Willi Wag Tails Childcare Service

Policies

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

Policy Area 1 Health and Safety

1.1 Healthy Eating and Food Handling Policy

Rationale and Policy Considerations

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 managers 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 though 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

<u>Provision of healthy nutritious snacks and meals</u>

- 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. Ie, 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.
- 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

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

Policy Creation date: June 2012 Reviewed 2024

SUN SAFE POLICY

Australia has one of the highest rates of skin cancer in the world with two in three Australians developing some form of skin cancer in their lifetime. Too much of the sun's UV radiation can cause sunburn, skin and eye damage and skin cancer. Infants and toddlers up to four years of age are particularly vulnerable to UV damage due to lower levels of melanin and a thinner stratum corneum (the outermost layer of skin). UV damage accumulated during childhood and adolescence is strongly associated with an increased risk of skin cancer later in life (Cancer Council Australia).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation
2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
S. 167	Offence relating to protection of children from harm and hazard
100	Risk assessment must be conducted before excursions
113	Outdoor space natural environment
114	Outdoor space shade
136	First aid qualifications
168	Education and care service must have policies and procedures
168 (2)(a)(ii)	Sun Protection

170	Policies and procedures to be followed
171	Policies and procedures to be kept available

PURPOSE

By implementing a 'best practice' Sun Safe Policy, our Service can help protect all children and staff from the harmful effects of ultraviolet (UV) radiation from the sun and teach children good sun protection habits from an early age to reduce their risk. To ensure the outdoor environment provides shade for children, educators and staff to minimise unsafe UV exposure. Additionally, this policy provides guidance on how to protect children and staff from severe hot weather events which are becoming more prevalent in Australia.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

Our Service will work in compliance with the *National SunSmart Early Childhood Program* to ensure children's health and safety is maintained at all times whilst at the Service. This policy has been reviewed and approved by the Schools and Early Childhood lead at SunSmart. (2024)

Our Service will monitor the Australian Bureau of Meteorology for notification of severe heat events and implement risk mitigation strategies to protect the health, safety and wellbeing of children. This policy applies to all activities on and off site.

MONITORING UV LEVELS

Sun protection is required when UV levels reach level 3 or above. Our Service will monitor the UV levels daily through any of the available apps that track UV or one or more of the following methods:

- using the smartphone *SunSmart global UV app* available at iTunes App Store and Google Play store
- using the SunSmart widget on the Service's website available at www.cancer.org.au
- viewing the Bureau of Meteorology website http://www.bom.gov.au/index.php
- visiting www.myuv.com.au

OUTDOOR ACTIVITIES

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times, when the UV Index is 3 or above. The sun protection times are a forecast from the Bureau of Meteorology (BOM) for the time-of-day UV levels are forecast to reach 3 or higher. At these levels, a combination of sun protection is recommended for all skin types. The Service will use a combination of sun protection measures (see below) whenever UV Index levels reach 3 and above.

SUN PROTECTION TIMES

UV levels vary across Australia and throughout the year. This listing highlights when UV is typically three and above in Western Australia. There may be times UV levels are three and above outside these periods. Please check the daily local sun protection times and UV levels to be sure you are using sun protection when it is required.

WA All year - Active outdoor play is encouraged throughout the day all year provided appropriate sun protection measures are used when necessary.

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times and when the UV index is three and above. A combination of sun protection measures is considered when planning all outdoor activities such as excursions and water play.

SHADE

THE APPROVED PROVIDER WILL ENSURE:

- sufficient natural, portable, or man-made shade is provided, particularly in high use areas
- shaded areas will be used for play experiences
- play experiences will be monitored throughout the day and moved as required to remain in the shade
- regular risk assessments and reviews will be made of the outdoor area to assist in planning for further shade requirements
- children who do not have appropriate hats or outdoor clothing are required to choose a shady play space or a suitable area protected from the sun and not move into unshaded areas of the playground
- children will still be required to wear hats, protective clothing, and sunscreen when playing under natural or portable shade.

HATS

Educators, children, and visitors are required to wear sun safe hats at all when outdoors. Cancer

Council Australia describes sun safe hats as hats that protect a person's face, neck, and ears, which include:

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not a suitable alternative.

- Children without a sun safe hat will be required to play in an area protected from the sun. They may be provided with a spare hat by the Service if available.

CLOTHING

- When outdoors, staff and children will wear sun safe clothing that covers as much of the skin as possible. Cancer Council Australia recommends clothing that:
    - covers the shoulders, back and stomach
    - is loose fitting, such as loose-fitting shirts and dresses with sleeves and collars or covered neckline, or longer style skirts, shorts and trousers.
- Children who are not wearing sun safe clothing can be provided with spare clothing or will be required to play under shade or in an area protected from the sun or provided with spare clothing.

  Please note: Midriff, crop or singlet tops do not provide enough sun protection and therefore are not recommended.

SUNSCREEN

As per Cancer Council Australia recommendations:

- staff and children will apply SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours or more frequently if washed or wiped off
- permission to apply sunscreen is included in the Service enrolment form (see *Enrolment Policy*)
- where children have allergies or sensitivity to the sunscreen, parents are asked to provide an alternative sunscreen. The child will be required to play in the shade. A record of any allergy must be provided in writing from the parent/guardian and recorded on the child's enrolment record. Cancer Council Australia recommends usage tests before applying a new sunscreen
- to help develop independent skills ready for school, children from three years of age are given opportunities to apply their own sunscreen under supervision of staff, and are encouraged to do so
- sunscreen is stored in a cool, dry place and the use-by-date monitored.

SUNSCREEN FOR BABIES

Recommendations for babies from the Cancer Council Australia include:

- babies under 12 months will not be exposed to direct sun when the UV Index levels is 3 or above
- ensure routine includes inside activities during the middle of the day
- physical protection such as shade positioning, clothing and broad-brimmed hats are the best sun protection measures.
- check the baby's clothing, hat and shade positioning regularly to ensure protection from UV.

If babies are kept out of the sun or well protected from UV radiation by clothing, hats and shade, they will avoid the need for sunscreen. Avoiding the use of sunscreen for babies aged six months or younger (or as recommended by recognised authorities) ACECQA, Sun Protection Guidelines (2021).

RISKS OF SUMMER PLAY

Australia has a hot climate and inevitably playground equipment and surfacing can heat up rapidly and retain heat. Many playground surfaces and equipment can exceed temperatures greater than 50°C and if young children come into contact with these surfaces, they can be burned severely within seconds. Surfaces can retain heat for long periods of time and cause burns to children. Play surfaces must be monitored before children have access to the outdoor environment.

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR AND EDUCATORS WILL:

- ensure obligations under the *Education and Care National Law and Regulations* are met
- ensure risk assessments are conducted to identify any potential hazards to children during summer months that could cause harm or injury to children. Risk minimisation control measures will be put in place to protect children. Potential hazards could include:
    - hot equipment- slides, poles, guardrails, any metal surfaces
    - hot surfaces- rubber and synthetic grass, walkways, concrete surfaces
    - sun burn and dehydration
    - severe heat
    - bushfires and air pollution
- use a thermometer or their hand to test surface temperature and make an informed decision about permitting children to play on equipment or in the outdoor space. If the surface temperature is determined to be too hot or is recorded as at or above 50°C it is recommended by Kidsafe Australia that children do NOT play on the surface

- ensure children wear shoes when playing in the outdoor area- [children may remove shoes when playing in sand]
- monitor the Bureau of Meteorology (BOM) for severe weather warnings and implement procedures to ensure the health and safety of all children and staff
- ensure children have access to water at all times throughout the day and offer extra feeds/drinks to babies during hot weather to avoid dehydration
- be aware of the signs and symptoms of heat-related illness in babies and young children and implement first aid as required
- keep children indoors during severe heat events
- ensure fans/air conditioning are used to help keep children cool
- adhere to Western Australian health department advice for hot weather risks and recommendations
- ensure sunscreen purchased for the Service complies with Australian Standard AS/NZS 2604:2012.

ROLE MODELLING AND WORK HEALTH AND SAFETY

Cancer Council Australia acknowledges that children are more likely to develop sun-safe habits if they are role-modelled and demonstrated by adults around them. Occupational UV exposure is also a WH&S issue. All educators, staff at Willi Wag Tails will therefore be required to role model appropriate sun protection behaviours by:

- wearing a hat
- wearing sun safe clothing
- applying SPF50+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- discussing sun protection with children and demonstrating a positive and proactive approach to the management of sun protection in the Service
- regularly drinking water and encouraging children to drink extra water in hot weather
- adapting the learning environment when severe weather events occur
- families and visitors are encouraged to role model positive sun safe behaviour
- monitoring the UV Index Levels and Daily Sun Protection times throughout the day
- regularly monitoring and reviewing the effectiveness of the *Sun Safety Policy*

EDUCATION AND INFORMATION

- Sun protection will be incorporated regularly into learning programs
- Sun protection information will be promoted to staff, families and visitors

- Severe hot weather events will be monitored through the Bureau of Meteorology (BOM) and risk mitigation measures implemented
- Educators and staff are encouraged to complete the Cancer Council Generation SunSmart online PL learning modules
- Further information and resources are available from the Cancer Council website and each state and territory SunSmart web page. See: https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety
- See https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/be-sunsmart/sunsmart-in-schools for links.
- The *Sun Safety Policy* is available to all educators, staff, students, families, volunteers and visitors of the Service to ensure a comprehensive understanding about keeping sun safe including appropriate hat, clothing and sunscreen requirements
- When enrolling their child/ren to our Service, parents will be required to give permission for educators to apply sunscreen to their child- either Service or family supplied sunscreen
- Should parents not provide permission for educators to apply sunscreen to their child, the child will be required to play in an area protected from the sun (e.g. under shade, veranda or indoors)
- Information about Sun Safety will be included in our *Family Handbook*

Australian Safety Standards

AS 4174:2018 Knitted and woven shade fabrics
AS/NZS 1067.1:2016, Eye and face protection - Sunglasses and fashion spectacles
AS/NZS 4399:2020, Sun protective clothing - Evaluation and classification
AS/NZS 2604:2012 Sunscreen products - Evaluation and classification
AS/NZS 4685.0:2017, Playground equipment and surfacing - Development, installation, inspection, maintenance and operation.6.2.1 General considerations, 6.3.9 Shade and sun protection, Appendix A Shade and sun protection

SOURCES

Australian Children's Education & Care Quality Authority. (2021). Sun Protection- Policy Guidelines
Australian Children's Education & Care Quality Authority. (2024). *Guide to the National Quality Framework.*
Australian Government Department of Education. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia.V2.0, 2022*
Australian Government. Bureau of Meteorology. Home page (for UV Index): http://www.bom.gov.au/uv/
Australian Government. Bureau of Meteorology. http://www.bom.gov.au/weather-services/severe-weather-knowledge-centre/warnings.shtml
Cancer Council Australia. Be SunSmart. https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/be-sunsmart
Cancer Council. Home page: https://www.cancer.org.au/
Cancer Council. Preventing cancer: Sun protections. https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety

Children's Services Act 1996
Cancer Council. SunSmart programs http://www.sunsmartnsw.com.au/about/
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (Amended 2023)
Kidsafe NSW. How Hot is Too Hot To Play?
NSW Government. Department of health. (2023). *Babies and young children in hot weather*
Occupational Health and Safety Act 2004
Safe Work Australia: Guide on exposure to solar ultraviolet radiation (UVR) (2019).
Western Australian Legislation Education and Care Services National Regulations (WA) Act 2012

POLICY CREATED	JUNE 2012	REVIEWED	Feb 2022 Mar 2023 March 2025 Mar 2026

WATER SAFETY POLICY

The safety and supervision of children is paramount when in or around water. This relates to m anaging water safety including any activity involving water play, excursions near water, safety around hot water, and hygiene practices with water in the Service environment. Children will be supervised at all times during water play experiences to help keep children safe in and around water and support children's learning in a safe environment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 165	Offence to inadequately supervise children
S. 167	Offence relating to protection of children from harm and hazards
25(1)(c)	Additional information about proposed education and care services premises
12	Meaning of a serious incident
101	Conduct of risk assessment for excursions
115	Premises designed to facilitate supervision
122	Educators must be working directly with children to be included in ratios
126	Centre based services-general educator qualifications
168(2)(a)(iii)	Education and care service must have policies and procedures in relation to- Water safety, including safety during any water-based activities
170	Policies and procedures to be followed
176	Time to notify the certain information to the Regulatory Authority

PURPOSE

To ensure the safety and supervision of children in and around water. This includes water play, excursions near water, hot water, drinking water and hygiene practices with water in the Service environment.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

WATER HAZARDS

The National Regulations make reference to '*water hazards*' however the term is not expressly defined. In this policy, a water hazard is defined as anything that can hold 5cm of water and fit a child's nose and mouth and a 'water hazard' may include:

- large bodies of water such as dams, creeks, river or pooling water, swimming pool, portable pools and spas, jetted bathtubs (or jacuzzis)
- fishponds
- smaller bodies of water such as baths, mop buckets
- sinks, basins
- water features, such as a wishing well
- containers for feeding animals
- water troughs, containers for paddling- clam shells
- beach

IMPLEMENTATION

Under the Education and Care Services National Regulations, an approved provider must ensure that policies and procedures are in place for managing water safety, including during any water-based activities and take reasonable steps to ensure those policies and procedures are followed.
According to Kidsafe, drowning is one of the leading causes of unintentional death for Australian children. Every year a number of children are killed and hundreds more rescued from near drowning situations. Non-fatal drowning incidents are also of great concern as they can have potential long-term effects, including brain damage and permanent disability. The most common factor in childhood drowning is lack of supervision. A child can drown in as little as a few centimetres of water. Items such

as nappy buckets, sinks, pet drinking bowls, ponds, pools, water features, water tanks are all potential drowning hazards. [source: Kidsafe]

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

- adhere to all obligations under the *Education and Care National Law and Regulations*
- complete detailed risk assessments that identify and assess risks associated with any water hazards and water-based activities
- ensure adequate supervision is provided when participating in water activities including:
  - direct and constant monitoring of children
  - careful and intentional positioning of educators
  - scanning and moving around the environment
  - observing play and anticipating behaviour
  - ensuring higher adult to child ratios
  - ensuring no child is left unattended when in proximity to water
- provide direction and education to educators and staff on the importance of children's safety and supervision in and around water
- ensure health and safety practices incorporate approaches to safe storage of water and water play
- conduct a risk assessment in accordance prior to taking children on an excursion- consider any water hazards and any risks associated with water-based activities before an excursion/incursion is approved
- ensure hot water is inaccessible to children, including hot drinks accessed by educators, staff or families
- ensure the regulatory authority is notified within 24 hours of becoming aware of a serious incident.

EDUCATORS WILL:

- provide active supervision when children are participating in water activities.
- complete a daily Safety Inspection of premises to ensure that all hazards are known and minimised.
- utilise water activities in appropriate weather as part of the planned program
- allow the children the opportunity to experiment with water, sand, and mixing materials
- incorporate water safety awareness into the educational program
- safely cover or make inaccessible to children all water containers, e.g., mop buckets, nappy buckets

- check for and empty any water that has collected in holes or containers after rainfall or watering gardens
- ensure children remain standing on the ground whilst using the water trough
- ensure buckets of water for soaking toys or clothing are inaccessible to children
- ensure water troughs or containers for water play are filled to a safe level and emptied into the garden areas after each use
- discourage children drinking from the water activities
- teach children about staying safe in and around water

OPERATIONAL SAFETY

- hot water accessible to children will be maintained at the temperature of 45.C° which will be tested annually. (Australian standard AS 3498)
- hot drinks are not to be consumed near children by educators, students or visitors

Important: Parents will be notified as soon as practicable but within 24 hours if their child is involved in an incident/accident at the Service or while under Service care. Details of the incident/accident will be recorded on an *Incident, Injury, Trauma and Illness Record*.

Reg.176: If the incident/accident situation, or event presents imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours. Educators will follow emergency procedures and contact emergency Services if a child appears to be missing or unaccounted for or is involved in a serious incident or accident.

SOURCES

Australian Children's Education & Care Quality Authority. (2014).
Australian Children's Education & Care Quality Authority. (2024). *Guide to the National Quality Framework.*
Australian Children's Education & Care Quality Authority. (2023). Policy and procedure guidelines- *Water Safety Guidelines*
Early Childhood Australia Code of Ethics. (2016).
Referenced Childcare Centre Desktop
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (Amended 2023)
KidSafe (2021). Water Safety. https://kidsafe.com.au/water-safety/
National Health and Medical Research Council (NHMRC): www.nhmrc.gov.au
Victoria Government. Better Health Channel. Water safety for children.
Western Australian Legislation Education and Care Services National Law (WA) Act 2012
Western Australian Legislation Education and Care Services National Regulations (WA) Act 2012

POLICY REVIEWED	APRIL 2025 JULY 2026

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/managers 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 2012
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 confidents 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 – 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/manager.
- 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.

<u>Emergency Rehearsals</u>

- Emergency rehearsals involving educators/staff and children will be practised every 3 months randomly without warning and at different times of the day.
- Each emergency rehearsal will be recorded, and retained for a period of 3 years from the day on which the record was made

<u>Evacuation out of the Centre</u>

- Evacuation out of the service may be for any reason including but not limited to a fire, bush fire,
- 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 may include items such as blankets, first aid kit, spare nappies etc.
    - Nominating who will collect the attendance roll, parents/guardian's 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

<u>Evacuation into the Centre</u>

- Evacuation into the service may be for a variety of reasons including but not limited to bee swarm, threatening animal, snake, threatening person
- Where a situation arises which requires the bringing of the children into the service 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, 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 Fire and Emergency Services Authority
- 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/manager will ensure that these devices are maintained in working order.
- 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. If 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.

Shire Evacuation Procedure

- The Shire of Williams has a community evacuation plan in place that includes, but is not limited to
    - Air crash
    - Dam break
    - Bushfire
    - Road crash
    - Earthquake
    - Storm
    - Flood
- In the event of shire emergency, the centre will be contacted via phone with instructions to proceed.
- Willi Wag Tails personnel should follow centre emergency procedures to evacuate from building, before following any instructions given by emergency controller, including, but not limited to, the use of an organised bus to evacuate from town.

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:

- FESA
- 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/Incident/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/manager that an ambulance should be called.
    - Provide the child's medical record for the ambulance officer.
    - Discuss with the nominated supervisor/manager 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/manager/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/manager 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/manager 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/manager 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/manager will notify the service's insurers and provide them with a copy of the Accident/Illness/Trauma Report Form
- The approved provider /nominated supervisor/manager 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/manager 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

Shire of Williams- Local Emergency Management Arrangements (sourced March 2019) from https://www.williams.wa.gov.au/documents/295/local-emergency-management-arrangements

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Policy reviewed: March 2023 March 2025

QA 2 SLEEP AND REST

All children have individual sleep and rest requirements. Our objective is to meet each child's need for sleep, rest and relaxation by providing a comfortable, relaxing and safe space to enable their bodies to rest. This environment will also be well supervised ensuring all children feel secure and safe at our Service.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1	Design	The design of the facilities is appropriate for the operation of a service.
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW	
Section 165	Offence to inadequately supervise children
Section 167	Offence relating to protection of children from harm and hazard
82	Tobacco, drug and alcohol-free environment
84A	Sleep and Rest
84B	Sleep and rest policies and procedures
84C	Risk assessment for purposes of sleep and rest policies and procedures
84D	Prohibition of bassinets
87	Incident, injury, trauma and illness record
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment

106	Laundry and hygiene facilities
107	Space requirements-indoor space
110	Ventilation and natural light
115	Premises designed to facilitate supervision
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be available
172	Notification of change to policies or procedures
176	Time to notify certain information to Regulatory Authority

PURPOSE

Our *Sleep and Rest Policy* will assist management, educators and volunteers to ensure that all children have appropriate opportunities to sleep, rest and relax in accordance with their individual needs whilst attending the service. A high level of safety will be provided during sleep and rest and every reasonable precaution will be taken to protect them from harm and hazard.

Our Service will ensure that all children have appropriate opportunities to sleep, rest and relax in accordance with their individual needs. The risk of Sudden Infant Death Syndrome (SIDS) for infants will be minimised by following practices and guidelines set out by the national authority on safe sleeping practice for infants and children- Red Nose (formerly SIDS and Kids).

The educator will consult with families about their child's individual needs, ensuring all parties are aware of the different values, cultural, and parenting beliefs and practices, or opinions associated with sleep requirements.

SCOPE

This policy applies to children, families, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

SLEEP AND REST SPECIFIC RISK ASSESSMENT

The approved provider, in conjunction with educators of the service, will conduct a comprehensive risk assessment in order to identify any potential risk/s or hazards and ensure the safety of all children during sleep and rest.

The risk assessment will be reviewed at least annually or after being aware of an incident or circumstance where the health, safety or wellbeing of children may be compromised during sleep or rest. All risk assessments will be regularly assessed and evaluated to facilitate continuous improvement in our service.

Our risk assessment will consider and include the following information:

- the number, age, developmental stages and individual needs of children
- the sleep and rest needs of individual children being educated and cared for (including specific health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest)
- Educators adequately supervising and monitoring children during sleep and rest periods.
- the level of knowledge and training of educators supervising children during sleep and rest periods
- the location of sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas
- the safety and suitability of any cots, beds and bedding equipment, having regard to the ages and developmental stages of the children who will use the cots, bed and bedding equipment.
- any potential hazards in sleep rest areas or on child during rest and sleep periods such as jewellery.
- the physical safety and suitability of sleep and rest environments (including temperature, lighting and ventilation)

BASSINETS

Our Service will ensure no bassinets are used or stored within the service as per Regulation 84D. Families will be informed children will not be accepted into care in a bassinet and under no circumstances will a bassinet be permitted to remain on the premises.

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- a sleep and rest specific risk assessment is conducted at least annually to ensure all protentional hazards are controlled in sleep or rest areas in line with Red Nose and ACECQA guidelines.
- every reasonable precaution has been taken to protect children from harm and from hazards likely to cause injury. Hazards posing a risk of suffocation, choking, crushing or strangulation risk to children must be removed from the sleep and rest environment. (Sec. 167)
- reasonable steps are taken to ensure that the needs for sleep and rest of children being educated and cared for by the Educator are met, having regard to the ages, developmental stages and individual needs of each child.
- up to date knowledge regarding safe sleeping practices is maintained and information communicated to educators and families.

- educators will complete the Red Nose professional training.
- to provide appropriate opportunities to meet each child's need for sleep, rest and relaxation including providing children with comfortable spaces away from the main activity area for relaxation and quiet activities.
- that sleeping infants are closely monitored and that all sleeping children are within hearing range. This involves physically checking/inspecting sleeping children at 10-minute intervals and ensuring that they are always within sight and hearing distance of sleeping and resting children so they can easily monitor a child's breathing and the colour of their skin. (Note: CCTV, audio monitors or heart monitors do not replace the need for physical checking/inspecting sleeping children)
- to provide children with safe sleeping equipment and environment, including adequate ventilation and adequate lighting to enable effective supervision.
- the child's safety is always the first priority.
- children who are sleeping or resting have their face uncovered at all times.
- Comforters are moved away from the face once child is asleep.
- to provide information to parents and families about Safe Sleep practices (see Red Nose).
- educators and volunteers follow the policy and procedures.
- all equipment and furniture used are safe, clean and in good repair (Reg. 103, 105)
- there are adequate numbers of cots and bedding (including mattresses) available to children that meet Australian Standards to be used only for sleep and rest purposes.
- all cots used will meet the current mandatory Australian Standard for Cots (AS/NZS 2172)
- educators follow the *Administration of First Aid Policy* if the child's face/body appears blue and the child is not breathing, initiate first aid immediately including calling an ambulance and beginning resuscitation.
- the educator will ensure an *Incident, Injury, Trauma and Illness Record* is completed in its entirety.
- the Manager, Nominated Supervisor or Responsible Person will ensure the parent and the regulatory authority are notified as soon as possible and within 24 hours of a serious incident.
- a safe indoor environment is provided for children that is well ventilated, has adequate natural light and can be maintained at a temperature that ensures children's safety and wellbeing (Reg.110)
- sleep and rest environments will be safe and free from all hazards including cigarette and tobacco smoke.
- areas for sleep and rest are ventilated and light for viewing children.

- the door may be ajar to enhance supervision when all children are sleeping in the main room.
- safe sleep practices are documented and shared with families.
- to negotiate sleep and rest routines and practices with families to reach agreement on how these occur for each child at the Service.
- Nominated Supervisors and educators are not expected to endorse practices requested by a family if they differ from Red Nose safe (formerly SIDS and Kids) sleeping recommendations.
- if any requirements differ from Red Nose sleeping recommendations, written authorisation from a medical practitioner will be required and shared with educators.

EDUCATORS WILL:

- have a thorough understanding of the Service's policy and practices and embed practices to support safe sleep into everyday practice.
- ensure children's safety is paramount.
- consult with families about children's sleep and rest needs.
- be sensitive to each child's needs so that sleep and rest times are a positive experience.
- ensure there are appropriate opportunities to meet each child's need for sleep, rest, and relaxation.
- ensure that beds/mattresses are clean and in good repair.
- ensure beds, cots and mattresses are used for the correct purpose of sleep and rest only.
- ensure beds and mattresses are cleaned between each use.
- ensure cots/stretchers are stored safely.
- ensure that bed linen is clean and in good repair.
- ensure bed linen is used by an individual child and is washed before use by another child.
- arrange children's beds and cots to allow easy access for children and educators.
- ensure children rest/sleep with their beds/mattresses head to toe to minimise the risk of cross infection.
- create a relaxing environment for sleeping children by playing relaxation music reading stories, cultural reflection, turning off lights, and ensuring children are comfortably clothed.
- ensure there are no loose aspects of clothing that could entangle the child during sleep/rest (including bibs).
- maintain adequate supervision.
- physically check that the child is breathing by checking the rise and fall of the child's chest and the child's lip and skin colour is normal.

- ensure physical checks of a sleeping child occur at least every 10 minutes (Note: CCTV, audio monitors or heart monitors do not replace the need for physical checking/inspecting sleeping children). Supervision is active, effective and frequent.
- consider the circumstances and any risk factors that may mean physical checks need to be more frequent for some babies or children (e.g.; children with colds, chronic lung disorders or specific health care needs that may require higher level of supervision)
- if the child's face/body appears blue and the child is not breathing, initiate first aid immediately including calling an ambulance and beginning resuscitation.
- ensure an *Incident, Injury, Trauma, and Illness Record* is completed in its entirety following an incident.
- for children in cots ensure a record is maintained recording the time and observation of each physical check immediately after checks are made on the Safe Sleep Record.
- ensure sleeping spaces are not dark- there needs to be sufficient light to allow supervision and to physically check children's breathing, lip and skin colour.
- ensure sleeping infants are closely monitored and that all sleeping children are within hearing range and observed.
- assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required.
- communicate with families about their child's sleeping or rest times and the Service policy regarding sleep and rest times.
- respect family preferences regarding sleep and rest and consider these daily while ensuring children feel safe and secure in the environment. Any sleep requirements that differ from Red Nose recommendations must be supported by a medical certificate. Conversations with families may be necessary to remind families that children will neither be forced to sleep nor prevented from sleeping. Sleep and rest patterns will be recorded daily for families.
- encourage children to dress appropriately for the room temperature when resting or sleeping.

  Lighter clothing is preferable, with children encouraged to remove shoes, jumpers, jackets and bulky clothing.
- monitor the room temperature to ensure maximum comfort for the children.
- ensure that children who **do not** wish to sleep are provided with alternative quiet activities and experiences, whilst those children who **do** wish to sleep are allowed to do so, without being disrupted. If a child requests a rest, or if they are showing clear signs of tiredness, regardless of the time of day, there should be a comfortable, safe area available for them to rest. It is important that opportunities for rest and relaxation, as well as sleep, are provided.

- consider a vast range of strategies to meet children's individual sleep and rest needs- consider inclusion of all children and adjustments that may need to be implemented.
- respond to children's individual cues for sleep (yawning, rubbing eyes, disengagement from activities, crying etc).
- develop positive relationships with children to assist in settling children confidently when sleeping and resting.
- record sleep and rest patterns to provide information to parents/families.

BABIES AND TODDLERS

Recommendations sourced from ACECQA and Red Nose

- Babies should always be placed on their back to sleep when first being settled. Once a baby has been observed to repeatedly roll from back to front and back again on their own, they can be left to find their own preferred sleep or rest position (this is usually around 5–6 months of age). Babies aged younger than 5–6 months, and who have not been observed to repeatedly roll from back to front and back again on their own, should be re-positioned onto their back when they roll onto their front or side.
- If a medical condition exists that prevents a baby from being placed on their back, the alternative practice should be confirmed in writing with the Service, by the child's medical practitioner.
- Babies over four months of age can generally turn over in a cot but may not always be able to roll back again. When a baby is placed to sleep, Educators should check that any bedding is tucked in securely and is not loose. Babies of this age may be placed in a safe baby sleeping bag (i.e., with fitted neck and arm holes, but no hood). At no time should a baby's face or head be covered (i.e., with linen). To prevent a baby from wriggling down under bed linen, they should be positioned with their feet at the bottom of the cot.
- If a baby is wrapped when sleeping, consider the baby's stage of development. Leave their arms free once the startle reflex disappears at around three months of age and discontinue the use of a wrap when the baby can roll from back to tummy to back again (usually four to six months of age). Use only lightweight wraps such as cotton or muslin.
- Remove comforters away from babies when they are asleep.
- Babies or young children should not be moved out of a cot into a bed too early; they should also not be kept in a cot for too long. When a young child is observed attempting to climb out of a cot, and looking like they might succeed, it is time to move them out of a cot. This usually occurs when a toddler is between 2 and 3 ½ years of age but could be as early as 18 months.

EDUCATORS WILL:

- give bottle-fed children their bottles before going to bed.
- ensure children are not put in cots or in beds with bottles.
- observe children at 10-minute intervals while they sleep in these rooms. Educators must go into the rooms and physically observe babies breathing and check the colour of their skin. The educator will then officially record this on a Safe Sleep Record
- encourage the use of sleeping bags with fitted neck and armholes for babies as there is no risk of the infant's face being covered.
- securely lock cots sides into place to ensure children's safety.
- turn off wall-mounted heaters before children use the room for sleeping. Cot rooms may be air conditioned and maintained at an appropriate temperature.
- be aware of manual handling practices when lifting babies in and out of cots
- participate in staff development about safe sleeping practices
- ensure mattresses are kept in good condition; they should be clean, firm and flat, and fit the cot base with not more than a 20mm gap between the mattress sides and ends. A firm sleep surface that is compliant with the new AS/NZS Voluntary Standard (AS/NZS 8811.1:2013 Methods of testing infant products – Sleep surfaces – Test for firmness) should be used.
- not elevate or tilt mattresses
- remove any plastic packaging from mattresses.
- ensure that waterproof mattress protectors are strong, not torn, and a tight fit
- use firm, clean, and well-fitting mattresses on portable cots
- remove pillows, doonas, loose bedding or fabric, lamb's wool, bumpers and soft toys from cots
- record sleep and rest patterns to provide information to parents/families.

PRE-SCHOOL AGE CHILDREN

EDUCATORS WILL:

- be respectful for children's individual sleep and rest requirements.
- discuss children's sleep and rest needs with families and include children in decision making.
- provide a tranquil and calm environment for children to rest by turning off lights, playing relaxing music, reading stories, cultural reflection.
- ensure children are comfortably clothed.
- encourage children to rest their bodies and minds for 20-30 minutes.
- ensure children sleep with their face uncovered.

- closely monitor sleeping and resting children
- provide quiet activities for children- puzzles, books, drawing if they do not fall asleep.
- record sleep and rest times to provide information to parents/families

MAINTENANCE OF COTS/BEDDING

Regular maintenance of cots and other bedding must be made to ensure there is no hazard posed to babies or children. This may include:

- all equipment and furniture used are safe, clean and in good repair (Reg. 103, 105)
- sleep surfaces are checked for firmness in accordance to Australian Standard AS/NZS 8811:1:2013
- spaces between bars and mattress sides are as per regulations/guidelines (not more than 20mm apart)
- spaces do not pose any danger to children- arm and leg traps/finger traps.
- ensuring there are no choking hazards- cords, strings, bunting, toys, bumpers.
- checking all bolts and screws are tight and no sharp edges.
- cots are not painted with any paint that contains lead and is not chipped.
- ensure the cots have high sides- from top of mattress to top side of cot should be at least 500mm.

PARENTS/FAMILIES WILL:

- be informed during orientation of our *Sleep and Rest Policy* and procedure.
- be provided with any changes to our policies or procedures or best practices.
- be informed that if any requirements for sleep for their child differs from Red Nose sleeping recommendations, written authorisation from a medical practitioner? will be required.
- be requested to provide educators with regular updates on their child's sleeping routines and patterns, especially for infants.

SOURCES

ACECQA. (n.d.). Safe sleep and rest practices: https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices
ACECQA. (2023). Sleep and Rest for Children. Policy Guidelines.
Australian Children's Education & Care Quality Authority. (2014).
Australian Competition and Consumer Commission (ACCC). (2013). Find out more: Keeping baby safe
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (Amended 2023)
Guide to the National Quality Framework. (2017). (Amended 2023).
NSW Department of Education. (2022). Sleep and rest for children-Policy guidelines for early childhood education and care services. (updated)
Red Nose: https://rednose.org.au/section/safe-practices
Red Nose: Cot to bed safety https://rednose.org.au/downloads/RN3356_Cot_Bed_DL_Oct2018_Online.pdf

Revised National Quality Standard. (Amended 2023).
Western Australian Education and Care Services National Regulations

REVIEW

POLICY REVIEWED	MAY 2024, JULY 2025	NEXT REVIEW DATE	2027

2.1 QA 2 MEDICAL CONDITIONS

To support children's wellbeing and manage specific healthcare needs, allergy or relevant medical conditions. We aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policy
86	Notification to parent of incident, injury, trauma or illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical Conditions Policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication

94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
136	First Aid qualifications
162(c) and (d)	Health information to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures are to be followed
173(2)(f)	Prescribed information to be displayed- a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service
174	Time to notify certain circumstances to Regulatory Authority

PURPOSE

We aim to efficiently respond to and manage the medical conditions, health care needs or allergies of children and staff ensuring the safety and wellbeing of all children, staff, families, and visitors at our Service.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor and visitors of the Service.

DUTY OF CARE

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

a. a safe environment for children free of foreseeable harm *and*
b. adequate supervision of children at all times.

IMPLEMENTATION

We will involve all educators and families in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions.

There are a number of concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the service. Key procedures and strategies must be in place prior to the child commencing at the service to ensure their individual health, safety and wellbeing.

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

THE APPROVED PROVIDER / NOMINATED SUPERVISOR/MANAGEMENT WILL ENSURE:

- enrolment forms are reviewed at least annually, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents are provided with a copy of the Service's *Medical Conditions Policy* and any other relevant medical conditions policy
- a child is not enrolled at, nor will attend the Service without a medical management plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis or diabetes must be provided at the service each day [e.g. asthma inhalers, adrenaline auto injection devices or insulin]
- educators, staff and volunteers have knowledge and access to this policy and relevant health management policies (*Asthma Management Policy/ Anaphylaxis Management Policy/Diabetes Management Policy*)
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature
- new staff members are provided with induction and ongoing training to assist managers, educators and other staff effectively and children with medical management plans are clearly identified
- all aspects of operation of the Service must be considered to ensure inclusion of each child into the program
- a communication plan is developed in collaboration with the Nominated Supervisor/Responsible Person and management to ensure communication between families and educators is on-going and effective
- staff are provided with regular ASCIA anaphylaxis training to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis
- at least one staff member or nominated supervisor is in attendance at all times with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA)
- educators and staff have a clear understanding about their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition

- families provide required information on their child's health care need, allergy or relevant medical condition, including:
  - medication requirements
  - allergies
  - medical practitioner contact details
  - medical management plan
  - a medication risk minimisation and communication plan has been developed in consultation with parents
  - an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child's medical practitioner e.g: (ASCIA) or National Asthma Council of Australia
  - an individual Diabetes Management Plan is developed in consultation with parents and the child's medical practitioner
- educators and staff will be informed immediately about any changes to a child's medication risk minimisation and communication plan
- to record any prescribed health information and retain copies of a medication risk minimisation and communication plan, anaphylaxis management plan or asthma management plan in the child's enrolment folder
- educators have access to emergency contact information for the child
- casual staff are informed of children and staff members who have specific medical conditions, food allergies, the type of condition or allergies they have, and the Service's procedures for dealing with emergencies involving allergies and anaphylaxis
- a copy of the child's action plan is visibly to all staff and volunteers in the Service
- procedures are adhered to regarding the administration of medication at all times
- administration of medication record is accurately completed and signed by the educator and witness
- copies of children's medical action plans and medication are taken on any excursion or emergency evacuation from the service
- a notice is displayed prominently in the main entrance of the Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and providing details of the allergen/s (regulation 173)
- information regarding the health and wellbeing of a child or staff member is not shared with others unless consent is provided in writing, or provided the disclosure is required or authorised by law under relevant state/territory legislation (including Victoria- Child Information Sharing Scheme (CISS) or the Family Violence Information Sharing Scheme

(FVISS). See *Child Protection Policy* for further information regarding legal obligations to sharing of information as per CISS or FIVSS schemes.)

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/RESPONSIBLE PERSON/EDUCATORS WILL ENSURE:

- in the event that of a high-risk scenario where a child suffers from an allergic reaction, incident, situation, or event related to a medical condition the Service and staff will follow the child's emergency medical management plan as per Regulation 90(1)(c)(ii)
- first aid will commence immediately as per the child's medical management plan
- urgent medical attention from a registered medical practitioner is contacted if required
- an ambulance is called by dialling 000 if the child does not respond to initial treatment
- the child's parent/guardian or emergency contact will be informed when practicable, but as soon as possible
- the Nominated Supervisor or responsible person will ensure the *Incident, Injury, Trauma and Illness Record* is completed in its entirety
- the Manager/Nominated Supervisor will notify the regulatory authority (within 24 hours) in the event of a serious incident.

FAMILIES WILL ENSURE:

MEDICAL MANAGEMENT PLAN

Any medication action plan provided by a child's parents and/or registered medical practitioner should include the following:

  - specific details of the diagnosed health care need, allergy or relevant medication condition
  - supporting documentation (if required)
  - a recent photo of the child
  - current medication prescribed for the child
  - if relevant, state what triggers the allergy or medical condition
  - first aid/emergency response that may be required from the Service
  - further treatment or response if the child does not respond to the initial treatment
  - contact details of the medical practitioner who signed the plan
  - the date of when the plan should be reviewed
- a copy of the medical action plan will be displayed for educators and staff to see to ensure the safety and wellbeing of the child

- the Service must ensure the medication risk minimisation and communication plan remains current at all times
- educators and staff are updated immediately about any changes to a child's medication risk minimisation and communication plan
- that the risks relating to the child's specific health care need, allergy, or medical condition are assessed and minimised

EDUCATORS WILL ENSURE:

- that practices and procedures in relation to the safe handling, preparation, serving and consumption of food are developed and implemented
- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication
- that the child does not attend the Service without medication prescribed by the child's medical practitioner in relation to the child's specific health need, allergy or medical condition
- risk minimisation plan is reviewed at least annually and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child's health and medical condition is communicated to parents at the end of each day by educators
- parents are notified by educators in advance of any special activities taking place such as celebrations, sporting events or excursions so plans of safe inclusion can be developed
- appropriate hygiene practices are followed by educators when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*.

RESOURCES

ASCIA anaphylaxis e-training for schools and early childhood education/care

ASCIA plans for Anaphylaxis

Coeliac Australia

Cystic Fibrosis Australia

Diabetes Australia

Epilepsy Foundation

National Asthma Australia

National Allergy Strategy

SOURCE

Childcare Centre Desktop 2023
Australian Children's Education & Care Quality Authority. (2014).
Australian Children's Education & Care Quality Authority (ACECQA). 20201. Policy and Procedure Guidelines. *Dealing with Medicals in Children Policy Guidelines.*
Australian society of clinical immunology and allergy. ASCIA.
https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (Amended 2023).
Federal Register of Legislation *Privacy Act 1988.*
Guide to the National Quality Framework. (2017). (Amended 2023).
National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).
Occupational Health and Safety Act 2004.
Revised National Quality Standard. (2018).
Department of Education Victoria *Meeting children's health needs* (2020).
Western Australian Education and Care Services National Regulations

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; 5.1.2l 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

Government of Western Australia – *Anaphylaxis Management Guidelines* –
https://allergy.org.au/hp/papers/acute-management-of-anaphylaxis-guidelines/

Policy Creation date: June 2012
Policy Reviewed: Oct 2022, 2025

2.3 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/managers 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: Elements 2.1.2, 2.13, 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

<u>Hygiene</u>

- 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, wipes, 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 disinfectant. 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/manager 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 Manager.
- 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

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

The Royal Children's Hospital – *Child Care and Children's Health – an information sheet for parents (Sept 2008) – Hygiene and infection control* – sourced June 2012 from http://www.rch.org.au/emplibrary/ecconnections/CCH_P_Sept2008_English.pdf

Policy Creation date: June 2012
Policy Review date: February 2022, 2024

2.4 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/manager 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 act 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 – 2.1.2; 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 and duty of care 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 or fever (see High Temperature Indicator table on next page)
- 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).
- continuous scratching of scalp or skin
- difficulty in breathing
- stiff neck and/or sensitivity to light

If staff are unwell, they will not attend work or will be replaced and sent home if they start to display signs of being unwell while at work. If staff cannot be replaced families may be contacted to come and collect their child from care due to regulations requirements of staff to child ratios. The priority of access will be considered, with working parents taking priority of available positions and respite children needing to go home for the duration of the day.

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 cannot be contacted the emergency person will be contacted to collect the child. Parents are to respond quickly to collect their children to assist staff with their duty of care to all other children in care.

If a child has a temperature over 37.5 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 may need to be called. While waiting for the ambulance educators will take physical steps to try to reduce the child's temperature i.e. 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 37.5 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 childcare 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 childcare 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 be required to collect the child.

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).

DEALING WITH COLDS/FLU (RUNNY NOSE)

It is very difficult to distinguish between the symptoms of COVID-19, influenza, and a cold. If any child, employee or visitor has any infectious or respiratory symptoms (such as sore throat, headache, fever, shortness of breath, muscle aches, cough or runny nose) they may be requested to either stay at home or self-test using a Rapid antigen test (RAT). (See: Australian Government Identifying the symptoms)

Colds are the most common cause of illness in children and adults. There are more than 200 types of viruses that can cause the common cold. Symptoms include a runny or blocked nose, sneezing and coughing, watery eyes, headache, a mild sore throat, and possibly a slight fever.

Nasal discharge may start clear but can become thicker and turn yellow or green over a day or so. Up to a quarter of young children with a cold may have an ear infection as well, but this happens less often as the child grows older. Watch for any new or more severe symptoms—these may indicate other, more serious infections. Infants are protected from colds for about the first 6 months of life by antibodies from their mothers. After this, infants and young children are very susceptible to colds because they are not immune, they have close contact with adults and other children, they cannot practice good personal hygiene, and their smaller nose and ear passages are easily blocked. It is not unusual for children to have five or more colds a year, and children in education and care services may have as many as 8–12 colds a year.

As children get older, and as they are exposed to greater numbers of children, they get fewer colds each year because of increased immunity. By 3 years of age, children who have been in group care since infancy have the same number of colds, or fewer, as children who are cared for only at home. Children can become distressed and lethargic when unwell. Discharge coming from a child's nose and coughing can lead to germs spreading to other children, educators, toys, and equipment. *Management has the right to send children home if they appear unwell due to a cold or general illness.*

COVID - 19

Willi Wag Tails CC follows the Australian Government recommendations with COVID -19:

- If your child has COVID please keep them home until symptoms have resolved. This could take up to 10 days or more, a minimum of 5 days is a good guide.
- Manage symptoms with rest and pain relief.
- Inform service and anyone else they have had close contact with. They are most infectious 2 days before symptoms start.
- If your child tested positive this should be registered with the Department of Health.

Referenced - https://www.wa.gov.au/government/covid-19-coronavirus

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. Parents are expected to keep their

children at home until all symptoms subside and their child is well again to engage in normal daily activities.

The service acknowledges that medications contain potent chemical active agents which affect the body's metabolism and should be always treated with due respect and care 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

Policy Creation Date: June 2012
Policy Revision Date: March 2020
Policy Updated: February 2023

2.5 Infectious Diseases and Exclusion

Rationale and Policy Considerations

Ensuring the health and safety of children and staff, and supporting children's ongoing wellbeing, is a core focus of Willi Wag Tails Childcare Service. The purpose of this policy is to help manage illness and prevent the spread of infectious diseases. This policy and procedures have been developed to ensure that parents, staff and visitors are aware of the likelihood of young children being exposed to an infectious illness whilst in care; and understand what must occur in the event of an illness or the incidence of an infectious disease occurring.

Maintaining hygiene practices within the service and teaching young children about health and hygiene will assist in the prevention of infectious diseases. Providing families with timely and current information will further support this process. Children's (and staff) exposure to infectious diseases at Willi Wag Tails Childcare Service will be minimised by:

- following all recommended guidelines from relevant authorities regarding the prevention of infectious diseases.
- promotion of practices that reduce the transmission of infection.
- the exclusion of sick children and staff.
- service support for child immunisation; and
- implementation of hygienic food handling, hand washing and toileting procedures

Children's Needs

- Protection from infectious diseases
- 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 at Willi Wag Tails Childcare Service will take appropriate measures when dealing with infectious diseases, mandatory reporting, and minimum exclusion periods.

Educator/Staff Needs

- Protection from infection
- To receive management support through clear written policies and understanding the issue regarding the management of outbreak of infectious diseases
- 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 act 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)- 77, 85, 86, 87, 88, 160, 162, 168
National Quality Standard for Early Childhood Education and Care – 2.1.2; 3.1.2; 7.1.2

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 has a duty of care to report any outbreak of communicable diseases to the relevant authorities, and to advise families of these outbreaks.

Strategies for Policy Implementation

COVID-19

Willi Wag Tails CC follows the Australian Government recommendations with COVID -19.

- If your child has COVID please keep them home until their symptoms have resolved. This could take up to 10 days or more and a minimum of 5 days is a good guide.
- Manage symptoms with rest and pain relief.
- Inform service and anyone else they have had close contact with. They are most infectious 2 days before symptoms start.
- If your child tested positive this should be registered with the Department of Health.

Referenced - https://www.wa.gov.au/government/covid-19-coronavirus

Management of unwell children at the centre

If an infectious disease arises at the centre, Willi Wag Tails CC will respond to symptoms in the following manner:

- Isolate the child from other children.
- Ensure the child is comfortable and appropriately supervised by educators.
- Contact the child's parents or nominated emergency contact.
- Ensure all bedding, towels, and clothing which have been used by the child have been disinfected. These should be washed separately and left to dry in the sun.
- Ensure all toys used by the child are disinfected.
- Inform all service families and educators of the presence of an infectious disease.
- Ensure that families keep the centre updated on the diagnosis and progress of the infectious disease. Doctors/nurses should have contacted the relevant public health unit. More information can be found by contacting the relevant public health unit.

    - **Wheatbelt PHU**
      Based in Northam
      Street address: Northam Health Service – Ambulatory Care Unit, Robinson Street, Northam WA 6401

Postal address: PO Box 312 Northam WA 6401
Telephone: 9690 1720
Fax: 9690 1335
Email: WACHSWheatbeltCommunicableDiseaseControl@health.wa.gov.au
Postcodes: 6041 – 6044, 6302 – 6315, 6350 – 6393, 6401 – 6428, 6460 – 6490, 6501 – 6513, 6516 – 6521, 6560 – 6575, 6603 – 6613

Notification by families of infectious disease

If the service is notified by parents/public health unit of a case of infectious disease, staff at Willi Wag Tails CC will take the following steps:

- Notify all existing families, especially if ill child has attended the service in the infectious period.
- Take additional personal protective equipment precautions where necessary.
- Implement exclusion period of infectious child.
- Disinfect/sanitise centre using recommended procedures (see NHMRC staying healthy 5th Edition)

Recommended minimum exclusion periods.

Campylobacter infection
Exclude until there has not been a loose bowel motion for 24 hours.

Candidiasis (thrush)
Not excluded

Cytomegalovirus (CMV) infection
Not excluded

Conjunctivitis
Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis.

Cryptosporidium
Exclude until there has not been a loose bowel motion for 24 hours.

Diarrhoea
Exclude until there has not been a loose bowel motion for 24 hours.

Fungal infections of the skin/nails (e.g. ringworm, tinea)
Exclude until the day after starting appropriate antifungal treatment.

Giardiasis
Exclude until there has not been a loose bowel motion for 24 hours.

Glandular fever
Not excluded

Hand, foot, and mouth disease
Exclude until all blisters have dried.

Haemophilus influenza type b (Hib)
Exclude until the person has received appropriate antibiotic treatment of at least 4 days.

Head lice
Not excluded if effective treatment begins before the next day at the education and care service.
The child does not need to be sent home immediately if head lice are detected.

Hepatitis A
Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice

Hepatitis B
Not excluded

Hepatitis C
Not excluded

Herpes simplex (cold sores, fever blisters)
Not excluded if the person can maintain hygiene practices to minimise the risk of transmission.
If the person cannot comply with these practices (ie if the person is too young), they should be excluded until the sores are dry
Sores should be covered with a dressing, if possible

Human immunodeficiency virus (HIV)
Not excluded.
If the person is severely immune compromised, they will be vulnerable to their people's illnesses.

Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)
Not excluded

Hydatid disease
Not excluded

Impetigo
Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing.

Influenza and influenza-like illnesses
Exclude until person is well.

Listeriosis
Not excluded

Measles
Exclude for 4 days after the onset of the rash.
All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case.

Meningitis (viral)
Exclude until person is well.

Meningococcal infection
Exclude until appropriate antibiotic treatment has been completed.

Molluscum contagiosum
Not excluded

Mumps
Exclude for 9 days or until swelling goes down (whichever is sooner)

Norovirus
Exclude until there has not been a loose bowel motion or vomiting for 48 hours.

Pertussis (whooping cough)
Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing
Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics

Pneumococcal disease
Exclude until person is well.

Roseola
Not excluded
Ross River virus
Not excluded

Rotavirus infection
Exclude until there has not been a loose bowel motion or vomiting for 24 hours.

Rubella (German measles)
Exclude until fully recovered or for at least 4 days after the onset of the rash.

Salmonellosis
Exclude until there has not been a loose bowel motion for 24 hours.

Scabies
Exclude until the day after starting appropriate treatment.

Shigellosis
Exclude until there has not been a loose bowel motion for 24 hours.

Streptococcal sore throat (including scarlet fever)
Exclude until the person has received antibiotic treatment for at least 24 hours and feels well.

Toxoplasmosis
Not excluded

Tuberculosis (TB)
Exclude until medical certificate is produced from the appropriate health authority.

Varicella (chickenpox)
Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children.
Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection.

Viral gastroenteritis (viral diarrhoea)
Exclude until there has not been a loose bowel motion for 24 hours.

Worms
Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred.

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

Department of Health- Healthy WA- https://healthywa.wa.gov.au/Articles/A_E/Contact-details-for-population-public-health-units

National Health and Medical Research Council - *Staying Healthy in Child Care - 5th Edition*
https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services

Policy Creation Date: April 2020
Policy Revision Date: February 2022
Policy updated: April 2023

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/managers 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

<u>Excursions</u>

- 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 ratio's 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.

<u>Motor Vehicle transport</u>

- 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 must have a current Drivers Licence. 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 without 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 child restraint 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.
- Unacceptable behaviour whilst transporting children 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 behaviour, 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 responsible person at the service, or as close to the service as possible. All children will be required to walk together with the responsible person 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 it, and that they must be there on time, and the approved provider/nominated supervisor/senior management team 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

Harrison, L – Promoting Road Safety in Child Care Services – extract from *Putting Children First*, the Newsletter of the National Childcare Accreditation Council – Issue 23, September 2007

Kids and Traffic – Key road safety messages for adults who care for young children - sourced June 2012 from http://www.kidsandtraffic.mq.edu.au/fsheets/fact6.pdf

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 reviewed: Oct 2018, 2023
Policy updated: Sept 2021

CHILD SAFE ENVIRONMENT POLICY

Willi Wag Tails (WWT) advocates for children and has a strong commitment to child safety, establishing and maintaining a child safe environment. Children's safety and wellbeing are paramount at our Services. We promote a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children's sense of security and belonging.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
2.2.3	Child protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
S162 (A)	Persons in day-to-day charge and nominated supervisors to have child protection training
S165	Offence to inadequately supervise children
S166	Offence to use inappropriate discipline
S167	Offence relating to protection of children from harm and hazards
82	Tobacco, drug and alcohol-free environment
83	Staff members and family day care educators not to be affected by alcohol or drugs
84	Awareness of child protection law

99	Children leaving the education and care service premises
102(A-D)	Transportation of children (risk assessments and authorisations)
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
115	Premises designed to facilitate supervision
122	Educators must be working directly with children to be included in ratios
123	Educator to child ratios- centre based services
136	First aid qualifications
145	Staff record
149	Volunteers and students
155	Interactions with children
162	Health information to be kept in enrolment record
165	Record of visitors
166	Children not to be alone with visitors
167	Record of service's compliance
168 (2)(h)	Education and care services must have policies- Providing a child safe environment
170	Policies and procedures to be followed
171	Policies and procedures to be kept available

PURPOSE

WWT has a legal and ethical responsibility to provide a safe and friendly environment where all children are respected, valued and encouraged to reach their full potential. Children's safety and wellbeing is paramount, and we aim to take all practical steps to protect children from harm or risk of harm, ensuring a healthy and safe environment.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

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

COMMITMENT TO THE SAFETY OF CHILDREN AND YOUNG PEOPLE (National Principles 1-10)

WWT is committed to being a child safe organisation, placing the protection of children as a priority of our responsibilities and obligations. The Child Safe Standards recommended by the Royal Commission provide guidance for us to ensure our policies and procedures, strategies and attitudes, ensure children's safety is paramount and that we continue to improve our child safe culture and practices.

WWT has a zero tolerance to child abuse, and we are committed to the safety, participation and empowerment of all children. We ensure all staff and educators working with children undertake current child protection training and understand their obligations as mandatory reporters. We ensure children have a voice and respond to any concerns, disclosures, allegations or suspicions of harm by reporting to the relevant authorities. We recognise all children are diverse and welcome them regardless of their abilities, gender, religion or social, economic or cultural background. Our priority is to ensure the safety and wellbeing of children.

COMMUNICATION (National Principles 2 and 3)

We aim to build and maintain positive and respectful relationships with children, families, staff and educators of our Service and prioritise a child safe environment. We communicate clearly with all stakeholders and ensure our policies and procedures are available to staff, educators, employees, students, volunteers, families and children and young people. (Reg. 170).

PARTICIPATION OF FAMILIES, CHILDREN AND YOUNG PEOPLE (National Principle 2)

Our Service ensures families are always welcome and feel comfortable to ask questions on how we prioritise child safety. We encourage collaboration with families, and we promote a respectful, child safe culture where children's concerns are always responded to.

CODE OF CONDUCT (National Principles 4 and 6)

Management, educators, staff, volunteers and students will adhere to our Service's *Code of Conduct Policy.* Our *Code of Conduct Policy* clearly outlines expectations regarding behaviour and describes the principles, values, and ethical guidelines that guide our staff and stakeholders in

their interactions and activities. All educators and staff members are made fully aware that following breaches of the Code of Conduct and role responsibilities may result in disciplinary action which may lead to termination of employment. Individuals can report any concerns they may have about inappropriate actions of any educator, staff, student or volunteer that involves children or young people to management, ensuring a prompt and thorough response to maintain a safe and secure environment for all.

We will:

- promote a culture of child safety and wellbeing in all aspects of our Service's operations.
- adhere to our *Child Safe Environment Policy and Child Protection Policy* at all times.
- provide adequate and effective supervision of children at all times.
- ensure the safe use of online environments.
- take reasonable action to protect children from risk of harm.
- ensure the service premise is free from the use of tobacco, illicit drugs and alcohol.
- be responsible for their own, and others health and safety.
- be a positive role model to children.
- respect children's privacy and dignity at all times.
- listen and respond appropriately to the views and concerns of children.
- report any allegations of child abuse to the approved provider or to relevant authorities.
- notify the approved provider and/or the regulatory authority within 24 hours of any serious incident or complaint as per the National Regulations

Staff, educators, students, and volunteers must:

- not discriminate against any child, because of age, gender, cultural background, race, ethnicity, or disability
- not put children at risk of abuse- refusing food/play, making threats, exposing children to inappropriate language or material (movies, internet, photos)
- not develop any 'special' relationships with children or young people that could be seen as favouritism such as the offering of gifts or special treatment.
- not be under the influence of drugs or alcohol while working; bring alcohol or drugs onto the premises.
- not smoke or vape in or on surrounding areas of the Service.

RECRUITMENT (National Principle 5)

WWT maintains a rigorous and consistent recruitment, screening, and selection process to ensure the best staff members and educators are employed based on skills, qualifications,

experience and suitability for the position available. All staff and educators participate in robust interviews and have reference checks completed to ensure the applicant's suitability to the role, previous experiences and their commitment to child safe values and practices. All staff and educators are provided with a comprehensive induction process which outlines our Code of Conduct, identifying and responding to child abuse, grievance processes. Employees (including the nominated supervisor and staff members), students and volunteers are to familiarise themselves with the Child Protection Policy to understand the Child Protection Law and their obligations and mandatory reporting duties to ensure the safety and well-being of children at the service.

WORKING WITH CHILDREN CHECK- POLICE CHECKS (National Principle 5)

Working in conjunction with the Child Protection Act and National Regulations, the safety, welfare and wellbeing of children is paramount within our Service and community. A Working with Children Check (WWCC) is a requirement for people who work in child-related work. It involves a national criminal history check and a review of findings of workplace misconduct. The result of a Working with Children Check is either a clearance to work with children and is valid for 3 years, or a bar against working with children. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked.

Management is responsible for the periodic review and maintenance of up-to-date records of employees' Working with Children Check, including the Working with Children Check number and the date on which each clearance expires. Once an employee provides their WWCC clearance, management will verify the clearance to ensure that is it valid and current. The WWCC will be placed in the individual's file and continue to be updated as required. Management will verify all student and volunteer WWCCs prior to placement. Any visitor who has direct contact with children may be required to provide a WWCC for verification prior to coming into contact with children (*best practice*).

The approved provider will keep a record for each day a student or volunteer participates in the service including date and hours of participation.

CHILD PROTECTION- REPORTABLE CONDUCT SCHEME (National Principle 6)

Children and young people always have a right to be safe and protected. To comply with legislation and ensure a child safe environment, all educators, staff, volunteers and students are advised of current child protection law and understand any obligations under the law. Supervision is effective to ensure they understand that *child safety is everyone's responsibility.*

All management (with direct contact of children or young person), educators and staff are mandatory reporters and have a legal obligation to make reports if they suspect on *reasonable* grounds, a child is at risk of significant harm. Neglecting these obligations could potentially be deemed a criminal offence. All staff are provided with up-to-date training about child protection law and their obligations under this law and to ensure they are confident in following the reporting guidelines within WA and adhere to our *Child Protection Policy*. (Reg 84).

To protect children and young people and ensure their safety, welfare and wellbeing, management is responsive to report allegations or convictions of harm or risk of harm to a child or young person and child related misconduct by any staff member, educator, volunteer or contractor to the relevant organisation or Department for Child Protection.

WWT is committed to providing support to children, young people, families, educators, or staff who have made a report regarding child protection, with a focus on upholding strict confidentiality throughout the process. Our primary concern is the well-being and safety of the child, and we will work closely with relevant authorities, professionals, and support networks to ensure that the child's best interests are met throughout the process.

Child protection- Allegations Against Employees

To protect children and ensure their safety, welfare and wellbeing, management is responsive to report allegations or convictions of child abuse and child related misconduct by any staff member or volunteer or contractor to the Ombudsman as part of the *Reportable Conduct Scheme.*

We take our legislative responsibilities as part of the Reportable Conduct Scheme seriously and will respond to any reportable allegation or conviction against employees or volunteers that may arise.

REPORTING AND RESPONDING TO GENERAL COMPLAINTS (National Principle 6)

Feedback from children, families, educators, staff and the wider community is fundamental in creating an evolving Childcare Service working towards the highest standard of care and education.

We aim to investigate all complaints and grievances with a high standard of equity and fairness.

PHYSICAL ENVIRONMENT – SUPERVISION AND SAFETY CHECKLISTS (National Principles 5 and 7)

Children's safety is embedded in our day-to-day practices. We ensure effective and adequate supervision is provided to children, whilst ensuring educator to child ratios are met at all times. Educators will employ 'active supervision' strategies within the service environment and when participating in excursions or transporting children. Consideration will be made for the different ages and abilities of children and the activities that may require different levels of supervision.

Sleeping infants and toddlers will be closely monitored at regular intervals checking for their breathing, and the colour of their skin and lips. Consideration will be provided when older children are using the toilet and bathroom areas, including monitoring and supervision across all areas that children access.

Through conducting risk assessments, we assess and manage risks in the physical environment collaborating with children to develop behaviour guidelines for play including adventurous play to ensure their safety. Educators have a sound understanding of their duty of care and responsibilities in ensuring a child safe environment.

Educators conduct regular safety checks to maintain basic standards of safety within our Service. Children are encouraged to speak up about their safety and the safety of their friends by telling an educator if they feel unsafe in a particular situation or environment.

Educators will complete daily checklists to assist and record inspections of the physical environment where foreseeable risks may be evident and cause harm or injury to a child:

Any findings that require attention will be either dealt with immediately or as soon as practical.

RISK ASSESSMENT & RISK ASSESSMENT TOOL (National Principle 8)

It is a legislative requirement that management, staff and educators implement a risk management system where they identify and manage hazards and risks within the workplace to ensure a child safe environment.

It is the responsibility of all staff and educators at the Service to complete a risk assessment where children's safety may be jeopardised and when organising an excursion/incursion or any transportation of children. Children's safety must be incorporated into everyday practice within the Service.

EMERGENCY AND EVACUATION PROCEDURES

Management will ensure that copies of the emergency and evacuation floor plan is displayed in

prominent positions near each exit of the service premises. All staff and educators are familiar with emergency evacuation procedures and regulatory requirements. Rehearsals for emergency and evacuation procedures, including lock downs, are conducted at least once every 3 months. Records will be kept for all rehearsals.

ARRIVAL AND DEPARTURE AUTHORISATION

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

To ensure children's safety, staff and educators have a clear understanding of their legal obligation to check identification when a person is collecting a child. To maintain compliance, parents will notify verbally (if necessary) and then in writing if they authorise a person who is not on their emergency contact form to pick up their child.

ONLINE SAFETY (National Principle 8)

Our Service is committed to create and maintain a safe online environment with support and collaboration with children, educators, staff, families and community. Management, staff and educators ensures anti-virus and internet security systems are installed to block access to unsuitable web sites, and chat rooms.

Our Service ensures backups of important and confidential data is made regularly and either stored securely offline, or online. Software and devices are updated regularly to avoid any breach of confidential information.

Written authorisation from parents is requested as part of the enrolment process for children to have their photo taken and published as part of promotional marketing or to be published on software programs used for programming. Only educational software programs and apps are used in the service and children are always supervised when using technology.

Phone usage is limited, and any photos or videos of children taken for purposes other than educational will be in consultation with management (where practical) and the families based on children's health and wellbeing.

STORAGE OF HAZARDOUS SUBSTANCES

We reduce the risk of harm to children and educators by using eco-friendly products, where practical. Our Service will endeavour to provide a safe environment where necessary chemical

and hazardous equipment are safely stored away from children and handled appropriately.

Management, staff and educators will keep a register of hazardous chemicals used at the Service, including relevant Safety Data Sheets (SDS).

EQUIPMENT, FURNITURE & MAINTENANCE RECORD

The premises and all equipment and furniture used within the Service are checked to ensure all aspects are safe, clean and in good repair. We understand that hazards are specific to developmental stages; educators are aware that toys and equipment need to be checked to ensure they are safe and developmentally appropriate for children. Regular checks occur within the Service to ensure that all toys, furniture and equipment are in good condition and working order.

SOURCES

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

ACECQA. (2023). Policy and procedure guidelines. *Providing a Child Safe Environment*.

ACECQA. (2023). Embedding the National Child Safe Principles.

Australia Children's Education & Care Quality Authority. (2023). *Guide to the National Quality Framework.*

Australian Government. Department of Skills. (2022). Belonging, Being and Becoming: The Early Years Learning Framework for Australia.V2.0, 2022

Australian Human Rights Commission (2020). *Child Safe Organisations.* https://childsafe.humanrights.gov.au/

Child Protection (Working with Children) Act 2012
Children's Health and Safety – An analysis of Quality Area 2 of the National Quality Standard

Department of Education NSW Providing a child safe environment

Education and Care Services National Law Act 2010. (Amended 2023).

Education and Care Services National Regulations. (Amended 2023).

Revised National Quality Standard. (2018).

United Nations Convention of Rights of the Child, (1989). (UNCRC)

Western Australian Education and Care Services National Regulations

Work Health and Safety Act, (2011).

WA Commissioner for Children and Young People (CCYP)

REVIEW

POLICY REVIEWED	MAY 2024 JULY 2025	NEXT REVIEW DATE	2026

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 2012 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 2012
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– 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

Childcare Service Handbook 2023
https://www.education.gov.au/child-care-package/child-care-provider-handbook

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_ethics.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 https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Policy creation date:	June 2012
Policy review date:	Oct 2018
Policy Updated:	April 2023 July 2025

Policy Area 4 – Staffing

4.1 Educator Handbook

See attached Handbook.

National Quality Framework

Education and Care Services National Regulations 2012- 171
National Quality Standard for Early Childhood Education and Care - 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/Manager, 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.

Policy Review: August 2022

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 - 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/managers 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 – 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/manager 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 (NRMC).
- 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/manager 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/manager 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	**Non-vaccine Preventable Diseases**
Hepatitis A, B	Cytomegalovirus (CMV)
Measles	Human Immunodeficiency Virus (HIV)
Mumps	Parvovirus B19
Rubella	Hepatitis C
Pertussis (Whooping cough)	
Varicella (Chicken Pox)	

- 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 of 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/manager, 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.

<u>The selection process</u>

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 Manager 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

Cross, C & Morton, S – Human Resources Management Checklist – sourced June 2012 from http://www.pscwa.org.au/getdoc/d4f3ca91-a179-4de0-bbf1-42e01bf9d608/HumanResourceManagementChecklist.aspx

DEEWR Child Care Service Handbook 2011-12 – Section 6.7: What are my service's responsibilities to educators? – sourced June 2012 from www.deewr.gov.au

Denny, C. Morton, S & Thompson, R – Staff Recruitment and Evaluation for Child Care Centres (2007) – sourced June 2012 from www.pscwa.org.au

Early Childhood Australia (ECA)(2006) *The Code of Ethics* – sourced June 2012 – from http://www.earlychildhoodaustralia.org.au/code_of_ethics/early_childhood_australias_code_of_ethics.html

Fair Work Australia – portal to access information about the Fair Work Act 2009 – sourced June 2012 from http://www.fwa.gov.au/

Policy creation date: June 2012
Policy reviewed: Oct 2018, 2024

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/managers 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.; 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 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

- All educators/staff and management will be provided with a copy of the handbook.
- The approved provider/nominated supervisor/manager 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/manager 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/manager 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/manager is not on hand to monitor safety and health at the service on a daily basis.
- If there is an elected or appointed OSH representative they 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/manager.
- If an OSH representative is elected, the approved provide/nominated supervisor/manager understands their responsibility to consult and co-operate with them, other employees, in regards to OSH issues, and will actively support and encourage educator/staff involvement in these areas.

Professional development

Training will be offered to ensure the approved provider/nominated supervisor/manager 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 nominated supervisor/manager 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/manager 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/manager 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 with staff as they arise.
- The approved provider/nominated supervisor/manager will review OSH policy with the educators/staff team as required, or after a major incident has occurred, to ensure that the system in place is working. The review will identify 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/manager 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, 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/manager 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/manager 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/manager 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/manager 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

Child Care Service Handbook 2011-12
https://www.education.gov.au/child-care-package/child-care-provider-handbook

National Health and Medical Research Council – *Staying Healthy in Childcare* – *5*th Edition
https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services

Rowell, P – *As safe as houses: Occupational Health and Safety in childcare* – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 37, March 2011.

Policy creation date: June 2012
Policy reviewed date: Oct 2018, 2021

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 – 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/manager 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 fact 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 requires 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 ad 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

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

Child Care Service Handbook - https://www.education.gov.au/child-care-package/child-care-provider-handbook

Fair Work Australia - portal to access information about the Fair Work Act 2009 - sourced June 2012 from http://www.fwa.gov.au/

National Health and Medical Research Council - *Staying Healthy in Childcare* - 5th Edition https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services

Policy Creation Date: June 2012
Policy Reviewed: Oct 2018, 2022

QA 2 - TOBACCO, VAPING, DRUG AND ALCOHOL-FREE POLICY

Willi Wag Tails Childcare Services is committed to creating and maintaining environments that promote the safety of all children, educators and visitors at any of our services. We believe in maintaining a healthy, safe and productive environment that reduces risks and hazards associated with the use of drugs, vaping and alcohol for educators, children and visitors.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
82	Tobacco, drug and alcohol-free environment
83	Staff members and family day care educators not to be affected by alcohol or drugs
84	Awareness of child protection law
155	Interactions with children
168	Education and care services must have policies and procedures
170	Policies and procedures are to be followed
190	Infringement offences

PURPOSE

We aim to provide tobacco, e-cigarettes, drug and alcohol-free environments at all times

children are educated and cared for in accordance with Education and Care National Law and Regulations and workplace health and safety legislation. The use of alcohol and/or other drugs may impact on the ability for educators to work safely and ensure the safety of children in their care.

Working in line with the *Code of Conduct Policy* and *Work Health and Safety Policy* our Service aims to provide a policy regarding a tobacco, e-cigarette, drug and alcohol-free environment with clear guidelines to ensure environments are safe for all children, educators, staff and visitors. This policy sets out expectations for all employees, engaged educators, volunteers, individuals residing at the FDC premises and visitors regarding what is and what is not acceptable behaviour and practice in relation to alcohol and drug use.

SCOPE

This policy applies to the educators, children, families, approved provider, nominated supervisor, coordinator, students, volunteers, individuals residing at the FDC residence and visitors of the Services.

IMPLEMENTATION

The Education and Care Services National regulations state the approved provider must ensure the environment is free from the use of tobacco, e-cigarettes, illicit drugs and alcohol and ensure that educators, employees, residents, visitors and volunteers at the service are not affected by alcohol or drugs (including prescription medication) so as to impair the person's capacity to supervise or provide education and care to children. All above mentioned will abide by this policy at all times.

USE OF TOBACCO, DRUGS AND ALCOHOL

- Our Services are bound by the Education and Care Services National Regulations and as such whilst providing education and care to children, educators, coordinators, residents, visitors and volunteers must not:
    - consume illegal drugs or alcohol before or during work
    - work under the influence of illegal drugs, impairing medication or alcohol
    - use or possess illegal drugs at any workplace
    - drive a vehicle while under the influence of alcohol or illegal substances when transporting children or attending service business

- Smoking or vaping is NOT permitted in or on the premises or the surrounding areas of the childcare services when care is taking place.
- Educators must ensure that children being educated and cared for remain in an environment that is free from tobacco, drugs and alcohol. This includes when transportation for regular outings or excursions is provided for children.
- The odour of tobacco or vaping products must not be detectable on staff/educators, students or visitors, while working
- Consideration should be given to ventilation and hygiene within the service to ensure tobacco smoke is not detected.
- The safe storage of any items related to smoking or vaping must be strictly adhered
- Smoking or vaping is NOT permitted while educators and staff are supervising or participating in excursions.

Educators, coordinators or volunteers undergoing prescribed medical treatment with a controlled substance that may affect the safe performance of their duties are required to report this to the nominated supervisor. A medical certificate may be required prior to their approval to provide education and care.

Educators must provide adequate supervision of children at all times and ensure the health, safety and welfare of children and young people in their care. This includes taking all reasonable action to protect children and young people from risk of harm that can be reasonably predicted.

EXPECTATIONS OF EMPLOYEES AND ENGAGED FDC EDUCATORS

EMPLOYEES AND EDUCATORS WILL:

- act honestly and with due care in all duties
- report suspected breaches of this policy to management
- ensure they are fit for duty at all times
- not sell, possess or distribute illegal drugs in any service-related context.

REASONABLE BELIEF OR SUSPICION

If a coordinator/nominated supervisor suspects an educator or staff member is under the influence, they must inform the approved provider immediately

Management will observe and document any reasonable suspicions that an educator is under the influence of drugs or alcohol, this may include:

- observe any smell of alcohol, eye dilation or red/bloodshot eyes, slurred speech, unable to act in a professional manner, emotions where the employee is argumentative, agitated, irritable or drowsy, movements where the employee is unsteady or fidgety or other behaviours.

If the coordinator/nominated supervisor has reasonable grounds to believe that an educator is under the influence of illegal drugs or alcohol, alternative emergency arrangements will be made for the education and care of children in their residence/venue. Discipline action may follow, which may include termination of employment/engagement due to a breach of Service policy. A breach in the *Tobacco, Drug and Alcohol-Free Policy* may result in termination of employment/engagement, even for a first offence.

BREACH OF THE TOBACCO, DRUG AND ALCOHOL-FREE POLICY

All staff members, educators and coordinators are made fully aware that any breaches of the *Tobacco, Drug and Alcohol-Free Policy* and role responsibilities may lead to termination of employment or engagement including:

- providing education and care for children under the influence of alcohol or drugs
- possessing or selling drugs at the FDC residence or venue
- failure to follow policies and procedures.
- Smoking / vaping at the FDC residence or venue.

SOURCES

Australian Children's Education & Care Quality Authority. (2025). Guide to the National Quality Framework
Australian Government. Business. Work Health and Safety
Australian Government. Department of Health. What are drugs?
Australian Government. Safe Work Australia. Drugs and alcohol
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (2011). (Amended 2023).
Ombudsman Act 2001 (Cth).
Privacy and Personal Information Protection Act 1998 (Cth).
Smoke-free Environment Act 2000.
Work Health and Safety Act 2011 (Cth).
Workplace Relations Act 1996 (Cth).
Work Place Law. Drug and alcohol testing in the workplace.
Western Australian Legislation Education and Care Services National Regulations (WA) Act 2012

REVIEW

POLICY REVIEWED	AUGUST 2025	NEXT REVIEW DATE	2027

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/managers 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 Subsidy.

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 advice 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/manager 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/manager/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 manager); 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 manager/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 manager/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/manager 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/manager 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 may 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/manager and approved provider that the child has been collected.

<u>Ongoing Strategies</u>

- 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 educators 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/manager/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

DEEWR Child Care Service Handbook 2011-2012

Section 4.6 – Recording attendance
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
Section 13 – Absences from child care
Retrieved June 2012 from www.deewr.gov.au

Shaw, M – Developing and implementing your service's child protection policy – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 36, December 2010

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 reviewed: March 2022, 2024

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/manager 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 give 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 bitting 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 an 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.

<u>Managing extreme or persistent behavioural challenges</u>

- 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/manager 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/manager 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/manager 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/manager will jointly with the family seek advice from an appropriate agency or professional.

<u>Excluding a child due to inappropriate behaviours</u>

- 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/manager 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

Sources

Childcare Service Handbook 2023
Section 6.5 – What are my services responsibilities to parents?
Section 6.6 – What are my responsibilities to children?
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_ethics.html

Kennedy, A – Managing bullying in childcare behaviour – extract from *Putting Children First,* the newsletter of the National Childcare Accreditation Council – Issue 30, June 2009

Linke, P – Dealing with bullying together: Prevention and resolution – Early Childhood Australia – Research in Practices Series – Vol 16, No 1 2009

Rowell, P – Guiding children's behaviour – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 25, March 2008

Shaw, M – Managing challenging behaviours with children who have additional needs – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 34, June 2010

Stonehouse, A – A sensitive issue: Biting in childcare – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council – Issue 33, March 2010

UNICEF (n.d). *Fact Sheet: A summary of the rights under the Convention on the Rights of the Child* –

Policy creation date: June 2012
Policy reviewed: Oct 2023

5.3 Community Involvement Policy

Rationale and Policy Considerations

The education and care service has an important role to play in encouraging children and their families to feel part of their community and in supporting them to make a contribution to it. Valuable resources can be accessed from within the community to support children's learning and wellbeing. 'The service has an active presence in the local community, seeks to strengthen community links and uses community resources to meet the needs of local families and their children.' (Standard 6.3 --- The service collaborates with other organisations and service providers to enhance children's learning and wellbeing).

Legislation and Government Requirements

- Federal and State Equal Opportunity Legislation (Check your State or Territory legislation)
- Education and Care Services National Law Act 2010 (Vic) (or corresponding legislation)
- United Nations Convention on the Rights of the Child

Children's Needs

- To feel connected with their local community; to have access to resources from within the community that supports their

Families' Needs

- To be consulted about their own social and cultural backgrounds and feel confident that their culture will be reflected in the service
- to have opportunities to establish links with and make a contribution to their community
- to have access to people and resources from within the community that supports their child's learning and wellbeing.

Educator/Staff Needs

- Open communication with parents; information about the people and resources available within the community
- involvement in projects and events that support children's learning and establish connections with the community.

Management Needs

- Good communication between families and management; family support for the service; relevant up to date information on community values and needs
- The service is known and given a positive image within the community; complaints about the service are heard and acted upon.

National Quality Framework

Education and Care Services National Regulations 76; 157; 171-173
National Quality Standard for Early Childhood Education and Care (2018) – Elements 1.1.1, 3.2.1, 3.2.3, 6.2.3, 7.1.1, 7.1.2

Early Years Learning Framework for Australia – Practice: Holistic Approaches, Responsiveness to children, Cultural competence, Continuity of Learning, Transitions – Outcomes 1, 2, 3

Policy Statement

We recognise the significant impact a community has on a child's view of the world around them and strive to achieve cooperative participation and involvement. The service embeds community excursions and local school visits into our weekly program.

Strategies for Policy Implementation

Information about the service

- The service newsletter will be given to groups and individuals identified by the approved provider/nominated supervisor/educators as having an interest in the operations of the service.
- Regular advertising campaigns will take place within the local community to ensure information about the service is widely distributed. Distribution points will include: – Preschools – Health clinics – Shire offices – Libraries – Companies / employers who may be moving families to the area
- The service brochure will provide general information about the service to prospective customers.
- The approved provider/nominated supervisor/educators will develop and maintain links with community newspaper staff to encourage publicity of the service.
- The community newspaper will be sent a short editorial about the service and invited to attend to take photos whenever a special event is held at the service.
- A community open day will be held at the service once a year to promote the service and involve the community in special projects initiated by the service.

Connecting with the community

- The service holds current information on relevant community resources and makes these available to families.
- Once a year the approved provider/nominated supervisor will arrange a forward planning day for the educators, staff and interested families to identify new strategies to improve the service's connections and image in the community.
- The service will invite community members to visit the education and care service to share their social and cultural heritage with the children, families and educators/staff of the service.
- Educators will reflect those cultural values and diversity of the broader community, including Aboriginal and Torres Strait Islander communities, when planning the children's learning and leisure environment.
- Connections with the local community are built through a number of strategies including: – Partnerships with families – Involvement in community meetings – Liaison with other children's services, local businesses, school, health services and organisations working with families and children in the local area – Participation in community events – Local community members are invited to participate in social events held at the service

Students, volunteers and other visitors' access to the service

- Ensuring children's safety and wellbeing will always be the prime factor in any decision to invite visitors to the service.

- Visitors may be invited into the service as part of the children's learning and leisure program i.e.
  – Members of the Fire Brigade, Police Department, medical or nursing profession may be invited to share aspects of their work that are of interest to children,
  – Community people with a skill, art or experience from which the children will gain experience or enjoyment.
- All other visitors to the service must make an appointment with the nominated supervisor/manager or educator.
- Professional access to the service will be at the discretion of the nominated supervisor and (if involving the children) with the parent's written consent. The only exception to this would be in the case of children at risk.
- The types of professionals or officials that may require access include:
  – Authorised child protection officers
  – Police Officers (with warrant).
  – Health & Safety Inspectors- have the right of entry under occupational safety and health legislation
  – Authorised officers of the relevant state/territory regulatory authorities have the right of entry under the Education and Care Services National Regulations
  – Australian Government officers B have the right of entry to inspect service records for accountability requirements under the Child Care Act 1972 (Cth).
  – Child Health Nurse.

Procedures

Services may find the following list of example procedures, useful tools in the implementation of this policy. List your services precise steps for achieving each action. Ask yourself when, how, where and who is responsible for what actions.

- Confidentiality Statement
- Educator/staff Code of Ethics
- Grievance procedures
- Orientation checklists
- Procedure for dealing with privacy complaints

Links to other policies

- Excursions and Transport Policy
- Volunteers and Students on Practicum Placement Policy

Sources

DEEWR Child Care Service Handbook 2023 - https://www.education.gov.au/child-care-package/child-care-provider-handbook

Early Childhood Australia ECA. 2005 The Code of Ethics - https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/#:~:text=Designed%20especially%20for%20early%20childhood%20education%20and%20care,of%20children%20and%20families%20in%20early%20childhood%20settings.

UNICEF Convention on the Rights of the Child - https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

5.4 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/manager 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

<u>Nurturing positive interactions with children</u>

- 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/manager, 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 of 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 re 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.

<u>Involving Children in Decision Making</u>

- 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

Sources

DEEWR Childcare Service Handbook 2023 - https://www.education.gov.au/child-care-package/child-care-provider-handbook

Early Childhood Australia (ECA) (2005) – *The Code of Ethics* – https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/

Kennedy, A – Talk to me! Communicating with babies – extract from *Putting Children First*, the newsletter of the National Childcare Accreditation Council, Issue 34, June 2010

UNICEF (n.d). *Fact Sheet: A summary of the rights under the Convention on the Rights of the Child* – https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Stonehouse, A – Supporting children's development – social skills and relationships – extract from *Putting Children First,* the newsletter of the National Childcare Accreditation Council – Issue 25, March 2008.

Tansey, S – Fostering children's relationships - extract from *Putting Children First,* the newsletter of the National Childcare Accreditation Council – Issue 29, March 2009.

5.5 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 considers 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
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.

<u>Enrolments</u>

- 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 gain access to the 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 parent 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 parent 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 details 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/manager, 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. When a place becomes available the family will be contacted by the nominated supervisor/manager 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.

<u>Referrals</u>

- 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.

<u>Orientation</u>

- The service will provide options for orientation to the education and care service for families which may include:
    - 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 gains 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.
- 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
Sourced June 2012 from www.deewr.gov.au

Privacy Law – sourced June 2012 from http://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* – https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Early Childhood Australia (ECA) (2005) – *The Code of Ethics* – https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/

Policy Creation Date:	June 2012
Policy Reviewed:	March 2022
Policy updated:	August 2023

6.1 Bookings and Cancellations

Rationale and Policy Considerations

Willi Wag Tails Childcare Service recognises the importance of communication between the centre and enrolled families in all aspects, including the process of enrolment, bookings, and cancellations of care. The service has a duty of care to families to ensure that appropriate educator-child ratios are being met, whilst also ensuring the financial feasibility of the service. It is therefore imperative that families are made aware of their responsibilities in regard to the care of their child.

Privacy Act 1988
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2012

Children's Needs

The right to routine and appropriate care and feeling safe, secure and respected.

Families' Needs

Secure understanding of the allocation of fees and cancellation policy

Educator/Staff Needs

Clear guidelines on the allocation of fees, notice periods, casual/permanent terminology.

Management Needs

To ensure the equitable fee breakdown for all families, and to ensure the financial feasibility of the service.

National Quality Framework

Education and Care Services National Regulations 2012 – 118, 122, 123, 126, 130, 158, 168
National Quality Standard for Early Childhood Education and Care and School Age Care (2018) – 6.1.1; 6.1.3; 7.1.2; 7.1.3
Early Years Learning Framework for Australia- Principles: Secure, respectful, and reciprocal relationships, 3 high expectations and equity.

Strategies for Policy Implementation

<u>Information for families</u>

- Families will be made aware, during the enrolment process, of the different types of sessions on offer (permanent or casual, full day, half day, before school, after school) and the relevant

fees for each session including the compulsory payment of the gap fee component of their fees.

- Families will also be made aware of their responsibilities in regard to notice periods.
    - 2 weeks' notice of non-attendance; there will be no charge.
    - Less than 2 weeks' notice of non-attendance; there is a 50% charge of fees.
    - No notice prior to next booked session of care; full fees will be charged.

- If notice period is observed, families will be charged accordingly (CCS applicable)
- If notice period is not observed, as in the case of illness, families will be charged 100% of fees. Families are eligible for 42 allowable absences per year (CCS applicable)
- Families may be eligible for additional allowable absences with support of medical certificates.

Difficulty paying

- Families experiencing financial hardship can apply through Centrelink for financial support which can assist with up to 100% of fees.
- Families experiencing financial hardship should contact staff at Willi Wag Tails as soon as possible to discuss their options.

Cancellation of care

- Families need to provide staff with 2 weeks' written notice if they wish to cancel care entirely.
- Enrolment cannot end on an absence. If a child is absent on their final day, another attendance should be made, or CCS will not be applied to their booking. In the event another booking isn't made and the child finishes care on an absent, parents will be charged full fees and not eligible for CCS.

Links to other policies

- Enrolment and Orientation
- Management and Governance
- Partnerships and Communications with Families
- Payment of Fees
- Records Management

Sources

Policy creation date:	April 2020
Policy review date:	April 2022
Policy updated:	August 2023, 2026

6.2 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
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 aces 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/manager, who will arrange an appropriate time for this to occur. The approved provider/nominated supervisor/manager will protect the security of the information by checking the identity of the applicant, and ensuring someone is with they while they access the information to ensure the information is not changed or removed without the approved provider/nominated supervisor/manager's knowledge.
- The approved provider/nominated supervisor/manager 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/manager 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/manager and individual staff member concerned.
- Every employee/educator and the approved provider/nominated supervisor/manager 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/manager 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/manager, 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, manager, 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 2023 - https://www.education.gov.au/child-care-package/child-care-provider-handbook

Early Childhood Australia (ECA)(2005) – *The Code of Ethics* – https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/

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

UNICEF (n.d) *Fact Sheet: A Summary of the rights under the Convention on the Rights of the Child* – https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Policy creation date: June 2012
Policy reviewed: Oct 2018, 2024

6.3 Payment of Fees

Rationale and Policy Considerations

The setting and payment of fees considers 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 childcare fees payments** (Child Care Services Handbook)
- **Privacy Act**
- **Education and Care Services National Law Act**
- **A New Tax System (Family Assistance) (Administration) Act 2000**

Children's Needs

For continuity of care and family support where payment of childcare 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 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)- 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 to provide a quality education and care service.

Strategies for Policy Implementation

Fees and payment account

- The approved provider will determine the required fees 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 fee schedule will be applied depending on the type of booking made and will be charged within these categories to all families for equivalent care arrangements.

Booking type

- Full day
- Half day
- Before and After School (FDC or Centre)
- Late fee

- Families are required to pay fees in advance. A dated receipt, in accordance with Australian Government Guidelines, will be provided for each payment.
- Families are required to pay the **FULL** Balance of their account within 14 days of issue.
- 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 childcare 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 if the notice period were not adhered to.

CCS and CCSS

- 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 Subsidy System (CCSS) 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 CCSS.
- 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 childcare attendance records are accurately completed and signed by the parent/guardian or other responsible adult, and the eligibility requirements are met.
- Families are liable to pay the gap fee component within the current invoicing period after the CCS has been applied. Failure to do this may result in the immediate cancellation of care. This payment is compulsory to be able to receive the Government approved CCS.
- 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 CCSS.
- The nominated supervisor/manager/administration officer will be trained in the implementation of CCSS reporting CCS fee payment procedures.

Overdue Fees

- Parents/guardians with overdue fees will be encouraged by the account's administrator/nominated supervisor/manager 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 your child's position of care may be cancelled if the account is not settled. 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/manager.
    - **Three weeks overdue** - if no arrangements to pay have been made or kept, the place may be cancelled.

Notice Periods

- 2 weeks' notice - there will be no fee charged for your booking.
- Less than 2 weeks' notice - half fees will be applied.
- No notice prior to the next booked session of care - full fees will be charged.

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/manager will discuss other childcare options with the family (see Delivery and Collection of Children Policy).

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 childcare 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 childcare
Section 14 - Special CCS
Section 15 - Child Care Subsidy (CCS)
sourced June 2012 from www.deewr.gov.au

Austalian 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/

Policy creation date: June 2012
Policy reviewed: March 2022
Policy updated: April 2023, August 2023, 2026

6.4 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
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 the nominated supervisor, manager, or the Shire CEO
- 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.

  ECRU Department of Communities
  Locked bag 5000
  Fremantle WA 6959

  Level 7, Boorloo Campus
  130 Sterling Street Perth
  Email: ecru@communitieis.wa.gov.au
  Phone: 1800 199 383 or 08 6277 3889

- 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/manager, or CEO 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.

<u>Steps to managing complaints.</u>

- 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.

<u>Procedures for dealing with complaints.</u>

- 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

DEEWR Child Care Service Handbook 2011-2012
https://www.education.gov.au/child-care-package/child-care-provider-handbook

Early Childhood Australia (ECA) (2005) – *The Code of Ethics* –
https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/

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* –
https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Policy creation date:	June 2012
Policy review date:	Oct 2018
Policy updated:	August 2023

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
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.

<u>Retaining records</u>

- 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 is 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

DEEWR Child Care Service Handbook 2011-2012
Section 4.9 – Information management
Section 5.5 – Key obligations imposed on approved childcare services under family assistance law.
Section 5.6 – Coo-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* –
https://www.earlychildhoodaustralia.org.au/our-publications/eca-code-ethics/

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

Privacy Law –sourced June 2012 from http://www.oaic.gov.au/

UNICEF(n.d). *Convention on the Rights of the Child –*
https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child

Policy creation date:	June 2012
Policy revision date:	Oct 2018
Policy updated:	August 2023

Social Media POLICY

We recognise both the benefits, and challenges, of using Facebook and other social media platforms in the early childhood setting. This policy has been developed to provide employees, families, volunteers and students with standards of use as they engage in conversations or interactions using social media for official, professional and personal use.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
181	Confidentiality and storage of records
183	Storage of records and other documents

PURPOSE

Being part of our Service entails a position of trust and responsibility. We aim to ensure that our Service,
children, educators, and/or families are not compromised in any form on Facebook, or any other social media platform and that all social media usage complies with our Service's philosophy, relevant policies, and the code of conduct.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

Social media is defined as "*forms of electronic communication (such as websites for social networking and microblogging) through which users create online communities to share information, ideas, personal messages, and other content (such as videos)"* (Merriam-Webster dictionary).

We recognise that there are many advantages in using social media to network within Service operations. It is important to approach usage with caution, through careful and systematic management. Whilst healthy debate may provide thought-provoking discussion, there are guidelines in place to ensure that our Service remains open and welcoming for children, families, and staff.

The National Principles for Child Safe Organisations recognise the importance of safe physical and online environments to promote safety and wellbeing of all children. Our Service has the responsibility to ensure children and educators are protected from harm when they engage with digital technology including social media.

This policy applies to all forms of social media including (but not limited to):

- Social networking sites e.g., Facebook, Twitter, LinkedIn
- Image sharing sites e.g., Instagram, Snapchat
- Music/dance videos e.g., Tik Tok
- Video hosting sites e.g., YouTube and Vimeo
- Community blogs e.g., Tumblr and Medium
- Discussion sites e.g., Reddit and Quora

NATIONAL MODEL CODE AND GUIDELINES

Our Service is guided by the current recommended practices released by ACECQA regarding the National Model Code for Early Childhood Education and Care and associated Guidelines. Educators, staff, students and visitors are encouraged to follow these practices at all times children are educated and cared for at our Service:

- personal electronic devices must not be used to take images, record audio or capture videos of children being educated and cared for at the Service
- personal electronic devices, including phones must not be in the possession of any person while working directly with children within the children's environment

- only electronic devices issued by the Service are used to record and store images and videos of children
- Service electronic devices are not to be taken out of the Service/ away from Service premises
- procedures are followed regarding safe storage and restricted access of images and videos of children

SERVICE FACEBOOK ACCOUNT

Our Service has a Facebook account to converse and share information with our families and community,
which is administered by our staff.
Only current enrolled families and staff will have access to the Service Facebook page. The page is locked as "Privacy type: Closed: Limited public content. Members can see all content." The administrators will be responsible for accepting requests to join from new families.

The intent for our Service Facebook page is to:

- keep families in touch with what's happening at the Service, including upcoming and special events.
- connect with other parents and share thoughts about programs, policies, and procedures
- provide an avenue to ask parents their thoughts and provide appropriate research-based information on common child rearing issues.
- provide educational information to families and employees.

NOTE: The Service Facebook account must not be used for personal comments or discussions.

PRIVACY

- All staff and educators must remain aware that they represent and could be identified as an employee of the Service through any online activity
- Staff and educators must maintain appropriate privacy of families, employees, students, children and
  volunteers, including when they have obtained permission to publish content to the Service Facebook account
- Absolutely no written content will be published to Facebook without the implicit and written permission of families to whom the content relates

- Our Service will gain implicit and written family permission prior to posting photos of children.
- Passwords will not be shared without authorisation from management
- Our Service will remain up to date with any changes to Facebook ensuring privacy setting remain up to date.

REGARDING THE SERVICE FACEBOOK PAGE, THE APPROVED PROVIDER OR NOMINATED SUPERVISOR WILL:

- ensure personal information about families, children and staff is not posted on-line
- ensure the highest level of privacy settings are established and maintained on the account
- ensure all passwords are kept confidential
- log out of Facebook when not in use and prior to leaving the Service
- regularly scan online content related to the Service to ensure appropriateness.
- ensure that any staff or educator found guilty of any Facebook misconduct (on both the Service Facebook page and any Facebook page) is aware that this may result in disciplinary procedures or termination of employment.

REGARDING ALL SOCIAL MEDIA, THE APPROVED PROVIDER, NOMINATED SUPERVISOR, EDUCATORS, STAFF MEMBERS, VOLUNTEERS AND STUDENTS WILL NOT:

- access personal Facebook accounts or any other social media accounts on any workplace device
- access personal Facebook or any other social media accounts whilst educating and caring for children
- post any photos taken of the children enrolled at the Service on their personal Facebook or any other social media account
- post any information about the Service, colleagues, children, or families on any personal social media
  account
- vilify, harass or bully any other person who works at the Service, family or community member connected to the Service
- post offensive or derogatory comments or information that could bring their professional standing or that of the Service into disrepute
- use their personal camera or phones to take photos or video whilst at the Service.

PERSONAL SOCIAL MEDIA ACCOUNTS

Staff members are to use their own personal discretion when adding a family of the Service as a 'friend' on Facebook or any other social media. The Service does not recommend that staff add families of the Service to personal social media accounts as they will still be seen as a representative of the Service and required to uphold the Service's Code of Conduct on all posts. It is extremely important not to post information about the Service, colleagues, children, or families on personal social media accounts, as this not only contravenes the Service policies and *Code of Conduct* but is considered a breach of the Commonwealth's *Privacy Act 1988* and *Privacy and Personal Information Protection Act 1998*.
Families are asked to respect that staff may have a personal policy on adding families to personal social media accounts due to their professional philosophy, and that the Service does not recommend staff to have families as friends on their private account.

If adding families to personal social media accounts, educators will adhere to relevant policies, including the Code of Conduct of the Service.

CONSEQUENCES FOR INAPPROPRIATE CONDUCT

For inappropriate conduct to be considered unlawful, it is necessary to demonstrate a connection between the behaviour and the employment relationship that:

- is likely to cause serious damage to the relationship between the employee and Service
- damages or harms the Service's interest or reputation
- is incompatible with the employee's duties in the education and care sector.

A person who has been involved in inappropriate conduct may require reprimand as per our *Code of Conduct Policy*. This may lead to disciplinary procedures or termination of their position.

RESOURCES

Australian Children's Education & Care Quality Authority. (2024). National Mode Code for Early Childhood Education and Care
Australian Government Office of the eSafety commission www.esafety.gov.au/early-years
eSafety Early Years Online safety for under 5s.
https://www.esafety.gov.au/sites/default/files/2020-02/Early-years-booklet.pdf
eSafety Early Years Checklist https://www.esafety.gov.au/educators/esafety-early-years-program-for-educators/checklist

REVIEW

POLICY CREATED	April 2024	NEXT REVIEW DATE	April 2026

MOBILE and Personal Device usage Policy

Our Services are committed to creating a secure, respectful and developmentally supportive environment for all children. As part of our commitment to maintaining high standards of safety, privacy and supervision, the use of personal electronic devices by staff, educators, students and visitors is strictly controlled.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
155	Interactions with children
Sec 167	Offence relating to protection of children from harm and hazard

PURPOSE

To ensure compliance with the National Quality Standard, National Regulations and National Principles for Child Safe Organisations we aim to provide an environment that is safe for all children at all times. The outcomes of the '*My Time, Our Place*' and '*Belonging, Being and Becoming*' Framework are reflected in our policy to ensure the childcare environment is supporting children's emotional wellbeing, physical safety and cyber safety.

SCOPE

This policy applies to children, families, the approved provider, nominated supervisor, coordinator, staff, educators, students, volunteers and visitors of the Service.

IMPLEMENTATION

To ensure the wellbeing of children and the integrity of our learning environment, the following practices must be adhered to;

- Personal mobile phones and devices must not be brought into the play areas
- Personal phones and devices must be stored in designated staff only areas.
- Service issued devices can only be used for educational and administrative purposes.
- School aged children must turn off their phone and leave it in their bag.
- Any staff member observing or suspecting a breach must report it to the Manager immediately.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/EDUCATORS WILL ENSURE:

- children, families, staff. Students and visitors attending the Service must adhere to the policy
- school aged children do not use their mobile device whilst attending the service including attending excursions and/or incursions
- the Service takes no responsibility for mobile devices that are brought to the Service (this includes if mobile device is lost or is damaged).
- consultation will be made with management and parents of a child who requires access to a mobile phone due to their disability or medical condition.

CONSEQUENCES

Breaches of this policy will be addressed in accordance with our Code of Conduct and disciplinary procedures which may include a verbal or written warning, review of employment or notification to relevant authorities.

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
August 2025		August 2026

ACCEPTANCE AND REFUSAL AUTHORISATION POLICY

Under the Education and Care Services National Law and National Regulations, early childhood services are required to obtain written authorisation from parents or guardians for some circumstances, to ensure that the health, safety, wellbeing, and best interests of the child are met and upheld. An authorisation is given where a person who has legal responsibility for a child gives permission to another person to do something or to make a decision on that person's behalf.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
Sec. 165	Offence to inadequately supervise children
Sec. 167	Offence relating to protection of children from harm and hazards
Sec. 175	Offence relating to requirement to keep enrolment and other documents
Sec. 167	Offence relating to protection of children from harm and hazards
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement- anaphylaxis or asthma emergency
99	Children leaving the education and care service
102	Authorisation for excursions

102C	Conduct a risk assessment for transporting children by the education and care service
102D	Authorisation for service to transport children
157	Access for parents
160	Child enrolment records to be kept by approved provider
161	Authorisation to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures must be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures

PURPOSE

Our priority is ensuring the health, safety and wellbeing of children. We aim to ensure that all educators, staff, students and volunteers are consistent in how authorisations are managed and understand what does or does not constitute a correct authorisation, which consequently may lead to a refusal. Our governance and quality management processes are effective and transparent and meet all regulatory requirements. Decisions around refusing an authorisation will be made on a case-by-case basis by the service in accordance with the nominated supervisor, Police, regulatory authority or other authorities.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

Our Service will ensure we comply with the current *Education and Care Services National Regulations*,
and have policies and procedures in place in relation to the acceptance and refusal of authorisations
which require parent or guardian written authorisation to be provided in matters including:

- Administration of medication to children

- Administration of medical treatment, dental treatment, and general first aid treatment
- Emergency Ambulance transportation
- Transportation- including regular outings, regular transportation
- Safe arrival of children to the Service
- Excursions, including regular outings
- Incursion attendance
- Taking of photographs by people other than educators
- Water based activities
- Enrolment of children, including providing details of persons nominated to authorise consent for medical treatment, to collect children from the service, or to provide authority for the child to be taken outside the service
- Children leaving the premises in the care of someone other than a parent or guardian

THE APPROVED PROVIDER/ NOMINATED SUPERVISOR/ MANAGEMENT/ RESPONSIBLE PERSON WILL ENSURE:

- obligations under the *Education and Care Services National Law and National Regulations* are met
- the *Acceptance and Refusal Authorisation Policy* is reviewed and maintained by Service management
  and adhered to at all times by educators and staff
- policies and procedures are readily accessible to families, nominated supervisors, coordinators, educators, staff and students and available for inspection
- all educators and staff follow the policies and procedures of our Service
- parent/guardians are provided with a copy of relevant policies for our Service or are aware of how they can be accessed
- an enrolment record is kept for each child that includes all authorisations signed by a parent/guardian or a person authorised
    - to consent to seek medical treatment from a registered medical practitioner, hospital or ambulance service
    - transportation by an ambulance service
    - to authorise the education and care service to transport the child or arrange regular outings for the child
- documentation relating to authorisations contains:
    - the name of the child enrolled in the Service
    - date

    - signature of the child's parent/guardian and authorised nominee as named on the enrolment form
- all staff understand circumstances that may lead to refusal of an authorisation
- the right of refusal is exercised if written or verbal authorisations do not comply with National Regulations or Child Protection Legislation (see: Refusal of Authorisation below). If an authorisation is refused by the Service, it is best practice to document:
    - the details of the authorisation
    - why the authorisation was refused, and
    - actions taken by the service. For example: if the service refused an authorised nominee named in the child's enrolment record to collect the child from the service as they were under the influence of alcohol, the action taken to ensure that the child was collected (Refer to *Refusal of Authorisation Record*)
- all parents/guardians have completed the authorised person's section of their child's enrolment form including authorised nominees (refer to *Enrolment Policy*), and that the form is signed and dated before the child commences at the Service
- attendance records are maintained for all children attending the Service
- a written record of all visitors to the Service, including time of arrival and departure and reasons for visit is documented
- educators/staff do not administer medication without the written authorisation of parent/guardian or authorised nominee named in the enrolment record as authorised to consent to the medical treatment of the child, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Enrolment Form, Administration of Medication Policy, Incident, Injury, Accident and Trauma Policy, Emergency Evacuation Policy, Asthma Management Policy, Anaphylaxis Management Policy, Diabetes Management Policy*, *and Epilepsy Management Policy*)
- where a child requires medication to be administered by educators/staff, that an *Administration of Medication Record* is completed, and authorisation provided by the parent/guardian or authorised nominee and included within the child's record (Refer to *Administration of Medication Policy*)
- when a child requires emergency medical treatment for conditions such as anaphylaxis or asthma compliance for authorisation is waived. In accordance with National Regulations (R. 93) the Service can administer medication in these circumstances without authorisation. If these situations occur the approved provider/management will be required to contact the parent/guardian as soon as practicable after the medication has been administered and emergency services. Notification to the Regulatory Authority is required within 24 hours of a serious incident

- educators and staff only allow a child to participate in regular outings and regular transportation with the written authorisation of a parent/guardian or authorised nominee name in the child's enrolment record
- educators and staff allow a child to participate in excursions only with the written authorisation of a parent/guardian or authorised nominee named in the child's enrolment record is received and documented
- educators/staff allow a child to depart the Service only:
    - with a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
    - with a person authorised by a parent or authorised nominee; or
    - in accordance with the written authorisation of the parent; or authorised nominee; or
    - on an excursion; or
    - in the case of a medical emergency or another emergency
- there are procedures in place if an inappropriate person, or a person who does not appear to be fit to take care of the child attempts to collect the child from the Service or poses a risk to the safety of children or staff

EDUCATORS WILL:

- follow the policies and procedures of the Service
- ensure that written authorisation is provided by the parent/guardian or other person named in the child's enrolment record for a regular outing or regular transportation
- ensure that parents/guardians sign and date permission/authorisation forms for excursions prior to the excursion being implemented
- allow a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee
- check that parents/guardians or an authorised nominee sign the attendance record as their child arrives and departs from the Service
- administer medication only with the written authorisation of a parent/guardian or authorised nominee as per the *Administration of Medication Record*, except in the case of an emergency, including asthma or anaphylaxis emergency
- allow a child to depart from the Service with:
    - a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
    - in accordance with the written authorisation of the parent; or authorised nominee; or

    - on an excursion; or
    - in the case of a medical emergency or another emergency.
- follow procedures if an inappropriate person attempts to collect a child from the Service and poses a risk to the safety of the children and staff (for example, an intoxicated person) (Reg.99)
- inform the approved provider when a written authorisation does not meet the requirements outlined in Service's policies.

FAMILIES WILL:

- read and comply with the policies and procedures of the Service
- complete and sign the authorised nominee section of their child's enrolment form before their child commences at the Service
- ensure that changes to nominated authorised persons are provided to the Service in a timely manner
- advise nominated authorised persons that they will require photo identification (such as a driver's licence) in order to collect their child from the Service
- sign and date permission/authorisation forms for regular transportation and regular outings
- sign and date permission/authorisation forms for excursions
- sign the attendance record as their child arrives and departs from the Service
- provide written authorisation on the *Administration of Medication Form* when their child requires medication to be administered by educators/staff, including signing and dating it for inclusion in the child's medication records
- provide completed medical management plans and/or ASCIA Action Plans where relevant for their child
- be familiar with circumstances where authorisations may be refused/not applicable.

REFUSAL OF AUTHORISATIONS

All authorisations which are incomplete or incorrectly recorded are to be returned to the parent or guardian for required adjustments. Written or verbal authorisation may be refused if the authorisation does not comply with National Regulations or Child Protection Legislation. The approved provider or nominated supervisor will inform the parent or guardian the reason why the written or verbal authorisation does not meet National Regulations or policy procedures.

Management will discuss an alternative arrangement with the family following the refusal of authorisation.

Examples when an authorisation may be refused include:

- requests relating to dietary restrictions that are not related to medical reasons
- an authorised person collecting the child appears to be under the influence of drugs or alcohol
- the authorisation breaches a parenting order
- the authorisation breaches a service policy (person under the age of 16 collecting a child)
- medication to be provided to a child is not in original container or prescribed to the child or other breach of *Administration of Medication Policy*
- a breach of *Excursion/Incursion Policy* where the person providing consent for the excursion is not listed as a parent/guardian or authorised nominee on the enrolment form

AUTHORISATION REQUIREMENTS

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

Administration of Medication	• Name of the child • *Administration of Medication Record* is signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication • Name of the medication to be administered • Clearly indicate time and date medication was last administered • Clearly indicate time and date the medication is to be administered • Dosage of the medication to be administered • Parent/Carer name and signature • Date the authorisation is signed • Medication must be in its original container and bearing the correct child's name • Medication is not past its expiry or use-by date • Medication is administered in accordance with any instructions attached to the medication or provided by a registered medical practitioner. • A second person checks the signed *Administration of Medication Record*, checks the dosage of the medication, and witnesses its administration • The educator administering medication, and the witness must sign the medication record

Medical treatment of the child including transportation by an ambulance service (Included and authorised initially as part of the child's enrolment record)	• Name of the child • Authorisation to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service • Authorisation for the transportation of the child by an ambulance service • Name, address and telephone number of the child's registered medical practitioner or medical service • Child's Medicare number • Name of the parent or guardian providing authorisation

Emergency Medical Treatment (included and authorised initially as part of the child's enrolment record or as updates during enrolment)	• The Service is able to seek emergency medical assistance for a child as required (i.e., medical practitioner, ambulance or hospital) without seeking further authorisation from a parent or guardian in the case of an emergency, including for emergencies relating to medical conditions noted on the enrolment form.

Collection of Children (included and authorised initially as part of the child's enrolment record or as updated during enrolment)	• Name of the child • Name of the parent or the guardian of the child or the authorised nominee on the enrolment form providing authorisation • Name of the person/s authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises • Signature of the person providing authorisation and date of authorisation

Transportation (other than as part of an excursion)	If the transportation is 'regular transportation' the authorisation is only required to be obtained once in a 12-month period. The authorisation must state: • name of the child • the reason the child is to be transported • if the authorisation is for regular transportation, a description of when the child is to be transported and the date the child is to be transported • a description of the proposed pick-up location and destination • the means of transport • the period of time during which the child is to be transported • the anticipated number of children likely to be transported • the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation • any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported • that a risk assessment has been prepared and is available at the education and care service

	• that written policies and procedures for transporting children are available at the education and care service

Excursions	The authorisation must state: • name of the child • date of the excursion • reason for the excursion • proposed destination for the excursion • method of transport to be used • route to be taken to and from the excursion • period of time away from premise- include time leaving premise and time returning to premise • proposed activities to be undertaken by the child during the excursion • anticipated number of children likely to be attending the excursion • anticipated ratio of educators attending the excursion to the anticipated number of children attending the excursion • number of staff members and any other adults who will accompany and supervise the children on the excursion (including parents, students, volunteers) • statement that a risk assessment has been prepared and is available at the service • name of the parent or guardian-providing authorisation • signature of the person providing authorisation and date of authorisation • details of any water hazards and risks associated with water-based activities (to be included in risk assessment) • items that should be taken on the excursion

Regular outing	A regular outing means a walk, drive or trip to and from a destination that the service visits regularly as part of its educational program and where the circumstances relevant to the risk assessment are the same on each outing. Written authorisation only needs to be given once in a specified 12-month period for a regular outing. (Reg. 102(5)). If the conditions of the regular outing change, a new authorisation is required. The written authorisation must include: • name of the child • a description of when the child is to be taken on the regular outings • a description of the proposed destination • method of transportation (including walking) • any requirements for seatbelts or safety restraints • proposed activities to be undertaken • proposed time the child will be away from the premises • anticipated ratio of educators to the anticipated number of children • that a risk assessment has been prepared and is available at the Service

Sunscreen	• Name of child • Permission authorised for staff to apply SPF 30 or higher broad-spectrum, water-resistant sunscreen supplied by the service **or**

(Permission to apply sunscreen is included on enrolment form)	• Permission authorised for staff to apply SPF 30 or higher broad-spectrum water-resistant sunscreen supplied by parent/guardian (for children who may have allergies) • Parent signature and date Note: the use of sunscreen on babies under 6 months is not recommended due to their sensitive skin.

Confirmation of Authorisation	• All authorisation forms received (including the initial enrolment form) are to be checked for completion • All authorisations (excluding the initial enrolment form) are checked to ensure that the authoriser (name and signature) is the nominated parent or guardian a person named on the enrolment form as having authority to authorise • If incomplete or inappropriately signed, the authorisation form should be returned to the parent or guardian for correction • Children will be suspended from any activity requiring authorisation until the appropriate form has been correctly completed and signed

SOURCES

Australian Children's Education & Care Quality Authority. (2014).
ACECQA. (2021). Policy and procedure guidelines. *Acceptance and refusal of authorisations.*
Australian Children's Education & Care Quality Authority. (2023). *Guide to the National Quality Framework.*
Cancer Council. Preventing cancer: Sun protections: https://www.cancer.org.au/preventing-cancer/sun-protection/
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations. (2023).
Revised National Quality Standard. (2018).
Western Australian Education and Care Services National Regulations
Reference Childcare Centre Desktop

REVIEW

POLICY REVIEWED	OCTOBER 2024	NEXT REVIEW DATE	2026

PHOTOS

Our team at Willi Wag Tails is committed to creating and maintaining a child safe environment where children are safe and feel safe and their voices are heard about decisions that affect their lives. Child safety is embedded in our organisational leadership, governance, policies and procedures and culture.

Children have the right to be protected from the misuse of photographic and video images whilst being educated and cared for. To ensure the privacy of children and families is respected, our team of educators will only use photographs of children to support their learning and to record individual developmental progress with written authorisation from parents/guardians.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIP WITH FAMILIES AND COMMUNITIES		
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
181	Confidentiality of records kept by approved provider
182	Confidentiality and storage of records kept by family day care educator
183	Storage of records and other documents
184	Storage of records after service approval transferred

PURPOSE

We aim to ensure the collection and use of photographs or video of children complies with privacy laws and related legislation. We are committed to creating and maintaining a child safe environment by adhering to the Child Safe Standards.

SCOPE

This policy applies to all educators, children, families, approved provider, nominated supervisor, coordinators, students, volunteers and visitors (including contractors) of the Service.

IMPLEMENTATION

The displaying of photos at any service provides children and families with a sense of belonging. Photographs allow children to see themselves at play, are a topic of conversation for children and parents, allow families to see their child at play, and convey the message to children that what they are doing is important. However, it is fundamental to respect the rights of all children and families to privacy and ensure child safety is embedded in our policies and procedures.

THE APPROVED PROVIDER, NOMINATED SUPERVISOR, COORDINATOR, AND EDUCATORS WILL ENSURE:

- we are maintaining children's safety and respecting their right to privacy
- families provide written permission/consent for photographing or recording video of their child by our team (see: *Enrolment Form*)
- processes are in place to ensure families who speak languages other than English understand the requirements within this policy and the enrolment form
- every child in our care is protected from any exploitation of photographic and video images of themselves taken whilst they attend the service
- children participate in decisions affecting them including permission to have photographs taken of them
- personal information about the child's surname, age or any other information that reveals their identity is not published
- that photographs taken by educators support the children's learning and record children's individual progress

- photographs recorded are part of a normal day and are taken using a service owned electronic device and are only taken by approved educators, or by practicum students with written parental permission
- at no time are centre educators to use their private mobile phone or electronic device to take photographs, videos, or audio recordings of children whilst being educated and cared for unless authorised to do so by the Approved Provider or Manager.
- Educators seek written permission from families for their child to be photographed when an outside photographer/agency is contracted to take photographs for marketing purposes or to take individual and group photos once a year. Only children who have written permission from their parent/guardian will be included in any photography
- that the Service notifies parents of the purpose of taking photographs such as use on the Service's website and advertising flyers/brochure
- parents are aware that photographs or images may be taken of their children by other parents at various times of the year (e.g., excursions, during an end-of-year production or other event). Should parents not want their child photographed at any time, they must provide written notification to the Approved Provider, Manager or Nominated Supervisor at time of enrolment or if their decision for consent changes
- that the children of parents/carers who do not wish their child to be photographed or videoed are provided with other activities when an outside photographer/agency is engaged
- parents/carers have the choice to withdraw consent for their child to be photographed or filmed in certain circumstances
- photographs, video or other recordings of children are securely stored and disposed of when the child is no longer enrolled at the Service
- photographs/videos are taken to:
    - support the individual learning of each child for their formal record
    - record children's work and activities within the service environment

FAMILIES (PARENTS/CARERS) WILL:

- complete the Service's enrolment form at time of enrolment and provide written notification (Yes/No) to the Nominated Supervisor/Coordinator/Educator if they do NOT want their child to be photographed or their photo published in any form. The Nominated Supervisor/Coordinator/Educator will keep a record of children who are not to be photographed
- be invited to record their child's inclusion in group events and celebrations through the use of photographs or video on the understanding that they will not publish any material on the

Internet, including on their personal social media, as the Service has no control over these images once they are in the public domain.

- be requested to provide written permission/consent for educators, students or volunteers to take photos of their child/ren for assignments as part of their children services/university course
- be requested to provide written permission/consent for individuals visiting the Service to take photographs of their child/ren (e.g., professional photography for marketing, school photos etc.)
- be aware they have the choice to withdraw consent for their child to be photographed or filmed in certain circumstances
- ensure written notification is required if parents/families do NOT want their child included in photography opportunities which may include:
    - photographs taken to be used in each child's portfolios as these may contain other children
    - video of children taken for the children to be able to watch themselves at play. These videos may be made available to all families to view at various times.
    - when children/families are provided with a photo of their child to take home- these may include images of other children in the photo
    - when children are invited to take photographs or video either with digital cameras or tablets with story-making apps to support language and literacy development. Hard copies of these may be printed and made into a book produced by children. These will remain within the Service but may be viewed by families and visitors

SOURCE

Byrnes, J., & Wasik, B. (2009). Picture this: Using photography as a learning tool in early childhood classrooms.
Childhood Education, 85.
Child Protection Act, 1998.
Education and Care Services National Regulations. (Amended 2023).
Guide to the National Quality Framework. (2017). (Amended 2023).
Reference Childcare Centre Desktop

Privacy Act 1988
Revised National Quality Standard. (2018).
Victoria State Government. (2023). About Child Safe Standards.
Western Australian Education and Care Services National Regulations

POLICY CREATED	August 2024	REVIEWED	July 2025 July 2026