
- Support from relevant agencies and departments

National Quality Framework

Education and Care Services National Regulations 99; 158; 161; 168(2)(f); 176

National Quality Standard for Early Childhood Education and Care and School Age Care (2012) – 2.2.1; 2.2.2; 5.1.2; 6.1.2; 7.1.2; 7.1.3

Early Years Learning Framework for Australia - Practice: Holistic approaches; Responsiveness to children - Outcomes: 3

Policy Statement

Willi Wag Tails Childcare Service will ensure that the attendance of all children enrolled in the service is accurately recorded in accordance with regulatory and government guidelines. Families are required to personally deliver and collect their children, or arrange with the service for an authorised person to do so. The services procedures for delivery and collection must be followed in every instance, to ensure the safety and well-being of children at all times.

The service will ensure the protection of children not collected by closing time. Families are expected to abide by service hours, except in an extreme emergency. The service is unable to provide care to children after hours on a regular basis.

Strategies for Policy Implementation

Arrival at the service

- On arrival at the service families/children must report directly to the educator to signal their arrival at the service. Young children must be handled directly to the child's educator.
- Educators will welcome families and children on arrival and seek to engage them in the day's planned activities.
- Any personal items must be put inside the child's bag, which should be stored in the marked pigeon holes in the foyer of the centre.
- Any medications must be given directly to the educator who will check the family has completed an Authority to Administer or Self-Administer Medication Form and then store the medication in the appropriate place.
- Educators and families or children may need to exchange information at this time in preparation for arriving at or departing from the service. If this exchange of information involves discussions about private or personal details, the discussion will take place in a private area in accordance with the service's Confidentiality/Privacy Policy.

Attendance Record

- Accurate attendance records will be kept and checked each day.
- The enrolling parent/guardian or authorised person who brings the child to the service or collects the child from the service must initial/sign the child's times of arrival and departure.
- When a child arrives at the service unaccompanied by the parent (eg: where the child is collected after attending school) educators/staff will note the time of arrival or departure. The parent/guardian or authorised person (not service educators/staff) will later note and sign/initial the child's times of arrival and departure.
- If a child does not attend for any reason the service will enter the type of absence on the attendance record or allowable absence record and the parent/guardian must verify the absence by signing/initialling the attendance record and providing the necessary documentation at a later date.
- Families who do not complete the attendance records will not be eligible to claim Child Care Benefit.

Authorisation for collecting children

- The names and contact numbers of all persons authorised to collect children from the service must be included on the Enrolment Form. Any changes to these authorities must be advised in writing to the service by enrolling parent/guardian as soon as possible.
- If the enrolling parent/guardian arranges for an authorised person to collect their child from the service, they must contact the service to advise of this arrangement and confirm who will collect their child.
- If the service has not been notified and someone other than the enrolling parent/guardian arrives to collect the child, the nominated supervisor/coordinator will contact the enrolling parent/guardian to obtain their authorisation which will be in writing wherever possible. The child will not be released until the enrolling parent/guardian's authorisation has been obtained. If the authorised person is not known to the service, the enrolling parent/guardian will be asked to provide a description of the person concerned, who will also be required to provide proof of their identity.

Late Collection

- The services hours of opening are clearly displayed at the entry to the service.
- Parents/guardians who are unavoidably delayed and are unable to collect their child at a negotiated collection time must telephone the service to advise of their lateness and expected time of arrival. If a parent/guardian is unable to collect their child prior to closing time they should arrange for another authorised adult to collect the child and advise the service of this arrangement. This advice should be in writing if at all possible.
- Special circumstances ie: traffic accident or vehicle breakdown, will be given consideration in relation to the administration of late collection fees.
- If the parent/guardian has not contacted the service and the child has not been collected 10 minutes after the negotiated collection time, the service will attempt to telephone the parent/guardian or if this is not possible telephone the emergency contact people listed on the child's enrolment form to arrange for the child's immediate collection.
- If no-one can be contacted and the child has not been collected 30 minutes after the service's normal closing time, educators will follow the Procedure for Late Collection.
- When a parent/guardian is continually and regularly late arriving at the service to collect their child, the nominated supervisor/coordinator/educator will discuss other child care options with the family.

Procedure for late collection

- If a child has not been collected 30 minutes after closing time, and the parents/guardians of the child, nor other emergency contact person has been able to be contacted, the senior educator/staff member present will contact:
 - The approved provider (or nominated supervisor/scheme coordinator); and
 - Relevant child protection agency and/or regulatory authority (this is part of the service's late collection action plan)
 - To advise them of the situation and consult on what action to take.
- The service will develop a Late Collection Action Plan which should include:
 - Timelines and triggers for ongoing communication between the service and the approved provider/scheme coordinator/child protection agency/ regulatory authority ie: after an agreed period of time, or when something happens to change the situation (ie: parent/guardian arrives)
 - Whether the service should contact the police

- What actions the approved provider/scheme coordinator/child protection agency/regulatory authority will take;
- The service's availability to continue to care for the child, ie: the length of time educators are available to stay at the service, concerns regarding the security of the premises after hours etc.
- Who else the service needs to contact in regard to the situation.
- In the interests of protecting educators from allegations of abuse, where possible two adults will remain at the service with the child. The decision on whether two staff need to be present will depend on some or all of the following considerations:
 - Security in the area in which the service is located;
 - The cost of having 2 educators present;
 - The experience of the educators;
 - The child and his/her specific needs.

If it is decided that only one educator can stay with the late child, it is important to ensure someone else is on hand to provide assistance if necessary.

- If the educators present are unable to remain at the service to care for the child, the nominated supervisor/coordinator will follow the service's agreed plan for staffing late collections, which will ensure the well-being of the child. This could include any of the following:
 - Educators who have agreed to make themselves available will be contacted and asked to relieve present educator as soon as they are able;
 - The nominated supervisor/coordinator or approved provider will send a representative to relieve one of the present educators as soon as possible (whilst ensuring educator requirements are maintained).
- The child protection agency/regulatory authority will be contacted as agreed in the Late Collection Action Plan, to provide ongoing updates of the situation as it evolves.
- The service may decide to contact the police to try and find out if the parent/guardian has been involved in an accident, or to ask the police to take action to try to locate the parent/guardian.
- Educators will care for the child's needs (ie: provide a snack or evening meal) and reassure the child if he/she is anxious, provide the child with some fun games or activities and, if appropriate, settle the child down to sleep (young children).
- When the parent/guardian or emergency contact person arrives to collect the child they will be required to complete and sign a Late Collection Form, which indicates the time of collection and confirms their understanding that a late fee will be charged.
- Educators will advise the child protection agency/regulatory authority/police (if contacted), and the nominated supervisor/coordinator and approved provider that the child has been collected.

Ongoing Strategies

- The policy on delivery and collection of children will be highlighted to parents at the time of enrolment, and provided in writing on request.
- The service will ask families to update their own, and their emergency contact numbers as they change. A system of regular reminders will be implemented through the service newsletter, notices in the entry area, a reminder on the family's fee receipts, a letter to parents, or by other means.
- Families will be encouraged to name additional emergency contacts, who they expect would be available and able to assist in an emergency. This could include trusted neighbours, if the family does not have relatives or friends on hand to assist.

- Families are required to plan their day in order to ensure that they are at the service prior to closing time. Educators may need time to give parents/guardians information about their child's day. Educators also have evening commitments they wish to fulfil.
- The policy will be reviewed regularly with educators, and agreement reached as to how the staffing of late collections will be managed. Management understands that an educator's personal situation may limit their ability to remain at the service after hours and will not impose pressure on educators to unwillingly take on these extra duties. Any extra hours worked by employees will be paid as overtime.
- When families are continually late to collect children, the following process will be followed to address continuing issues:
 - The nominated supervisor/coordinator/educator will speak with the parent to alert them to the grievance process, and to discuss any difficulties the parent is experiencing on collecting their child by closing time. Strategies for the parent to adhere to service hours will be discussed, and the parent will be asked to give a commitment to implementing these strategies.
 - On the next late collection (the service will need to decide on the time frame for this ie: within 2 weeks, 1 month or more), a letter will be sent to the parent asking them that another late collection of their child will result in cancellation of their place at the service.
 - If there is a further late collection (within the service's time frame) the family's enrolment will be cancelled.
 - Where a number of families are continually late the service may consider surveying parents to see if there is sufficient need to consider extending the hours of opening (if feasible).

Procedures

- Attendance record
- Authority to Administer or Self-Administer Medication Form
- Enrolment form
- Grievance procedures
- Late Collection Action Plan
- Late Collection Form
- Orientation Checklists

Links to other Policies

- Accidents, emergencies and First Aid
- Confidentiality and Privacy
- Enrolment and Orientation
- Excursions and Transport
- Grievances and Complaints Management
- Health, Hygiene and Infection Control
- Illness
- Medications and medical conditions
- Payment of fees
- Records Management
- Supervision

Sources

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Section 4.7 – Who is responsible for ensuring that attendance records are kept?

Section 4.8 – Absences from Care

Section 5.5 – Key obligations imposed on approved child care services under family assistance law

Section 6.5 – What my services responsibilities to parents?

Section 10 – Reporting attendance information

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5.2 Guiding and Supporting Children's Behaviour

Rationale and Policy Considerations

“An important aspect of children's belonging, being and becoming involves them learning how their behaviours and actions affect themselves and others and developing skills to regulate these independently”

Positive guidance and support towards acceptable behaviour enables children to learn over time how to manage their feelings, and take responsibility for their own actions.

Older children need guidance and support in making responsible choices and regulating their own behaviour. Children learn to consider alternative behaviours and recognise inappropriate behaviour within the group.

The *Education and Care Services National Regulations 2011* requires the service to have a written policy on positive guidance of child behaviour that reflects current practice. The use of physical punishment and restraint; physical, verbal or emotional punishment and practices that demean, humiliate, frighten or threaten a child are prohibited.

Legislation and Government Requirements

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

National Quality Standard for Early Childhood Education and Care and School Age Care

Children's Needs

- To have their feelings acknowledged and accepted and be able to express their emotions appropriately;
- To feel safe and protected;
- To have their cultural, religious and racial diversity respected;
- Consistent expectations;
- Maintain children's dignity and rights; and
- Provide children with positive guidance and support towards acceptable behaviour

Families' Needs

- Their children are respected and liked;
- Educators develop responsive, warm, trusting relationships with children and their families;
- Clear guidelines about acceptable behaviours;
- Involvement in determining appropriate strategies for dealing with challenging behaviour;
- Avenues of support for parenting skills;
- Non-judgemental communication from staff.

Educator/Staff Needs

- Educators to support each other and reflect on ways to improve relationships and interactions with children and their families;
- Access up-to-date training and resources on dealing with behaviour issues and ensuring that learning programs are meeting the child's developmental, social, emotional and cognitive needs;

- Support from families and management in dealing with difficult behaviours

Management Needs

- Educators/staff and nominated supervisor/coordinator to interact in a respectful and cooperative manner and be positive role models for children;
- Appropriately trained educators and budget to sustain this;
- Support from relevant agencies and professionals to make appropriate decisions in the best interests of the individual child and other children in the education and care setting.

National Quality Framework

Education and Care Services National Regulations 2012 – 155-156; 168(j)

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 2.2.1; 3.2.1; 5.1.1; 5.1.2; 5.2.1; 5.2.2; 6.1.1; 7.1.2

Early Years Learning Framework for Australia – Principle 1 – Secure, respectful and reciprocal relationships; Principle 2 – Partnerships; Principle 4 – Respect for Diversity – Practice: Holistic approaches; Responsiveness to children; Cultural competence; Continuity of learning and transitions – Outcomes 1.2, 1.3, 1.4, 2.1, 2.2, 2.3, 3.1, 5.1.

Policy Statement

The purpose of the service's Guiding Children's Behaviour Policy is to:

- Encourage acceptable forms of behaviour by using strategies that build children's confidence and self-esteem;
- Provide children with support, guidance, opportunities to manage their emotions and develop ways to appropriately control their own behaviour; and
- Promote collaborative approaches to behaviour guidance and support between the service's stakeholders and/or external agencies.

Behaviour guidance and support is a process that focuses on the 'whole' child. Willi Wag Tails Childcare service will provide a secure, respectful and stimulating environment which encourages children to co-operate, enhances their self-esteem and encourages their ability to interact with others, and where acceptable behaviour is promoted and any recriminations are kept to a minimum. The educators/staff will endeavour to build relationships with children based on mutual respect and trust.

The service recognises and understands that a child's behaviour may be affected by their:

- Age and development;
- Level of familiarity with the service's routines and play limits ie: when they first start education and care children may not understand what behaviour is expected of them;
- General health and well-being;
- Relationships with their family;
- Play and learning environment, which include the physical indoor/outdoor settings, the weather, the time of year, the time of day;
- Educator's teaching strategies and caring practices, which includes how those strategies are implemented;
- Relationship with other children and stakeholders, such as students, volunteers and visitors; and
- External factors, such as family, home life school or peer group experiences, or media coverage of traumatic events.

Educators will encourage children to talk about any concerns that they may have, and will ensure the program reflects and encourages core values such as friendliness, acceptance, respect, kindness, tolerance and co-operation. Educators will always listen and respond to children when incidents of bullying, violence or harassment are reported or observed, and will act to eliminate such incidents at the service. Where a child continues to behave in an unacceptable manner, families will be consulted to establish behaviour support strategies, which ensure that children are treated with the same respect and empathy as an adult would expect.

Strategies for Policy Implementation

Creating the right environment

- Educators create environments with sufficient space that are likely to encourage positive social interactions.
- Children initiating their own experience using equipment and resources that they can access independently.
- Educators plan experiences in which children practice cooperating, sharing and helping, and point out the advantages of behaving this way.
- How children move from one experience to another is planned to allow smooth transitions and limit interruptions for other children.
- Adequate resources are provided to reduce conflict, but still provide opportunities for children to share.

Positive behaviour guidance strategies

- Educators build relationships with children that are safe, secure and convey respect. Educators/staff show their respect by using normal tone and volume when speaking with children; allowing older children greater freedom and responsibility in recognition of their developmental stage; and working co-operatively with children to solve problems. Shouting at children is not acceptable.
- Children's appropriate behaviours are acknowledged so that children know when they have acted appropriately.
- Positive behaviours are encouraged by diverting children to more appropriate experiences, showing appreciation for appropriate behaviour and building on each child's strengths and achievements.
- Children are encouraged to express their feelings in acceptable ways and to settle their differences in a peaceful manner. Educators talk to children about the types of emotions they experience and how to recognise similar feelings in the future.
- Educators listen to children's needs and provide them with opportunities to work through their emotions independently. Children's attempts to deal with their emotions are acknowledged and supported.
- Educators will help all children to understand how their behaviour affects others and will ensure children's self-initiated play:
 - Does not make any other child feel frightened or intimidated;
 - Respects the rights and feelings of other;
 - Is not overly boisterous or loud; and
 - Is valued and supported.
- Educators will always model behaviour that encourages inclusion, a sense of fairness, empathy and co-operation with others.

Setting Limits

- Clear guidelines about acceptable behaviours are developed with input from children, families, educators/staff and management. Families are consulted about expected child behaviours at the service at the enrolment interview (if applicable) and through communication strategies such as the Parent Handbook, service newsletters, and daily contact with the child's educator.
- Limits to behaviour will be clearly expressed in positive terms and reinforced consistently in a developmentally appropriate way.
- Children are involved in establishing play and safety limits in the service, which reflect recommended best practices, and the consequences involved with limits are not adhered to.
- Younger children will be given safety and behaviour guidance limits by their educators as they need direction to understand what is acceptable and appropriate in particular situations.
- Educators will negotiate with older children and involve them in setting agreed rules and behaviour limits to encourage ownership of the limits and responsibility for their own behaviour.

Challenging Behaviours

- The service believes that developing a supportive relationship with the children encourages them to learn skills in self-control. Punishing a child stops the negative behaviour for a while but does not teach the child self-restraint. The consequences of negative behaviour will be discussed with the child and will be consistently followed through. No further punishment will be given and the child will be reminded in positive terms of the expected behaviour.
- Educators will label the negative behaviour and not the individual child, so that it is always the behaviour that is being managed and not the child.
- A "cooling off" period may be needed so the child can calm down before discussing what happened and sharing their feelings with the educator, who will in turn talk about their own feelings and responsibilities with the child. Educators will always talk to the child quietly and as an equal, and preferably away from the rest of the group. Time out to cool down will vary from child to child and may include:
 - Listening quietly to soothing music;
 - Sitting quietly with the educator;
 - Doing something physical ie: kicking a football;
 - Sitting quietly with a book;
 - Talking to a close friend;
 - Being left alone (but not out of sight of the educator)
- Where a dispute or conflict occurs educators will talk separately to all the children involved, be calm, fair, positive, and firm in their assessment of the situation. Wherever possible the children will be involved in deciding on the appropriate course of action to follow. Educators will not react to conflict situations by getting angry themselves as this could inflame the situation further. If an educator feels they are unable to control their anger in a particular situation, they will ask for assistance from another educator while they remove themselves from the situation to cool down.
- No child will be isolated for any reason other than illness or accident for any period of time, Children will be supervised by an educator at all times.
- No child will receive any form of corporal punishment, punishment by solitary confinement, punishment by physical restraint or other demeaning, humiliating or frightening punishment, or withheld food or drink as a form of punishment.
- Parents/guardians who wish to discipline their own children whilst in the service will not at any time use any form of corporal punishment or use unacceptable language.

- Non-enrolled children in the company of their parents/guardians will be required to conform to service policy on acceptable behaviour. If a parent/guardian is not able to control their non-enrolled child's behaviour they will be asked to remove the child from the service.

Biting and Hitting

- Biting and hitting are normal behaviours in the development of most children, usually influenced by stage of verbal communication skills. If a child bites or hits another, the following procedures will apply:
 - Educators will attend first to the victim to comfort the child and assess their injuries. First aid will be applied in accordance with the centre's Accident Policy.
 - While attending the victim (or immediately afterwards) the educator will talk about the incident with the biter/hitter, explaining the consequences of his/her action, in words they will understand. The educator will show their disapproval for the child's actions using tone of voice and facial expressions, and encourage the child to "help" make the victim feel better through positive and gentle touching. The educator will suggest an alternative action to biting or hitting ie: tell the child to say "My turn please", and will follow this up by encouraging the biter/hitter to ask for a turn and making sure he/she does have a turn.
 - An Accident/Illness/Trauma Report Form will be completed. Parents of victims do not need to know who bit their child.
 - A record of what happened will be made including how the situation arose and why the child bit or hit. This information will help educators to prevent a repeat incident.
 - If biting or hitting is an ongoing concern with a particular child his/her parents will be informed and strategies developed that are consistent between home and the service.

Bullying

- Whenever an incident of bullying is reported to, or observed by an educator, they will:
 - Intervene immediately to stop the bullying behaviour.
 - Talk to the bully and to the victim separately. If more than one child is involved in perpetrating the bullying, talk to each child separately, in quick succession.
 - Consult with other educators to get a wider reading on the problem, and to alert them to the incident.
 - Minor incidents will be resolved with positive guidance to redirect the bully, reassure the victim, and aim to achieve reconciliation between the bully and the victim.
 - Educators will understand that bullies often try to minimise or deny their actions and responsibilities. Educators will tell the bully why their behaviour was unacceptable. They will tell them what behaviour they do expect of them.
 - Educators will reassure the victim that all possible steps will be taken to prevent a re-occurrence of the bullying, and will ensure that appropriate measures are taken to achieve this ie: careful monitoring of the children involved, establishment of a signal system for the victim to call for help etc.
 - Any serious or repeated incidents will be reported to children's families. Parents/guardians of the bully and the victim will be informed as soon as practicable. Depending on the situation this could be immediately through a telephone call, or when they come to collect their child at the end of the day.
 - Parents/guardians will be involved in designing a behaviour guidance management plan whenever possible.

- For victims this will involve helping the child to make appropriate friends and develop their social skills and confidence. Specific instruction on assertiveness skills may also be helpful.
- For bullies the plan would involve specific programs to modify their behaviour, including increased supervision, anger management skills, encouragement and recognition for their efforts towards non-violent responsible behaviour. If incidents of bullying are very serious or repeated and cannot be resolved, and the bully endangers the safety and enjoyment of other children or educators at the program, they may be suspended on a temporary or permanent basis.
- Educators will teach children caring, non-violent, co-operative and tolerant ideas, values and behaviours through:
 - Recognising and encouraging positive, friendly and supportive behaviours of children towards each other;
 - Modelling positive, respectful, inclusive and nurturing behaviours towards children, families and other educators/staff;
 - Planning and implementing co-operative, non-competitive experiences.
- Families are asked to tell an educator if they believe or suspect that bullying has occurred. Families are also asked to support the importance of courtesy, consideration and co-operation in everyday life, and with their child.
- Educators will be give opportunities to attend training that will assist them to:
 - Identify bullying behaviour;
 - Resolve conflicts;
 - Manage groups of children; and
 - Be assertive.

Managing extreme or persistent behavioural challenges

- If a child's behaviour places him/herself or another child in danger, educators will act immediately to prevent the danger, and then talk through the problem with the child or children concerned.
- If children consistently display unacceptable behaviour the senior educator will ensure:
 - The expectations of the child's behaviour are realistic and appropriate to their developmental level;
 - The child understands the limits;
 - There is no conflict between service and home expectations;
 - The child's needs are being met ie: adequate storage for personal belongings, adequate nutritional snacks provided, service set up to encourage independence;
 - The child has no impediments which may have caused the unacceptable behaviour;
 - The child isn't copying observed behaviour;
 - Events at the service have not encouraged their behaviour;
 - Consequences of the behaviour do not encourage it to persist;
 - Strategies are consistently followed by all educators in contact with the child.
- Where children exhibit recurring behavioural challenges the nominated supervisor/coordinator and the child's educator will work with the child and the child's family to develop a behaviour guidance management plan that is consistently followed between the service and home. The plan will:
 - Explain why the displayed behaviour is inappropriate;
 - Document inappropriate behaviours that occur consistently;
 - Identify triggers to inappropriate behaviours;
 - Document emerging patterns of behaviour;
 - Define the context in which behaviours occurs;

- Identify where the behaviour could possibly harm another child or adult;
- Document the appropriate behaviours that are required to replace the inappropriate behaviours;
- Reflect a collaborative approach with the child's family.
- Where school age children exhibit recurring behavioural challenges the nominated supervisor/coordinator may discuss establishing a behaviour contract with the child, whereby positive behaviour is encouraged and negative behaviour results in consequences that have been agreed to in advance by the child. The contract may also establish a code of signals between the child and the educator, which act as a positive reminder for the child, when their behaviour is becoming unacceptable.
- The nominated supervisor/coordinator is available to discuss and assist with any concern a family may have in respect of their child's behaviour or participation in the program.
- If the unacceptable behaviour persists the nominated supervisor/coordinator will jointly with the family seek advice from an appropriate agency or professional.

Excluding a child due to inappropriate behaviours

- After the child has been given every opportunity to respond positively and if all methods fail to result in an improvement in behaviour, the nominated supervisor/coordinator will discuss alternative care with the parent/guardian, in consideration of the health and safety of the other children in care.
- Depending on the severity of the behaviour, the service may implement the following steps:
 1. The approved provider will write to the parent/guardian asking that they attend to their child's challenging behaviour. The service will support the family to access further professional assistance; the child will be given reasonable time to respond positively to new strategies and the family will be supported in this as far as possible.
 2. If there is insufficient improvement in the child's behaviour the approved provider will write to the parent to advise them of this, and to explain that the child's attendance at the service is suspended for the next two weeks in order to give the child time to modify his/her behaviour away from the service. After this time the child may return to the service and will be given reasonable time to display a positive change in behaviour.
 3. If the child does not demonstrate a positive change in behaviour on their return to the service, the approved provider will write to the parent/guardian to explain that the child's attendance at the service will be suspended until such a time as the behaviour is corrected.
- In the case of severe behaviour which threatens self-harm or bodily harm to educators/staff or other children, the parent/guardian will be informed that the child will be suspended or dismissed immediately.

Procedures

- Accident/Illness/Trauma Report Form
- Behaviour contract
- Behaviour guidance management plan
- Educator/staff code of ethics
- Grievance procedures
- Orientation checklists
- Procedure for dealing with extreme or persistent behaviours
- Procedure for seeking children's input in decision making

Links to other Policies

- Confidentiality and Privacy
- Delivery and collection of children
- Diversity and Inclusion
- Educational Programs
- Enrolment and Orientation
- Equal opportunity
- Excursions and transport
- Grievances and Complaints Management
- Interactions with Children
- Partnerships and Communication with Families

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5.3 Interactions with Children

Rationale and Policy Considerations

Developing responsive, warm, trusting and respectful relationships with children promotes their well-being, self-esteem and sense of security. Positive interactions with children convey to them that they are valued as competent and capable individuals, and children develop confidence in their ability to express themselves, manage their feelings, learn new skills and take risks to expand their opportunities.

Positive and responsive one-to-one interactions with babies and toddlers are important for their well-being and encourage them to thrive. Babies and toddlers need a secure base of trusting relationships with adults before they are ready to explore and learn about their world.

Older children need assistance from educators and other important adults in their lives to guide their interactions with their peers and others as they explore their identity and develop more complex social skills and relationships.

The Education and Care Services National Regulations requires the service to have a policy on interactions with children. The National Quality Standard for Early Childhood Education and Care and School Age Care requires that the rights and interests of the children are paramount, and the approved learning frameworks identify developing secure, respectful and reciprocal relationships as one of the principles that reflects contemporary theories and research evidence concerning children's learning and early childhood pedagogy.

Philosophy

Documented approach to the development of secure, respectful and reciprocal relationships; approach to access and participation, and commitment to quality outcomes for children; approach to educators/staff professionalism and responsible conduct.

Legislation and Government Requirements

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

The National Quality Standard for Early Childhood Education and School Age Care

Children's Needs

- Educators develop warm relationships with children;
- Respect children's opinions;
- Provide children with opportunities to become self-reliant and develop self-esteem;
- Maintain children's dignity and rights; and
- Provide children with positive guidance and support towards acceptable behaviour.

Families' Needs

- Their children are respected and liked;
- Educators develop responsive, warm, trusting relationships with children and their families;
- Children are happy and feel safe and secure at the service;
- Educators are responsive to their child's strengths, interests, capabilities and background.

Educator/Staff Needs

- Educators to support each other and reflect on ways to improve relationships and interactions with children and their families;
- Access to up-to-date training and resources on effective communication;
- Opportunities to model appropriate communication and interactions with children;
- Organisational culture that supports and encourages open and trusting interactions;
- Time to actively engage with children

Management Needs

- Educators/staff and nominated supervisor/coordinator to interact in a respectful and cooperative manner and be positive role models for children;
- To budget for adequate educator/staff training.

National Quality Framework

Education and Care Services National Regulations 2011 – 155,156, 168(j)

National Quality Standards 2018- 1.2.2; 1.3.1; 4.1.1; 4.2.2; 5.1.1; 5.1.2; 5.2.1; 7.1.2

Early Years Learning Framework for Australia – Principles: 1. Secure, respectful and reciprocal relationships; 2. Partnerships 3. High expectations and equity 4. Respect for diversity – Practice; Holistic approaches; Responsiveness to children; Learning through play; Intentional teaching; Learning environment, Cultural competence; Continuity of learning and transitions – Outcomes 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 2.3, 2.4 , 3.1, 5.1

Policy Statement

Willi Wag Tails Childcare service aims to develop responsive, warm, trusting and respectful relationships with each enrolled child through taking the time to genuinely listen and talk with children and their families. Educators/staff relate to the children, their families, and to each other, in a friendly, caring and sensitive manner, valuing each individual and the unique contribution they make. The service aims to create an environment in which children feel they are valued members of their community, and in which their sense of belonging and well-being is supported. Educators will achieve this through providing consistent emotional support that will nurture the development of children's self-esteem and to assist them to acquire the skills and understandings they need to interact positively with others.

Strategies for Policy Implementation

Nurturing positive interactions with children

- As each child arrives at the service they will be greeted by an educator/staff member.
- Educators will be supportive and encouraging and engage one to one and small group communications with children in a positive, friendly and respectful manner. They will form warm relationships with each child in their care.
- Educators/staff use children's names and get down to the child's eye level when communicating with them, and ensure that their interactions are both meaningful and personal.

- Educators/staff create a happy and relaxed atmosphere in which children experience equitable, friendly and genuine interactions with all educators, the nominated supervisor/coordinator, and other staff members at the service.
- Educators instigate many playful social interactions with children including conversations, songs, rhymes, finger plays, peek-a-boo games, sharing books or stories.
- Educators/staff respect each child's uniqueness, are attuned to and respond sensitively and appropriately to children's efforts to communicate and will use the child's own language, communication style and culture to enhance their interactions.
- Educators/staff assist children to learn to communicate and interact positively and cooperatively with their peers through modelling appropriate communication and responding positively to children at all times.
- Educators encourage children to communicate their own ideas in a respectful and courteous way, and will respond appropriately to children's non-verbal cues.
- Educators/staff show empathy, respect and understanding when communicating with children and model this in their interactions with adults.
- Children will never be singled out or made to feel inadequate at any time.
- Educators/staff comfort children who are upset, or are showing signs of distress, and help them to feel safe, secure, and understood.
- Educators ensure routines such as toileting, nappy change and rest times are used for positive one to one interactions with children and a time when they can get to know more about the child's likes dislikes, interests, joys, fears etc.
- Babies are supported to build trusting attachments with one or two educators in order to develop a secure base for their exploration and learning.
- Educators/staff interact with children during mealtimes in an unhurried, relaxed manner, in which the enjoyment of foods and the social aspect of meal times is promoted.
- Educators/staff are genuinely interested in each child's own interests and needs, and take the time to fully understand what children are doing or saying listening to their responses and asking open ended questions.
- Educators make sure they are available to give children their full attention as they arrive at the service after school and invite children to chat about their day and to share their news.
- Children are encouraged to share their feelings or thoughts, and express different viewpoints about matters that affect them.
- Educators/staff share humour with children and are playful and friendly in their interactions.
- Educators/staff respect children's desire not to engage in conversations or interactions at certain times for particular reasons.

Involving Children in Decision Making

- Educators will genuinely seek children's input, respect their ideas and take their suggestions on board.
- Young children will be encouraged to make decisions about:
 - The experiences or activities they would like to do;
 - The materials and resources they would like to use and how they would like to use them;
 - What they would like to play with (ie: indoors or outdoors);
 - Who they want to play with, or whether they wish to play alone;
 - The adults with whom they feel most comfortable;
 - When and how they would like to eat;
 - How they prefer to sleep or rest;
 - Whether they need to use the toilet or have a nappy changed.
- Older children will be encouraged to make decisions about:

- What experiences are included in the learning program;
- What experiences they will participate in;
- The friends they choose to spend time with;
- Planning the afternoon snack menu;
- Appropriate rules or boundaries;
- Planning excursions or incursions;
- Setting up the environment;
- The introduction of hobbies or clubs.

Encouraging families to share information about the child

- Educators will use information gained from families to enhance their interactions with children and continue to build children's sense of well-being and belonging.
- Educator's will encourage families to share important information about their child through:
 - Initiating regular on-going communications with families in a manner that promotes the development of strong relationships that are based on mutual respect, trust and understanding;
 - Encouraging families to share their thoughts, ideas, questions and concerns, and promoting supportive partnerships between families, educators and the service;
 - Treating all families equitably without bias or judgement;
 - Recognising that each family is unique and valuing this uniqueness.

Educators/staff communications with each other

- The service recognises that the way educators/staff interact with each other has an effect on the interactions they have with children and families.
- Educators/staff will role model warm and supportive interactions as they interact with each other.
- Educators/staff will convey mutual respect and recognition of each other's strengths and skills through:
 - Recognising each other's strengths and valuing different work each does;
 - Working collaboratively to reach decisions which will enhance the quality of the education and care service;
 - Welcoming diverse views and perspectives;
 - Working together as a team and engaging in open and honest communication at all times;
 - Respecting each other's feelings;
 - Developing and sharing networks and links with other agencies;
 - Resolving differences promptly and positively and using the experience to learn more effective methods of working together;
 - Use calm, friendly voices with each other.

Procedures

- Educator handbook
- Complaints and grievance procedures
- Orientation checklists
- Procedure for welcoming children and families to the service
- Procedure for seeking children's input in decision making
- Survey forms (family and child input)

Links to other Policies

- Confidentiality and Privacy
- Delivery and collection of children
- Enrolment and orientation
- Excursions and transport
- Grievances and complaints management
- Guiding and supporting children's behaviour

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DEEWR Childcare Service Handbook 2011-2012

Section 6.5 – What are my services responsibilities to parents?

Section 6.6 – What are my responsibilities to children?

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the National Childcare Accreditation Council – Issue 29, March 2009.

Policy creation date: June 2012
Policy revision date: Oct 2018

5.4 Enrolment and Orientation

Rationale and Policy Considerations

Willi Wag Tails Childcare service supports equal opportunity principles and considers that where possible it has an obligation to promote equal access to the services it provides within Australian Government guidelines. The enrolment process takes into account all requirements of the Education and Care Services National Regulations, and the guidelines contained within the Australian Government Child Care Service Handbook. All records held at the service will be maintained in accordance with Confidentiality and Privacy Policy. The service understands the importance of an orientation process that provides clear guidelines to families to help families and children settle into the service successfully, and requires that educators sensitively implement the policy to ensure the well-being of the child.

Legislation and Government Requirements

Federal and State Equal Opportunity Legislation

Priority of Access Guidelines (Child Care Service Handbook 2011-12)

Privacy Act 1988 (Cth.)

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's needs

- Support and comfort to settle into the service and establish new friendships and relationships;
- Advocacy for child's well-being and protection

Families' Needs

- Enrolment for their child and their siblings;
- Assistance in separating from their child;
- Confidentiality;
- Confirmation that their child has settled;
- Service support in the event of needing additional or emergency care for their child;
- Priority of access if within Australian Government Guidelines;
- Assistance in finding alternative care when the child's educator is unavailable.

Educator/staff Needs

- Clearly explained enrolment process;
- Time to get to know families before children start full time care;
- Parent support in introducing children to the service;
- Time to develop close professional relationships with families;
- Support from referral agencies;
- Information about custodial issues.

Management Needs

- To provide a transparent enrolment process for all families;
- To obtain an equal balance between sound management practices and individual rights.

National Quality Framework

Education and Care Services National Regulations 2011– 75; 76; 88; 102; 157; 160(1), (3), (4); 161; 162; 168(2)(k); 169-175; 177-181

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 1.3.3; 2.1.3; 6.1.1; 6.1.2; 6.1.3; 6.2.1; 6.2.2; 7.1.1

Early Years Learning Framework for Australia – Practice: Holistic approaches; Responsiveness to children – Outcomes: 1.1

Policy Statement

The enrolment process is open and equitable. Enrolments will be subject to Australian Government priority of access guidelines. In the interests of children’s welfare and protection, access to children is referred to the service by appropriate agencies and will be accommodated wherever possible, whilst still ensuring the safety and care of every child at the service.

Families will be carefully oriented to the service before their children attend. The orientation process is a time for educators to share information with families about how the service operates and how the child is settling within the service. It is also a time for families to share information about the child and their expectations of the service.

Strategies for Policy Implementation

Equal Opportunity principles will be observed in relation to access to the service for all children, families and educators/staff.

Enrolments

- Enrolments will be accepted according to the Australian Government ‘Priority of Access’. Parents/guardians will be advised that families of children enrolled with third priority access may be required to alter their days or leave the service to provide a place for a higher priority child.
- An Enrolment Form must be completed for each child per enrolling family. Where enrolling families are not fluent in English the enrolment interview will wherever possible be conducted in their primary language (assistance may be required through an interpreter). On enrolment families will be given a Parent Handbook.
- The enrolment record will include the following information for each child:
 - Full name, date of birth and address of the child;
 - Name, address and contact details of each parents of the child; any emergency contacts; any person nominated by the parent to collect the child from the service; any person authorised to consent to medical treatment or to authorise the administration of medication to the child; any person authorised to give approval for an educator to take the child out of the service;
 - Details of any court order, parenting orders or plans;
 - Details of court orders relating to the child’s residence or contact with a parents or other person;
 - Gender of the child;
 - Language used in the child’s home;
 - Cultural background of the child and the child’s parents;
 - Any special considerations for the child eg: cultural, religious or dietary requirements or additional needs;

- Authorisations for the service to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and transportation of the child by an ambulance service;
 - Authorisation for the service to take the child on regular outings;
 - Name, address and telephone number of the child's registered medical practitioner or medical service;
 - Child's Medicare number (if applicable)
 - Details of any specific healthcare needs of the child including any medical condition;
 - Details of any allergies or anaphylaxis diagnosis;
 - Any medical management plan or anaphylaxis management or risk minimisation plan;
 - Details of dietary restrictions for the child;
 - Immunisation status of the child;
 - Noted sighting of health record for the child by approved provider or educator/staff.
- At enrolment parents are encouraged to provide any further information about their child that will support continuity of care between home and the service.
 - A Privacy Statement which detail the name and contact details of the service; the fact that enrolling parents are able to gain access to their information; why the information is collected; the organisations to which the information may be disclosed; any law that requires the particular information to be collected and the main consequences for not providing the required information, is attached to the Enrolment Form/
 - Enrolment Forms will be updated annually or when a family's circumstances change, to ensure information is current and correct. Enrolment information will be kept in a confidential file. Access to this information is available only to the educator, nominated supervisor/coordinator, parent/guardian and authorised government officers.
 - If a place is not immediately available at the service the family may be put on a waiting list. At this stage they will be asked to complete a **Booking Enquiry Form** which details the family's name and addresses, care needs and priority of access eligibility. Once entered onto the waiting list it is necessary for the family to contact the service at the end of each month to confirm their continued wish to remain on the list. When a place becomes available the family will be contacted by the nominated supervisor/coordinator and registration and enrolment may proceed.
 - Exclusion of children from the service due to behaviour issues will only occur after all other avenues of communication and support have been exhausted and when:
 - Professional advice confirms a child is in psychological danger as a result of an unusually prolonged inability to settle into care away from the parent/guardian. Or
 - A child puts the majority of children at risk through inappropriate behaviour (Also refer to Behaviour Management Policy).
 - For exclusion policy due to non-immunisation and infectious diseases refer to Health, Hygiene and Infection Control Policy.
 - Subject to any state/territory or federal equal opportunity legislation, the service reserves the right to exclude a child from the education and care service for any reason connected to the welfare of the child and the welfare of educators/staff and other children or families who use the service.
 - Children who are not enrolled must only be present at the service on a temporary basis, and under the direct supervision of their parent/guardian or other responsible adult.

Referrals

- Referral agency officer will be required to provide verifiable identification before being admitted to the service.

- The service will determine a threshold to the number of children with special needs that the service is able to appropriately care for.
- Where it is determined the service cannot accept a referred child the referring agency will be advised to contact DEEWR of the Child Care Access Hotline 1800 670 305 for alternative venues.
- Acceptance of a referral will be dependent on:
 - The service having the required resources to appropriately care for the child(ren);
 - Completion of a Referral Form;
 - A visit from the referring agency (case manager) to provide information about the referral;
 - Clarify any special conditions of enrolment;
 - Provide the necessary details about the child(ren)'s care arrangements including foster care details;
 - Determine a suitable orientation process (child to the service/staff to children's needs);
 - Reach agreement in regard to the cost for providing care and any special requirements (eg: transport, clothing, food etc);
 - Subsequent enrolment according to the service's usual enrolment procedure;
 - Ensure that children are enrolled with the Child Care Management System before care commences;
 - Agreement to a debriefing from the case manager at the conclusion of the referral period.
- The service will determine a fee schedule for referrals which includes contingencies for extra ordinary arrangements such as payment for special transport, clothing and food, and additional educator/staff support.
- The referral agency will be invoiced for the agreed cost of providing care determined during the case manager's visit to the service.
- The service will ensure the strictest confidentiality in relation to information about referred children at all times. Access to confidential information will only be given on a need to know basis. However, educators involved in the care of referred children will be provided with information that is considered to be essential to ensure the safety and protection of both the referred child(ren) and other children in care.

Orientation

- The service will provide options for orientation to the education and care service for families which may include:
 - An orientation evening/meeting for new families to meet one another and the educators/staff in a relaxed atmosphere outside normal service hours.
 - Inviting new families to visit the service with their child at times that suit them, to familiarise families with the service prior to the child's attendance.
 - Providing all new families with a conducted tour of the premises which will include introductions to other educators/staff, children and families at the service, and highlights specific policies and procedures that families need to know about the service.
 - Ensuring each family has a copy of the Parent Handbook and an opportunity to have any questions answered.
 - Giving family members the opportunity to stay with their child during the settling in process.

- Ensuring all new families are encouraged to share information about their child and any concerns, doubts or anxieties they may have in regard to enrolling their child at the service.
- Feedback Questionnaires after around 1 month to ensure all new families are receiving the best of care.
- When children first attend the service the needs of both families and children will be respected. Parents/guardians will be encouraged to remain with their child when delivering or collecting them for as long a period as the parent/guardian and/or educators feel may be necessary to ensure the child's well-being. The parent/guardian will be encouraged to telephone the service during the day for reassurance that their child has settled in. Educators will make a special point of discussing the child's day with the family when they come to collect their child.
- Families will be assisted to develop a routine for saying goodbye to their child.
- Children who are distressed at separating from their family will be held and comforted by the educator, and closely observed and offered reassurance until they are settled.
- The service will always consider the feelings and time constraints that families may have in regard to participating in orientation processes and aim to make the experience a positive and welcoming introduction to the service.
- The service will use an orientation checklist to ensure that every important aspect of the service operations and procedures is discussed with the new family.

Procedures

- Enrolment form
- Privacy statement
- Orientation checklists
- Procedure for updating personal information
- Procedure for access to personal information

Links to other Policies

- Confidentiality and privacy
- Delivery and collection of children
- Grievances and complaints management
- Health, hygiene and infection control
- Payment of fees (in Parent Handbook)
- Records of management

Sources

DEEWR Child Care Service Handbook 2011-12

Section 4.9 – Information Management

Section 5.5 – Key obligations imposed on approved child care services under family assistance law

Section 6.3 – Priority of access

Section 6.10 – Reporting of vacancy (availability) data

Section 9 – Reporting of enrolment information

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Policy Creation Date: June 2012

Policy Revision Date: Oct 2018

6.1 Confidentiality and Privacy

Rationale and Policy Considerations

Willi Wag Tails Childcare service understands the importance of developing practices that respect privacy and confidentiality so that families will trust the service and openly exchange information with educators/staff, which may be important to the care of a child. Legislation requires that families provide personal information to the service so that appropriate care can be taken of their children. Authorised educators/staff at the service will use this information and may discuss a child's personal details with another child care professional in order to fulfil their responsibilities towards the child. It is important therefore to ensure that educators/staff are fully aware of their responsibilities for maintaining strict confidentiality under the Privacy Act (1988), and also that families are informed of their rights in regard to access to their own personal information, and how the service will ensure the information is protected from unauthorised access. Families need to be informed about which people have authorised access to their child's personal information.

Legislation and Government requirements

Laws relating to protection of privacy and confidentiality; duty of confidentiality from contract with parents; to whom and when information must be disclosed;

Privacy Act 1988 (Cth.)

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children's Needs

Confidentiality re: health, learning, behaviour and other sensitive areas

Families' Needs

Security that private information given to the service re: income levels, family arrangements etc. are kept confidential. Ability to speak to educators re: confidential matters that impact on their child's care. Access to their own records.

Educator/Staff Needs

Personal records, details, appraisals are treated as confidential; clear guidelines re: what they should/shouldn't disclose about children and families and how families may access their own personal records; freedom to raise personal issues that impact on workplace.

Management Needs

To make decisions about confidential issues; to obtain relevant and current personal details from clients.

National Quality Framework

Education and Care Services National Regulations 2012 – 75; 168(2)(l); 181-184

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 5.1.2; 6.2.2; 7.1.2

Early Years Learning Framework for Australia- Principles: Secure, respectful and reciprocal relationships, 3 high expectations and equity.

Policy Statement

Willi Wag Tails Childcare Service protects the privacy, dignity and confidentiality of individuals by ensuring that all records and information about individual children, families, educators/staff and management is treated with discretion and kept in a secure place and only accessed by or disclosed to authorised persons who **need** the information to fulfil their responsibility at the service or **have a legal right to know**.

Strategies for Policy Implementation

Information about families

- Personal information will only be collected in so far as it relates to the service's activities and functions, and in line with relevant legislation.
- Collection of personal information will be lawful, fair, reasonable and unobtrusive.
- Every enrolling family who provides personal information will be advised in the form of a Privacy Statement of: the name and contact details of the service; the fact that they are able to gain access to their information; why the information is collected; the organisations to which the information may be disclosed; any law that requires the particular information to be collected; and the main consequences for not providing the required information.
- Families will be notified of the time for which particular records are required to be retained under the Education and Care Services National Regulations.
- The use or disclosure of personal information will only be for its original collected purposes, unless the individual consents or unless it is needed to prevent a health threat, or is required or authorised under law.
- The service will take steps to ensure the personal information collected, used or disclosed, is accurate, complete and up to date. Families will be required to update their enrolment details annually, or whenever they experience a change in circumstances. Computer records will be updated as soon as new information is provided. The Centre will have a procedure to support this updating of information requirement.
- Personal information will be kept in a secure and confidential way, and destroyed by shredding or incineration, when no longer needed.
- Individuals will be provided with access to their personal information and may request that their information be up-dated or changed where it is not current or correct.
- Individuals wishing to access their personal information must make written application to the approved provider/nominated supervisor/coordinator, who will arrange an appropriate time for this to occur. The approved provider/nominated supervisor/coordinator will protect the security of the information by checking the identity of the applicant, and ensuring someone is with them while they access the information to ensure the information is not changed or removed without the approved provider/nominated supervisor/coordinator's knowledge.
- The approved provider/nominated supervisor/coordinator will deal with privacy complaints promptly and in a consistent manner, following the service's Grievance Procedures. Where the aggrieved person is dissatisfied after going through the grievance process, they may

appeal in writing to the Privacy Commissioner within the Office of the Australian Information Commission (www.oaic.gov.au).

- Visual images of enrolled children will not be taken, recorded, removed from the service, or used for any purpose without the written consent of the parent/guardian, except where visual images are used within the service for monitoring of an enrolled child, or visual images taken by an authorised officer acting in the course of his/her duties, in which case only the parent/guardian and authorised staff will have access to the images. To protect children's privacy visual images of children will not be transmitted on the internet or by email at any time. Parental/guardian consent will be given or denied on the child's enrolment form.
- Confidential conversations that educators have with family members, or the approved provider/nominated supervisor/coordinator has with educators/staff members will be conducted in a quiet area away from other children, family members and staff. Such conversations are to be minuted and stored in a confidential folder.

Employee/educator and service management issues

- Personnel forms and employee information will be stored securely.
- Applicants, students or volunteers will be informed that their personal information is being kept, for what reason, for how long, and how it will be destroyed at the end of the time period.
- Applicants will be asked for their consent before their references are checked. Unsuccessful applicants will be advised of when and how their personal information will be destroyed.
- Information about educators/staff members will only be accessed by the approved provider/nominated supervisor/coordinator and individual staff member concerned.
- Every employee/educator and the approved provider/nominated supervisor/coordinator is provided with clear written guidelines detailing:
 - What information is to be kept confidential and why;
 - What confidential information that may have access to in order to fulfil their responsibilities and how this information may be accessed;
 - Who has a legal right to know what information;
 - Where and how the confidential information should be stored.
- Every employee/educator and the approved provider/nominated supervisor/coordinator is required to sign a Confidentiality Statement.
- No member of staff/educator may give information or evidence on matters relating to children and /or their families, either directly or indirectly, to anyone other than the responsible parent/guardian, unless prior written approval by the responsible parent/guardian is obtained. Exceptions may apply regarding information about children when subpoenaed to appear before a court of law. Notwithstanding these requirements, confidential information may be exchanged in the normal course of work with other staff members at the service and may be given to the approved provider/nominated supervisor/coordinator, when this is reasonably needed for the proper operation of the service and the well-being of users and educators/staff.
- Educators/staff are aware of the need for sensitivity and confidentiality in handling information regarding child protection issues.
- Reports, notes and observations about children must be accurate and free from biased comments and negative labelling of children.
- Staff will protect the privacy and confidentiality of other staff members by not relating personal information about another staff member to anyone either within or outside the service.
- Confidential information about staff members will only be accessed by the nominated supervisor, coordinator, and any other staff member that requires access in order to fulfil their role eg: administration assistant and individual staff member concerned. Some information

pertaining to individual circumstances may be disclosed to the approved provider in certain instances.

- Students/people on work experience/volunteers will not make staff/children or families at the service, an object for discussion outside of the service (eg: TAFE, University, school or home), nor will they at any time use family names in recorded or tutorial information.
- Student/people on work experience/volunteers will only use information gained from the service upon receiving written approval from the service to use and/or divulge such information, and will never use or divulge the names of persons.
- All matters discussed at staff meetings will be treated as confidential.

Social Media

- It is not permitted to use photos of children, or any other information that may identify children or families on social media sites such as Facebook, unless families have provided specific permission for this to occur. This policy strategy applies to educators, other staff, approved provider, students, people on work experience, volunteers and any other person that may have access to children at the service.
- Employees/educators or other staff are not permitted to discuss the service or its staff on social media sites. Failure to adhere to this policy would seem as unprofessional behaviour and would be subject to the relevant grievance procedure process.
- The service will include information about the social media policy in the family orientation package, educator/staff/student/volunteer orientation procedures, and will include regular reminders to sign a Confidentiality Statement, which includes a statement about the use of photos and information on social media sites.

Procedures

- Confidentiality statement
- Educator/staff code of ethics
- Grievance procedures
- Orientation checklists
- Privacy Act Checklist
- Privacy Statement
- Procedure for updating personal information
- Procedure for access to personal information
- Procedure for safe storage and disposal of personal information
- Procedure for dealing with privacy complaints

Links to other policies

- Educator/staff and volunteer orientation
- Educator/staff grievances and disputes
- Enrolment and Orientation
- Establishing a Protective Environment
- Grievances and Complaints Management
- Management and Governance
- Partnerships and Communications with Families
- Payment of Fees
- Records Management
- Recruitment of Educators, Staff and Volunteers

Sources

DEEWR Child Care Service Handbook 2011-12 – Section 4.9 – Information Management – sourced June 2012 from www.deewr.gov.au

Early Childhood Australia (ECA)(2005) – *The Code of Ethics* – sourced June 2012 from www.earlychildhoodaustralia.org.au/code_of_ethics/early_childhood_australias_code_of_ethics.html

Fair Work Ombudsman – Employee Records and Pay Slips Fact Sheet – sourced June 2012 from www.fairwork.gov.au

Privacy Law – sourced June 2012 from www.oaic.gov.au and www.privacy.gov.au/law

UNICEF (n.d) *Fact Sheet: A Summary of the rights under the Convention on the Rights of the Child* – sourced June 2012 from www.unicef.org/crc/files/Rights_overview.pdf

Policy creation date: June 2012

Policy review date: Oct 2018

6.2 Payment of Fees

Rationale and Policy Considerations

The setting and payment of fees takes into account all requirements of the Education and Care Services National Regulations, Australian Tax Office, Privacy Act and the guidelines contained within the Australian Government Child Care Service Handbook. All records held at the service will be maintained in accordance with Confidentiality and Privacy Policy. Willi Wag Tails Child Care service understands the importance of maintaining accurate fees statements and providing clear information to families on fees payment processes.

Legislation and Government Requirements

- **Guidelines on child care fees payments** (Child Care Services Handbook 2011-2012)
- **Privacy Act (Cth.)**
- **Education and Care Services National Law Act 2010**
- **A New Tax System (Family Assistance) (Administration) Act 2000**

Children's Needs

For continuity of care and family support where payment of child care fees is an issue.

Families' Needs

- Advice about fee levels and CCS application processes
- Affordable fees
- Simple fees payment processes
- Accurate fees payment statements
- Information about available financial support
- Family difficulties in maintaining fees payments to be addressed in order to prevent any negative impact on the care provided to children.

Educator/Staff Needs

- Clearly explained fees payment process
- Families to maintain fees payments
- Fees payment issues not to impact negatively on the relationships between educators, children and families.

Management Needs

- Sufficient fees income to ensure maintenance of quality service
- Fee payments to be up-to-date
- Accurate fees collection records to be maintained.

National Quality Framework

Education and Care Services National Regulations 2012 – 168(2)(n)

National Quality Standard for Early Childhood Education and Care and School Age Care (2018)- 6.1.1; 6.1.3; 6.2.2; 7.1.1; 7.1.2

Early Years Learning Framework for Australia- Principles: 2 partnerships

Policy Statement

Willi Wag Tails Childcare service aims to provide a quality education and care service at an affordable price to families eligible to attend under the Australian Government Priority of Access Guidelines. Fee levels will be set by the approved provider each year on completion of the annual budget and according to the service's required income in order to provide a quality education and care service.

Strategies for Policy Implementation

Fees and payment account

- The approved provider will determine the required fee level to meet budget prediction for the next year.
- The fee schedule and fees payment policy will be fully explained to families during the enrolment process.
- Families will be given a minimum of 14 days' notice of any fee increase.
- The same fee will be charged to all families for equivalent care arrangements.
- Families are required to pay fees in advance. A dated receipt, in accordance with Australian Government Guidelines, will be provided for each payment.
- Families pay for a place and may elect to book a full-time, part-time or occasional place.
- Fee payment will be recorded according to Australian Government Guidelines.
- Details of an individual's accounts and all completed forms kept by the service will be confidential and stored appropriately. Individual families may access their own account records at any time. Particulars of fees will be available in writing to parents upon request. Families may also view details about their child care usage and total fees charged and the fee reductions calculated by the Family Assistance Office (FAO) on the View Childcare Attendance online statement available through the FAO website.
- Parents/guardians should contact the service to advise of their child's inability to attend as soon as this is known. Fees will still be required on the days the child would normally attend.

CCS and CCMS

- The service will comply with the Australian Government requirements to be an approved education and care service for the purposes of the Child Care Subsidy (CCS). The on-line Child Care Management System (CCMS) reporting requirements and any other requirements for claiming and administering CCS will be maintained by the service.
- It is the parent/guardian's responsibility to complete and lodge their CCS application with the FAO. Families need to apply for each type of care they will use ie: Long Day Care, Before School Care, After School Care, Vacation Care, Family Day Care.
- CCS will be deducted from a family's fees within 14 days of the service being notified of the amount via CCMS.
- Families with children under 7 years seeking CCS for the first time will be required to meet the Australian Government's immunisation requirements. The service will provide information to these families in regard to this requirement.
- Families will only be eligible for CCS if child care attendance records are accurately completed and signed by the parent/guardian or other responsible adult, and the eligibility requirements are met.
- Families are entitled to 42 absence days for each registered child in each financial year. CCS is paid for these days provided that the child would normally have attended on that day, and that fees have been charged. Additional absences can be claimed when the first 42 days have been used. Supporting documentation may be required for approval of additional absences.

- All documentation pertaining to CCS will be kept for the specified period of time and made available to Australian Government Officers on request.
- Educators/staff will have a basic knowledge of CCS requirements but will refer all specific queries to the authorised contact person for CCMS.
- The nominated supervisor/coordinator/administration officer will be trained in the implementation of CCMS reporting CCS fee payment procedures.

Overdue Fees

- Parents/guardians with overdue fees will be encouraged by the nominated supervisor/coordinator to discuss any difficulties they may be having in meeting payments and make suitable arrangements to pay. If this is not done, or the agreed arrangements are not kept, the following procedure will apply:
 - after one week overdue - a polite written reminder will be forwarded to the parent/guardian;
 - after two weeks overdue - a letter advising that the place may be cancelled if the account should become three weeks overdue. The letter will include a reminder that parents/guardians are encouraged to discuss payment difficulties and make suitable arrangements to pay with the nominated supervisor/coordinator.
 - after three weeks overdue - if no arrangements to pay have been made or kept, the place will be cancelled.

Late collection fees

- Whenever possible the parent/guardian should ring the service to advise they will be late to collect their child.
- A late collection fee will be charged to parents/guardians for each child not collected from the service by closing time.
- The fee charged for late collection is determined by:
 - The service's need to recoup expenses incurred in employee overtime wages.
 - The need to deter families from making a habit of late collections.
 - Special circumstances ie: traffic accidents or vehicle breakdowns, will be given consideration in relation to the administration of late collection fees.
- When a parent/guardian is continually and regularly late arriving at the service to collect their child, the nominated supervisor/coordinator will discuss other child care options with the family (see Delivery and Collection of Children Policy).

Procedures

- Booking enquiry form
- Enrolment form
- Late Collection form
- Privacy Statement
- Orientation checklists
- Procedure for updating personal information
- Procedure for access to personal information

Links to other policies

- Confidentiality and privacy
- Delivery and collection of children

- Enrolment and orientation
- Health, Hygiene and Infection Control
- Records Management

Sources

DEEWR Child Care Service Handbook 2011-12

Section 4.9 - Information Management

Section 5.5 - Key Obligations imposed on approved child care services under family assistance law

Section 6.3 - Priority of access

Section 8.1 - Overview (CCS)

Section 9.3 - Reporting enrolment information

Section 10 - Reporting attendance information

Section 11 - Calculation of fee reductions and payments to services

Section 13 - Absences from child care

Section 14 - Special CCS

Section 15 - Child Care Subsidy (CCS)

sourced June 2012 from www.deewr.gov.au

Australian Government Department of Human Services- Child Care Subsidy - sourced Oct 2018 from

<https://www.humanservices.gov.au/individuals/services/centrelink/child-care-subsidy>

Privacy Law - sourced June 2012 from

<http://www.oaic.gov.au/> and www.privacy.gov.au/law

Policy creation date: June 2012

Policy revision date: Oct 2018

6.3 Grievances and Complaints Management

Rationale and Policy Considerations

Willi Wag Tails Childcare service is required to have a documented procedure for dealing with grievances and complaints that is available at the service and to families, and has an obligation to inform the regulatory authority of complaints alleging “that the safety, health or well-being of a child or children was or is being compromised while that child or children is or are being educated and cared for by the approved education and care service, or that the *Education and Care Services National Law Act 2010* has been contravened”. The service also understands that negative feedback or issues are responded to will determine the service’s ongoing relationship with families. This procedure will also help to inform improvements for the service.

Legislation and Government Requirements

Privacy Act 1988 (Cth.)

Education and Care Services National Law Act 2010

Education and Care Services National Regulations 2012

Children’s Needs

- Respectful and warm relationships between families and educators;
- Ongoing harmonious positive environment at the education and care service;
- Avenue to raise their issues with the service

Families’ Needs

- That their primary influence in the children’s lives is respected and supported;
- Ability to voice concerns in a positive and confidential manner;
- That their concerns are taken seriously and acted upon;
- Opportunities to influence decisions about their child’s experiences at Willi Wag Tails Childcare Service;
- To be kept informed about any issues or incidents that affect their child within the service

Educator/Staff Needs

- Regular open two way communication with families;
- Time to speak with families about any concerns;
- Confidence that complaints will be dealt with in a positive and open manner

Management Needs

- That families will approach management or the service educators/staff to raise problems or concerns;
- To manage concerns or complaints about the service promptly and effectively.

National Quality Framework

Education and Care Services National Regulations 2012 – 161; 168(2)(o); 183

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 4.2.2; 6.1.2; 7.1.2; 7.2.1; 7.2.3

Early Years Learning Framework for Australia – Practice: Holistic approaches; Responsiveness to children; Continuity of learning and transitions – Outcomes 1, 3

Policy Statement

Willi Wag Tails Childcare Service welcomes each complaint as a means of improving its services and upholding positive relationships between the service and its stakeholders. Everyone has the right to a positive and sympathetic response to their concerns. Solutions are sought to resolve all disputes, issues or concerns in a prompt and positive manner that recognises the importance of:

- Procedural fairness and natural justice;
- Ethical conduct;
- A service culture free from discrimination and harassment; and
- The opportunity for review and further investigation.

Strategies for Policy Implementation

Making Complaints

- Every family is provided with clear written guidelines detailing grievance procedures, included in the service's Parent Information Handbook and displayed for reference.
- Families may make a complaint directly to their child's educator, the nominated supervisor or coordinator, or other person identified within the service as the complaints officer.
- Families and children will be surveyed regularly to provide them with an opportunity to identify areas of concern, or ways in which the service could be improved along with areas of strength.
- The service will also provide other means for input such as: suggestions box, daily contact with their child's educators, invitations to attend special or social events, email surveys, advisory committees etc.
- In order to assist families that wish to contact the regulatory authority, the name and address and phone number will be included in the Parent Handbook and readily available for reference.

Education and Care Regulatory Unit
111 Wellington Street, East Perth, Perth 6000

PO Box 6242
East Perth Business Centre
EAST PERTH WA 6892

Phone: 1800 199 383 or 08 6210 3333

- A current copy of the Child Care Services regulations and the *Education and Care Services National Law Act 2010* and National Regulations is available in the centre for all to read at any time.

Dealing with complaints

- All complaints or grievances will be dealt with promptly and confidentially in a manner that:
 - Values the opportunity to be heard;
 - Promotes conflict resolution;
 - Encourages the development of harmonious partnerships;

- Ensures that conflicts and grievances are mediated fairly; and
- Is transparent and equitable.
- Where possible complaints will be dealt with on the spot by the child’s educator as this is usually the person with the closest relationship with the family. If the complaint is about an issue that an educator considers to be outside their control, or the family does not feel they wish to share it with the educator, the family may be directed to the nominated supervisor/coordinator, or other appropriate person for their complaint to be resolved.
- Educators/staff will always thank a family that raises a complaint or issue of concern, and explain why they appreciate the opportunity to improve the service or rectify a mistake.
- All confidential conversations/discussions with parents/guardians will take place in a quiet area (eg: office) away from children, other families and educators/staff who are not involved.
- Where a family wishes their grievance to remain confidential this will be honoured. However families will be advised that issues cannot always be resolved if they choose to remain anonymous.
- Where an educator believes they will have to share a confidence with another person in order to resolve an issue, or if the nature of a complaint requires that a third part has to be informed in order to meet legislative requirements, they will inform the family of this need prior to any further discussions on the matter.

Steps to managing complaints

- The complaint will be welcomed and appreciated.
- The complaint will be documented and any legal requirements in relation to the complaint considered, such as the need to notify regulatory authorities.
- The complainant will be asked to provide information regarding how the situation could be rectified to their satisfaction.
- If possible the problem will be resolved immediately. If this is not possible the complainant will be advised that the issue will be given high priority and dealt with as soon as possible.
- If the issues are complex the complainant will be asked to put their concerns in writing.
- Where mediation is required all parties will have the right to agree to the appointment of the mediator.
- If the problem is about an issue that is outside the control of the service, the person receiving the complaint will explain this to the complainant and let them know who they should contact if they wish to take the matter further.
- Any promises made to the complainant in regard to addressing the issue will be followed up and the results given to the complainant as soon as possible.
- A few days after the incident the service will contact the complainant to find out if they are happy with the way the problem has been resolved.
- Each complaint will be evaluated to determine how the service responded and whether further action is required.

Procedures for dealing with complaints

- The service will develop grievance procedures for dealing with the following possible complaints:

Complaint made by a child against:

- Another child;
- Educators/staff; or
- A family member or other adult.

Complaint made by a family member against:

- A child;
- Educators/staff; or
- Management/coordination unit staff

Complaint made by management against:

- A family member or other adult;
- Educators/employee;
- An individual involved in the management of the service; or
- A member of the community.

Complaint made by a community member against the service.

Follow up and review

- Each complaint will be viewed as an opportunity for improvement. After the complaint or grievance has been dealt with it will be analysed to find out how the problem occurred and determine if the service should implement any changes to policy or operational procedures to avoid similar problems in the future.
- Management will follow through to determine that complaints and grievances have been successfully resolved to everyone's satisfaction. Families will be contacted to determine if they are satisfied with the way the issue was resolved, and educators/staff will be consulted about the outcome from an operational viewpoint.
- Grievances and complaints policy is reviewed and evaluated annually, or whenever an incident occurs to ensure the processes are clear and non-discriminatory. Family input is sought each time the policy is reviewed.
- Families will be asked to complete an Exit Questionnaire when they leave the service to check there are no outstanding issues that have led to their leaving and to be given the opportunity to provide feedback that could lead to further improvements to their service.
- Any complaints that allege the service has contravened the Education and Care Services National Law Act 2010, or compromised the health, safety or well-being of any child within the service, will be reported to the regulatory authority under the Act (as above). These allegations will be taken most seriously and an immediate resolution will be sought.

Procedures

- Confidentiality statement
- Documenting and reporting a grievance or complaint
- Educator/staff code of ethics
- Exit Questionnaire
- Grievance procedures
- Orientation checklists
- Procedure for dealing with privacy complaints
- Procedure for reporting to a regulatory authority or external agency
- Survey forms

Links to other Policies

- Confidentiality and Privacy
- Educator, staff grievances and disputes

- Enrolment and Orientation
- Guiding Children’s behaviour
- Interactions with Children
- Recruitment of Educators, Staff and Volunteers

Sources

Cross, C & Morton, S – Encouraging parent involvement Learning Guide – PSCWA Factsheets – sourced June 2012 from
<http://www.pscwa.org.au/getdoc/dc42d817-34b6-4854-b8c8-367df00027d9/EncouragingParentInvolvement.aspx>

Cross, C & Morton, S – Consultancy – *Let’s Discuss Managing Complaints* – sourced June 2012 from
http://www.pscwa.org.au/getdoc/da00775d-1107-4632-80ec-a1bc2298e6c1/LetsDiscussManagingComplaints_000.aspx

DEEWR Child Care Service Handbook 2011-2012

Section 5.5 – Key Obligations imposed on approved child care services under family assistance law

Section 6.5 – What are my service responsibilities to parents?

Sourced June 2012 from www.deewr.gov.au

Early Childhood Australia (ECA) (2005) – *The Code of Ethics* – sourced June 2012 from
http://www.earlychildhoodaustralia.org.au/code_of_ethics/early_childhood_australias_code_of_et_hics.html

Privacy Law – sourced June 2012 from www.privacy.gov.au/law

UNICEF (n.d). *Fact Sheet: A summary of the rights under the Convention on the Rights of the Child* – sourced June 2012 from
http://www.unicef.org/crc/files/Rights_overview.pdf

Policy creation date: June 2012

Policy review date: Oct 2018

6.4 *Records Management*

Rationale and Policy Considerations

Willi Wag Tails Childcare service understands it has a responsibility to protect and manage records in a way that respects the privacy and confidentiality of all stakeholders, whilst maintaining business requirements. Legislation requires that families provide personal information to the service so that appropriate care can be taken of their children. The service will retain and use this information in accordance with regulatory, taxation and privacy requirements. Records that need to be retained will be filed or stored in a manner that protects them from unauthorised access. The service's Confidentiality/Privacy policy underpins the manner in which records are managed within the service.

Legislation and Government Requirements

Privacy Act 1988 (Cth.)

Taxation laws

Family Assistance Law

Fair Work Act 2009

Education and Care Services National Law Act 2010

Education and Care Services National Regulations

Children's Needs

Records pertaining to children's health, learning, behaviour and other sensitive issues are only accessed by authorised persons, and used to support the child's learning and well-being.

Families' Needs

- Security that private information given to the service re: income levels, family arrangements etc. are kept confidential;
- Knowledge about what is recorded about them and their children;
- Access to their own personal records.

Educator/Staff Needs

- Personal records, details, appraisals are treated as confidential;
- Knowledge about what is recorded about them;
- Access to records that contain information about them

Management Needs

- Maintenance of all records required to be kept by law;
- Safe storage of records for the required periods;
- No unauthorised access to records.

National Quality Framework

Education and Care Services National Law Regulations 2012 – 74; 75; 87; 92; 145-154; 158; 160; 161; 162; 168(2)(l)

National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 1.3.3; 5.1.2; 7.1.2; 7.1.3

Early Years Learning Framework for Australia- Principles: 1. Secure, Respectful and Reciprocal Relationships.

Policy Statement

Willi Wag Tails Childcare Service has a duty to keep adequate records about educators/employees, families, children and business transactions in order to operate responsibly and legally. The service will protect the interests of the children and their families and educators/employees include appropriate privacy and confidentiality. The service will also protect the integrity of business records by keeping appropriate and accurate records for the required time periods set down by law. All records kept at the service will be protected from unauthorised access in accordance with service Confidentiality/ Privacy policy. Prescribed information will be displayed in accordance with the *Education and Care Services National Law Act*. Archived records will be stored in a safe and secure manner.

Strategies for Policy Implementation

Displaying information

- The approved provider will display the following prescribed information required by the *Education and Care Services National Law Act*, in a prominent position at or near the main entrance to the service:
 - Provider approval information;
 - Service approval information;
 - Nominated supervisor information;
 - Any service waivers or temporary waivers held by the service;
 - Hours, days of operation of the service;
 - Name, telephone number of the person at the service to whom complaints may be addressed;
 - Name and position of the responsible person in charge of the service;
 - Contact details of the regulatory authority;
 - Notice regarding enrolment of a child at the service at risk of anaphylaxis (if applicable);
 - Notice of an occurrence of an infectious disease at the service (if applicable).

Maintaining records

- The service will maintain an efficient record keeping system by adhering to the following strategies:
 - Setting up an organised filing system;
 - Documenting what records are kept, what they contain, where they may be accessed, and by whom;
 - Updating records regularly;
 - Ensuring records can be understood by all authorised persons;
 - Establishing strategies to check accuracy of records;
 - Cross-referencing records to ensure all required information is kept;
 - Documenting where back-up records are stored.

Access and security

- Security of records will be maintained through

- Using secure computer passwords that are regularly changed;
- Using lockable filing cabinets;
- Installing a monitored security system for the service (if required);
- Following procedures to check individuals identity before granting access to records;
- Storing records in an area that is away from those who do not need to access it;
- Storing back-ups of important records in a secure place off-site;
- Discussing security procedures regularly with educators/employees.
- During orientation the service will provide relevant information to educators/employees and families about which records are kept and how they are protected within the service.
- A Confidentiality Statement will be attached to all forms that require families to provide personal information.
- Clear guidelines on who has access to what records will be provided by the service for educators/employees and families. These guidelines will be available at all times at the service.
- Records relating to enrolled children are maintained in an up-to-date form in a secure area at the service. These records are only accessed by authorised personnel or the enrolled child's family.
- Records relating to staff qualifications, evidence of enrolment in training, criminal record checks, working with children check/card, medical clearances, and timesheets will be maintained and provided to the regulatory authority on request.

Retaining records

- The service will retain records for the periods required in accordance with:
 - Taxation laws – records kept for 5 years
 - Fair Work Act – employee records kept for 7 years
 - Family Assistance Law – records kept for 3 years
 - Education and Care Services National Law Act 2010
 - Accident/Illness/Injury/Trauma – records for children to be kept until child reaches 25 years of age
 - Death of a child – records to be kept for 7 years
 - Any other record required to be kept for 3 years
- Records relating to former enrolled children are archived in a safe and secure location.
- Information about where archived records are stored is kept at the service.
- Records that are no longer required to be kept by the service and which are considered to have no historical importance will be destroyed by being burned or shredded.
- Records of a business or historical interest will be kept by the service (eg: Annual Reports, important correspondence sent/received, Business Plans, Marketing Plans).
- Refer to Confidentiality Policy in regard to collection, storage and access to personal information provided to the service.

Procedures

- Confidentiality statement
- Educator/staff code of ethics (refer Educator handbook)
- Orientation checklists
- Privacy Statement
- Procedure for updating personal information
- Procedure for access to personal information
- Procedure for safe storage and disposal of personal information

Links to other policies

- Confidentiality/Privacy
- Educator/staff orientation (refer Educator Handbook)
- Enrolment and orientation
- Recruitment of Educators, Staff and Volunteers

Sources

Australian Tax Office – Record keeping for small business – sourced June 2012 from <http://www.ato.gov.au/content/downloads/bus76494nat3029.pdf>

DEEWR Child Care Service Handbook 2011-2012

Section 4.9 – Information management

Section 5.5 – Key obligations imposed on approved child care services under family assistance law

Section 5.6 – Co-operation with authorised officers under the Act – inspection of records and monitoring of compliance

Section 6.10 – Reporting of vacancy (availability) data

Section 9 – Reporting enrolment information

Section 10 – Reporting attendance information

Sourced June 2012 from www.deewr.gov.au

Early Childhood Australia (ECA)(2005) – The Code of Ethics – sourced June 2012 from

http://www.earlychildhoodaustralia.org.au/code_of_ethics/early_childhood_australias_code_of_et_hics.html

Fair Work Ombudsman – Employee Records and Pay Slips Fact Sheet – sourced June 2012 from www.fairwork.gov.au

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UNICEF(n.d). Fact sheet: A summary of the rights under the Convention on the Rights of the Child sourced June 2012 from http://www.unicef.org/crc/files/Rights_overview.pdf

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