



Nurture Childcare and Educations Services Policies and procedures 2022-23

It is the condition that Parents sending their children and have contract signed with our service as a part of complying written arrangement must Accept Nurture Childcare Policies and Procedure TO REMIAN WITH NURTURE. Parent who are not accepting the policies will be asked to leave the service/Terminate without giving 2 weeks’ notice or as soon as service comes to know that parents declare that they do not accept it. This incident will be reported to relevant govt. authorities and the reason of termination of care.

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Quality Area 1.

1 EDUCATIONAL PROGRAM AND PRACTICE

1.1 NURTURE EDUCATIONAL PROGRAM POLICY

Research accentuates that quality educational programs significantly influence children’s development in all areas. We have the opportunity to provide a supportive learning environment and program, gaining inspiration from the children and families. Thoughtfully planned experiences and environments encourage the children to feel a sense of control over their actions, be curious and investigate, and explore their understanding of themselves, others, and the world around them.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1	Program	The educational program enhances each child’s learning and development.
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.
1.1.2	Child-centred	Each child’s current knowledge, strengths, ideas, culture, abilities and interests are the foundation of the program.
1.1.3	Program learning opportunities	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child’s learning.
1.2	Practice	Educators facilitate and extend each child’s learning and development.
1.2.1	Intentional teaching	Educators are deliberate, purposeful, and thoughtful in their decisions and actions.
1.2.2	Responsive teaching and scaffolding	Educators respond to children’s ideas and play and extend children’s learning through open-ended questions, interactions and feedback.
1.2.3	Child directed learning	Each child's agency is promoted, enabling them to make choices and decisions that influence events and their world.
1.3	Assessment and planning	Educators and coordinators take a planned and reflective approach to implementing the program for each child.
1.3.1	Assessment and planning cycle	Each child’s learning and development is assessed or evaluated as part of an ongoing cycle of observation, analysing learning, documentation, planning, implementation and reflection.

1.3.2	Critical reflection	Critical reflection on children’s learning and development, both as individuals and in groups, drives program planning and implementation.
1.3.3	Information for families	Families are informed about the program and their child's progress.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about educational program to be kept available
76	Information about educational program to be given to parents
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127	Family day care educator qualifications
168	Education and care service must have policies and procedures
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RELATED POLICIES

Additional Needs Policy Behaviour Guidance Policy Celebrations Policy Code of Conduct Policy Curriculum (Pedagogy) and Educators Training Policy Cyber Safety Policy English as an Additional Language or Dialect (EAL/D) Policy Environmental Responsibility Policy Excursion Policy Family Communication Policy	Interactions with Children, Family and Staff Policy Multi-Cultural Policy Non-English Speaking Background Policy Photograph Policy Physical Activity Policy Physical Environment Policy Privacy and Confidentiality Security Policy Professional Development Policy Respect for Children Policy Supervision Policy Transition to School Policy
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PURPOSE

Nurture Childcare and Education Services aims to enhance children’s learning and development through the pedagogical practices of educators and families in a positive learning environment, which is promoted across the five learning outcomes from the Early Years Learning Framework (EYLF) V.2.0 and My Time, Our Place: Framework for School Age Care in Australia (MTOPI)V2.0. Educators will gather and interpret

information about children as individuals to inform the preparation of the environment and implement experiences that are engaging and meaningful, supporting children’s holistic development.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

Under the National Law and National Regulations, approved Family Day Care Services are required to base their educational program on an approved learning framework. The program should focus on addressing the developmental needs, interests and experiences of each child, while considering the individual differences of each child.

There are two nationally approved learning frameworks in **Western Australia** which outline practices that support and promote children’s learning:

- Belonging, Being and Becoming: The Early Years Learning Framework for Australia- Early Years Learning Framework (EYLF): <https://www.education.gov.au/early-years-learning-framework-0>
- My Time, Our Place: Framework for School Age Care in Australia (MTOP): <https://www.education.gov.au/my-time-our-place>

NURTURE CHILDCARE AND EDUCATION SERVICES IS COMMITTED TO THE EARLY YEARS LEARNING FRAMEWORK (EYLF) **AND MY TIME OUR PLACE (MTOP)**

The approved learning frameworks include principles, practices and learning outcomes that guide educational leaders and educators in their curriculum decision making, and assist them in planning, delivering and evaluating quality programs in early childhood settings.

In compliance with the EYLF, MTOP and National Regulations, the program will contribute to the following outcomes for each child:

- The child will have a strong sense of identity
- The child will be connected with and contribute to his or her world
- The child will have a strong sense of wellbeing
- The child will be a confident and involved learner, and
- The child will be an effective communicator.

Nurture Childcare and Education Services also supports the EYLF and MTOP through the following:

- Each child's learning will be based on their interests and strengths and guided by educators.
- Educators must work in collaboration with families to provide relevant learning experiences for each child, based on their interests and family experiences. Educator must have to display program planning and should seek ideas and suggestion which can contribute into child development. (Nur)
- Every child will be equally valued. Their achievements and learning will be celebrated.
- Educators will observe and record the strengths and learning of each child and will share with family member/s, Guardian of their child/ren. (Nur)
- Educators will work closely with children and families to produce ideas for the curriculum.
- Learning Outcomes will be linked to the curriculum during and after each child's learning has occurred.
- The curriculum will be constructed on the children's interests, educators extending children's interests, spontaneous experiences and family contribution.
- Where appropriate, the service will liaise with external agencies and support persons to best educate and care for children with additional needs. (Educator must have to inform for children with additional needs)
- Each child's play and learning experiences will be used to build and develop each child's individual learning profile to record their learning journey. This may include Learning Stories, portfolios, observations, photographs with captions and annotations, children's feedback and other documentation demonstrating strengths and development. Educator can/will also share information through Whatsapp, Messages, Email, Hub hello. (Nur)
- The curriculum will be evaluated and reflected upon continuously by educators as part of the ongoing cycle of assessment and planning

THE APPROVED PROVIDER WILL ENSURE:

- the education leader selected is supported to lead the development and implementation of the educational program and assessment and planning cycle within the service
- the educational leader has the skills, knowledge and attributes to mentor and support educator's understanding of educational programming and practice
- the staff record includes the name of the person designated as the educational leader

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/COORDINATOR/EDUCATIONAL LEADER WILL:

- ensure that a suitable program based on an approved learning framework is delivered to all children at all FDC Services

- ensure FDC educators work together with educator assistants (where applicable) and the educational leader in preparing and/or implementing the curriculum which adheres to the service philosophy
- develop collaborative relationships with families to achieve quality outcomes for all children building on understandings of diversity, especially Aboriginal and Torres Strait Islander cultures
- ensure modifications are made in the environment for children with special disability and additional needs. The Approved Provider will assist with making appropriate, professional referrals where necessary with family permission.
- ensure each FDC educator plans for a balance between indoor and outdoor experiences with large blocks of unstructured time for uninterrupted child-initiated play
- promote children’s physical activity by supporting the development of their gross motor skills and fostering the emergence and refinement of fundamental movement skills through a range of intentionally planned and spontaneous active play learning experiences (See: Physical Activity Policy)
- ensure key physical activity recommendations from *Munch and Move* are embedded into each FDC Service’s curriculum
- support families through positive, respectful and reciprocal relationships through regular communication
- ensure the educational program is displayed in a place that is accessible to parents and families
- ensure a copy of the program is available at all times.

EDUCATORS WILL:

- collaborate with the educational leader for curriculum direction and guidance
- implement an ongoing cycle of planning, documenting, and evaluating children’s learning which will underpin the educational program and involve educators in critically thinking about what is achievable and why.
- Educators will follow Quality Area 1’s standards which are given below to make sure that all educator are following and documenting all given areas of Standard in Educational program and practice. (Nur)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1	Program	The educational program enhances each child’s learning and development.
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.
1.1.2	Child-centred	Each child’s current knowledge, strengths, ideas, culture, abilities and interests are the foundation of the program.
1.1.3	Program learning opportunities	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child’s learning.

1.2	Practice	Educators facilitate and extend each child's learning and development.
1.2.1	Intentional teaching	Educators are deliberate, purposeful, and thoughtful in their decisions and actions.
1.2.2	Responsive teaching and scaffolding	Educators respond to children's ideas and play and extend children's learning through open-ended questions, interactions and feedback.
1.2.3	Child directed learning	Each child's agency is promoted, enabling them to make choices and decisions that influence events and their world.
1.3	Assessment and planning	Educators and coordinators take a planned and reflective approach to implementing the program for each child.
1.3.1	Assessment and planning cycle	Each child's learning and development is assessed or evaluated as part of an ongoing cycle of observation, analysing learning, documentation, planning, implementation and reflection.
1.3.2	Critical reflection	Critical reflection on children's learning and development, both as individuals and in groups, drives program planning and implementation.
1.3.3	Information for families	Families are informed about the program and their child's progress.

(Nur)

- gather evidence of children's learning to ensure the educational program is responsive to the strengths, needs and interests of young children
- ensure the curriculum reflects diversity and reflects the values and beliefs of children and families
- take responsibility to be culturally competent and display positive attitudes towards cultural differences, respectfully acknowledge multiple cultural ways of knowing, seeing and being
- document children's experiences and their responses to the environment making children's learning visible to educators and families and promote shared learning and collaboration. Educator can also display children's activities and discuss with children so they can feel proud and valued.(Nur)
- provide experiences that include both structured and unstructured learning times catering for children's individual needs and interests and, are age appropriate
- ensure materials and equipment reflect the cultural diversity and family values that exists in our society (Different cultural corners can be provided so children can introduce and explored)
- intentionally promote learning about a child's culture, county and community through dance, music, language and dialect, stories, art and craft
- respond to children's ideas and play and use intentional teaching to scaffold and extend each child's learning
- provide experiences that actively promote and initiate the investigation of ideas, complex concepts and thinking, reasoning and hypothesising
- provide experiences that support and develop all developmental areas and curriculum areas including music, maths, and science

- plan and implement the intentional teaching of Fundamental Movement Skills (FMS) to support the physical development of children of all ages
- gather information from families upon enrolment regarding the child's needs, interests, and family backgrounds. This information is treated as confidential and allows educators to provide experiences that interest and extend children's current development.
- collaborate with children and families to support children's learning
- ensure information about the child's participation in the program is available for families
- ensure families receive a copy of children's learning progress
- encourage communication with families about physical activity, gross motor, and fundamental movements skills development
- explore ideas and theories using imagination and creative play
- allow large blocks of uninterrupted time to allow children to develop their ideas and play
- use the learning outcomes to guide planning for children's learning
- intentionally scaffold children's understanding and learning
- provide children with ongoing encouragement and positive reinforcement
- provide opportunities for children to be active and engaged daily through a balance of planned and spontaneous experiences within the indoor and outdoor environment
- make use of spontaneous 'teachable moments' to extend children's learning
- respond to children's displays of learning dispositions by commenting on them and providing encouragement and additional ideas
- view children as active participants and decision makers, working with each child's unique qualities and abilities
- further extend critical thinking skills through provocations
- plan realistic curriculum goals for children based on observation and assessment of individual needs and interests
- seek opportunities within the routine for spontaneous play and experiences
- ensure that all children's experiences are recognised and valued with equitable access to resources and opportunities to demonstrate their learning
- use a variety of methods to assist reflection on children's experiences, thinking, and learning
- ensure critical reflection clearly exams all aspects of events and experiences from different perspectives, identifying children's learning, spontaneous play, teaching strategies, and changes that may be needed in the environment
- assist children to develop daily healthy habits, understanding, and skills that support health and wellbeing.

NURTURE CHILDCARE AND EDUCATION SERVICES AIMS TO PROMOTE CHILDREN'S

PARTICIPATION IN PHYSICAL ACTIVITY BY:

Fostering children's Fundamental Movement Skills (FMS) including, running, galloping, hopping, jumping, leaping, side-sliding, skipping, overarm throwing, catching, striking a stationary ball, kicking, underarm throwing and stationary dribbling through role modelling skills.

- Providing active play experiences that encourage children to explore, be creative, and challenge their development.
- Providing space, time, and resources for children to revisit and practice FMS and engage in active play.
- Engaging in opportunities for educators and educator assistants to attend professional development to enhance their skills and knowledge about the importance of physical activity for children.
- Providing positive instruction, role modelling, and advice to children as they develop and improve their FMS.
- Working in collaboration with families and professionals to provide active experiences that are inclusive of all children.

The program will provide a variety of developmentally appropriate experiences and materials that are selected to achieve the following goals:

- foster a positive self-concept
- develop and support social skills
- develop and support children's cognitive skills such as the ability to think, reason, question, and experiment
- develop and support language development
- enhance physical development and skills
- support sound health, safety, personal hygiene, and nutritional practices.
- support creative expression
- support respect for cultural diversity of staff and children
- support respect for gender diversity.

SOURCE

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REVIEW

POLICY REVIEWED BY	Hamparbha Sharma Navneet Sharma & Educators/Families	Nominated Supervisor Directors, Educators, Families	01/09/2022
POLICY REVIEWED	August 2022	NEXT REVIEW DATE	Sept 2023
MODIFICATIONS	<ul style="list-style-type: none"> • additional related policies added (edited change of name for some policies) • additional information related to cultural competence • collaboration with families and children added • reference to new policy added (Physical Activity Policy) 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
Oct 2021	<ul style="list-style-type: none"> • additional information and regulations related to role of educational leader • minor editing • sources and links checked for currency/edited where required 		Sept. 2022
Oct 2020	<ul style="list-style-type: none"> • Sources checked for currency and updated as required • Western Australian curriculum amended • Additional links added 		Oct 2021
Oct 2019	<ul style="list-style-type: none"> • Checked & updated editions & referenced correctly. • Additional information added to points. • Rearranged the order of points for better flow. • Points added (Highlighted). • Sources/references corrected, updated, and alphabetised. 		Oct 2020

APRIL 2018	Programming policy created for Family Day Care Services, inclusive of changes to the National Quality Standards and Education and Care National Regulations	Oct 2019
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1.2 MULTICULTURAL POLICY

Australia is an increasingly multi-cultural society and as we recognise more cultural and ethnic diversity, it is imperative we lead children in recognising and respecting similarities and differences in cultures. The cultural beliefs, linguistic and religious diversity represented within our Family Day Care Service and wider community helps to form the foundation of the program being implemented to ensure we are promoting an inclusive environment for all children.

There were never in the world two opinions alike, any more than two hairs or two grains. Their most universal quality is diversity.

Michel De Montaigne, 1533–1592

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.
1.1.2	Child-centred	Each child’s current knowledge, strengths, ideas, culture, abilities and interests are the foundation of the program.
1.1.3	Program learning opportunities	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child’s learning.
1.2.2	Responsive teaching and scaffolding	Educators respond to children’s ideas and play and extend children’s learning through open-ended questions, interactions and feedback.
1.2.3	Child directed learning	Each child's agency is promoted, enabling them to make choices and decisions that influence events and their world.

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.2	Use	The service environment is inclusive, promotes competence and supports exploration and play based learning.

3.2.1	Inclusive environment	Outdoor and indoor spaces are organised and adapted to support every child's participation and to engage every child in quality experiences in both built and natural environments.
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QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN

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

QUALITY AREA 6: COLLABORATIVE PARTNERSHIP WITH FAMILIES

6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program.
6.2.3	Community engagement	The service builds relationships and engages with its community

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups

RELATED POLICIES

Additional Needs Policy Anti-Bias and Inclusion Policy Celebrations Policy Educational Programming Policy English as an Additional Language or Dialect (EAL/D) Policy	Family Communication Policy Interaction with Children, Family and Staff Policy Orientation of New Families Policy Physical Environment Policy Respect for Children Policy
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PURPOSE

To develop affirmative attitudes, concepts, and beliefs towards the acceptance of diversity and different cultures. Respect for diversity is a key element of quality care. Recognising, understanding and respecting cultural practices and beliefs are essential for the development of identity and self-esteem. Our cultural diversity in Australia is one of our greatest strengths and part of our national identity. Identity enhances children's sense of belonging and respect for diversity. (EYLF, 2010)

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Nurture Childcare and Education Services values and celebrates multicultural diversity by building respectful partnerships with families and local communities. We promote and embrace cultural and linguistic differences and provide an inclusive and equitable environment for children to develop their sense of belonging and enhance their learning and well-being.

The Approved Provider/Coordinator/Educators/Educator Assistants will ensure:

- equitable access to the Service is provided to children and families from all cultural and linguistic backgrounds
- all children and families are respected and treated equally and fairly at all times
- the Nurture Childcare and Education Services communicates, engages and consults with our culturally diverse communities
- a sense of inclusion for all families is embraced within the FDC Service
- specific programming develops cultural awareness activities and experiences, identifying similarities and differences and learning about a variety of cultural celebrations

- the Nurture Childcare and Education Services builds and maintains cultural resources to appropriately reflect cultures within the Service and community
- children, families, and staff respect and value others, including those who are different from themselves
- children, staff, and families' cultural backgrounds are reflected in developing routines and programs consistent with best practice and that foster positive outcomes for all stakeholders
- positive community relations are promoted and methods of communication with families can translated into home languages if required
- the capacity of FDC educators to meet the specific learning and wellbeing needs of children from culturally diverse backgrounds is met through professional learning opportunities provided by the educational leader/coordinator (Highlighted)
- the unique cultural and social perspectives of each family is acknowledged and celebrated
- all children and families have equal access to the FDC Service, and are welcomed and respected regardless of race, culture, colour of skin, socio-economic status, ability, family composition, belief systems or lifestyles
- positive attitudes are role-modelled towards differences in appearance, culture, and lifestyle
- all staff follow the principles of the Early Childhood Australia Code of Ethics. (Highlighted)

When working with children, Educators and Educator Assistants will:

- create and maintain an inclusive environment that enhances children's development, self-worth and dignity
- act in the best interests of all children at all times
- engage parents and families in planning cultural days, events or celebrations
- seek to protect the integrity of Aboriginal and Torres Strait Islander cultural expressions and language
- encourage children to respect and value others, including those who are different from themselves
- ensure children do not exclude others on the basis of differences such as race, sex, or ability
- ensure that the self-identity of each child is valued and respected
- encourage children to explore and accept diversity
- challenge bias and stereotypes
- address bias or comments about difference and treat as an opportunity to increase children's understandings
- model inclusive practices
- use unbiased language: avoid racist, sexist, discriminatory, and/or stereotyped remarks or comments
- ensure own interactions are caring and responsive to all children in the FDC Service
- demonstrate respect for all children and families

- use picture books to explore intercultural understanding
- ensure displays, posters, children’s books, and other materials are monitored to ensure they are culturally inclusive
- be sensitive to specific cultural behaviour or dress, which may be different to their own.
- ensure each child’s current knowledge, ideas, culture, abilities, and interests are consistently, actively and appropriately incorporated into all aspects of the program
- develop deep understanding in the culture and language of the Nurture Childcare and Education Services families and in that of the broader community, without compromising their cultural identities.

RESOURCES

[Aboriginal Early Childhood Cultural Protocols](#)

NSW Department of Education Learning and Teaching [Using picture books for intercultural understanding. Learning across the curriculum](#)

Reconciliation Australia- [Reconciliation Action Plans](#) (RAP)

Victorian Aboriginal Education Association Inc. Early Years Unit

[Walking Together](#)

SOURCE

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

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

Australian Government. Department of Home Affairs. (2019) Harmony Day <https://www.harmony.gov.au/about>

Early Childhood Australia Code of Ethics. (2016).

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

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

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

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

Lady Gowrie NSW: <https://www.gowriensw.com.au/>

Reconciliation Australia, Narragunnawali: Reconciliation in Education, (2019).

<https://www.narragunnawali.org.au/about>

Revised National Quality Standard. (2018).

Scarlet, R. R. (Ed.). (2016). *The anti-bias approach in early childhood* (3rd ed.). Australia: Multiverse.

REVIEW

POLICY REVIEWED BY	Hamparbha Sharma	Nominated Supervisor Director	01/09/2022
POLICY REVIEWED	Sept. 2022	NEXT REVIEW DATE	Oct. 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy reviewed as part of annual review cycle • links to resources checked • sources checked 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
Oct 2021	<ul style="list-style-type: none"> • minor edits as highlighted • additional resource added- picture books • sources checked for currency 		Sept. 2022
Oct 2020	<ul style="list-style-type: none"> • Additional information added to points and implementation • Sources/references added updated related policies added 		Oct 2021
	New Policy Drafted & Added Oct 2020		

1.3 ADDITIONAL NEEDS POLICY

Supporting children with additional needs requires **Nurture Childcare and Education Services (FDC)**

educators to extend upon the strategies they already use in providing quality care for children. It is imperative for FDC educators to develop a comprehensive understanding of each child’s interests and abilities and implement a program and environment that is receptive to their needs and inclusion. **FDC Educators must have to communicate with service and families if they notice anything which is not found before in the child’s day to day needs. (e.g., Parents has not informed to educator about child’s additional need but educator thinks child need more support or additional needs) (Nur)**

Inclusion is stipulated in the Early Years Learning Framework as *‘taking into account all children’s, social, cultural and linguistic diversity (including learning styles, abilities, disabilities, gender, family circumstances and geographical location) in curriculum decision making processes.’* Belonging, Being and Becoming (2009) p. 45.

Nurture Childcare and Education Services will work in partnership with families and other professionals to ensure specific consideration and adaptations allow children with additional needs access and participation and achieve positive learning outcomes.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1	Design	The design of the facilities is appropriate for the operation of a service.
3.1.1	Fit for purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
3.2.1	Inclusive environment	Outdoor and indoor spaces are organised and adapted to support every child's participation and to engage every child in quality experiences in both built and natural environments.
3.2.2	Resources support play-based learning	Resources, materials and equipment allow for multiple uses, are sufficient in number, and enable every child to engage in play-based learning.

QUALITY AREA 5 RELATIONSHIPS WITH CHILDREN

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

QUALITY AREA 6 COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

155	Interactions with children
156	Relationships in groups
157	Access for parents
168	Education and care service must have policies and procedures
170	Policies and procedures are to be followed

RELATED POLICIES

Anti-Bias and Inclusion Policy Behaviour Management Policy Code of Conduct Policy Early Childhood Intervention Practitioner Management Policy Enrolment Policy	Educational Program Policy Interaction with Children, Family and Staff Policy Medical Conditions Policy Orientation of New Families Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

To be responsive to each child, irrespective of their additional needs and abilities. We aim to provide a supportive and inclusive environment that sanctions each child to fully participate in its education and care at our Family Day Care approved residences and/or venues. FDC educators will remain encouraging, unprejudiced and supportive, ensuring that all children are treated equally and fairly and have the opportunity to grow and develop to their individual potential.

SCOPE

This policy applies to **staff, coordinators, FDC educators, educator assistants**, approved provider, nominated supervisor, families and visitors of the Family Day Care Service.

DEFINITIONS

According to the Inclusion Support Program Guideline (Australian Department of Education, Skills and Employment) **March 2020 July 2021** there is no national definition of '*additional needs*.' This term is used within the policy to describe children who may need or require specific considerations or adaptations to participate fully in our Early Childhood Education and Care service.

Additional needs may include children who:

- have a diagnosed disability or developmental delay- physical, sensory, intellectual, or autism spectrum disorder
- are presenting with challenging behaviours and/or behavioural or psychological disorders
- have a serious medical or health condition
- are presenting with trauma-related behaviours
- are Aboriginal or Torres Strait Islanders
- are recent arrivals in Australia
- have a culturally and linguistically diverse background
- live in isolated geographic locations
- are experiencing difficult family circumstances or stress
- are at risk of abuse or neglect
- are experiencing language and communication difficulties
- have learning difficulties
- are gifted or have special talents
- have other extra support needs.
- **Have age stage in which child can't take care of themselves and have additional need (Nur)**

We understand that additional needs may be temporary or permanent with diverse origins, which require different responses. Supporting children with additional needs enables them to have equitable access to resources and participation. This can lead to stronger skills in literacy and numeracy, social and emotional development and understanding of diversity. Strategies for supporting children with additional needs can differ significantly, because every child is unique **and their needs unique too. (Nur)**

IMPLEMENTATION

THE APPROVED PROVIDER, COORDINATOR AND FAMILY DAY CARE EDUCATORS WILL ENSURE:

- completed enrolment forms are used to gather information about children's additional needs **and supports that may be required**
- equitable access is provided to support children with additional needs
- communication with families is consistent and supportive
- they have a thorough understanding of the NDIS plan for each child (if applicable) and assist to help achieve goals and build skills and independence
- that any barriers preventing a child's inclusion are identified and strategies to make improvements implemented
- they contact their local Inclusion Agency to access information and support about the Inclusion Support Program (see: [Inclusion Development Fund Manager](#) for your state/territory organisation)
- they develop a *Strategic Inclusion Plan* **and Individual Support Plans** in collaboration with the Inclusion Agency (IA) which will identify any barriers preventing a child's inclusion and implement strategies for improvement
- they access the Inclusion Support Portal (IS Portal) through PRODA
- **parents/guardians** provide written consent for information about their child to be shared **with relevant IA, IDFM and the Department if accessing support under the Inclusion Support Program on the IS Portal if accessing support under the Inclusion Support Program**
- families are encouraged to meet with the FDC educator who may be working with the child to ensure an understanding of the child's needs, appropriate methods for communication, and to ascertain that suitable resources and support is provided to both the family and the child before confirming a placement
- the FDC Service works in partnership with Early Childhood Intervention (ECI) professionals, allied health professionals and families to verify the educational program and learning environment is inclusive for each child with additional needs, including children and families from culturally diverse backgrounds

- specific plans and programs provided by external resource providers and professionals for children with additional needs are shared with the FDC educator and copies filed in the child’s individual record
- children are encouraged to feel safe and secure during their education and care at the Service by developing trusting relationships with educators, other children, and the community.
- inclusive strategies and practices are embedded in the delivery of quality education and care
- the FDC Educator is meeting the needs of each individual child, by providing targeted professional development and opportunities to network with professional agencies
- the privacy and confidentiality for children and families is maintained
- the indoor and outdoor environment and equipment is designed or adapted to ensure access and participation for all children, supporting the inclusion of children with additional needs. This may include the use of:
 - portable ramps
 - use of standing frames and support swings
 - specialised inclusion toys such as sensory or switch toys
 - specialised furniture such as chairs, tables and positioning equipment
 - communication charts and Auslan dictionaries
 - resources and books in languages other than English to support Indigenous children and children from linguistically diverse backgrounds
- the program and curriculum are inclusive and meet the individual needs of children with additional needs, disability or developmental delay
- children’s sensory sensitivities to pressure, texture, smell, noise, or colour **is are** considered within the environment.

EDUCATOR/EDUCATOR ASSISTANTS WILL:

- treat children equally and fairly and with respect
- create an inclusive program, which is adaptable and supportive of all children
- develop an Inclusion Support Plan (ISP) in collaboration with Early Childhood Intervention (ECI) professionals, FDC Coordinator, other allied health professionals and parents for each child requiring additional support
- advocate for children’s rights
- conduct specific observations on the individual child, outlining their interests, strengths, and developmental needs to support programming including open ended learning opportunities
- meet with families of children with additional needs to familiarise themselves with the specific communication needs of each child. Communication could include verbal and non-verbal

communication skills and cues and may necessitate the use of systems such as sign language, use of images, and/or learning key words in the child's home language

- establish a means for frequent communication with parents of children with additional needs through a communication book, verbal daily information exchanges, and/or formal and informal meetings
- work with all families to meet children's developmental needs in order to build strengths and capabilities
- work with other professionals who play a role in supporting the child's development
- create a flexible environment, which can be adapted to each child's needs within the FDC Service to support the inclusion of children with additional needs
- implement programming experiences and activities, that are inclusive for all children to access, explore and participate
- listen carefully to all children's concerns and discuss issues of inclusion and exclusion, and fair and unfair behaviour
- act as role models by displaying appropriate behaviour and language, being consistently aware of and responsive to children who may require additional support, attention, or assistance.
- discuss a wide range of emotions, thoughts, and views constructively with the children within a supportive environment
- not judge or compare one child's development with another
- talk to children about differences and acceptance
- provide opportunities for all children to play and learn together, promoting cooperative, caring, and social behaviours.

INCLUSION SUPPORT PROGRAM (ISP)

To assist in the provision of an inclusive environment for children with additional needs, our FDC Service may apply for additional support through the [Inclusion Support Program \(ISP\)](#) if the eligibility requirements are met.

The Coordinator and FDC educator will refer to the Inclusion Support Guidelines and consult with families to submit an application. The objectives of the Inclusion Support Program include:

- supporting Early Childhood Education and Care Services to increase their capacity and capability to provide quality inclusive practices for all children
- to address access and participation barriers
- support the inclusion of children with additional needs
- provide parents or carers of children with additional needs with access to appropriate ECEC services

(See: Guide to Strategic Inclusion Plan)

HIGH POTENTIAL AND GIFTED CHILDREN

Our FDC Service will collaborate with families to support the needs of high potential and gifted children.

We will:

- respect the uniqueness of each child
- acknowledge the characteristics of high potential and gifted children
- be sensitive to the social-emotional needs of gifted children and assist them to feel a sense of belonging
- develop our capacity to cater for the needs of gifted children through professional development
- support children's transition to school
- assist educators cater for gifted children who also have a disability- 'Twice Exceptional' children

ENHANCED TRANSITION TO SCHOOL PLANNING

Our FDC Service will promote and support enhanced transition to school programs for children with additional needs by:

- starting the planning for transition to school
- liaising with key people at the school and other support services to ensure key dates for applications for support are noted
- sharing information about the child's strengths and completing *Transition to School Statements*
- supporting reciprocal visits to strengthen the transition to school for children and families
- provide continuity of learning between our FDC Service and school aged care.

FAMILIES WILL

- work collaboratively with our FDC Service
- share information about their child's specific needs- their interests, things they do well, strategies that are used at home to support their child, identify routines or situations that may cause physical or emotional challenges
- provide accurate information about their child's additional needs including relevant reports, documentation, NDIS plans, details about support services and other allied professionals
- provide written consent for information about their child to be shared on the IS Portal if accessing support under the Inclusion Support Program
- help to identify possible barriers for inclusion and reasonable adjustments that may be required
- consent to our Service accessing external professional support if required to assist educators manage the diagnosed, or undiagnosed additional needs of their child

- collaborate with external professional support agencies and educators to implement plans to support inclusion
- adhere to our policies that should the safety of other children and staff be compromised enrolment may be suspended or terminated.

SOURCE

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

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

Australian Government Department of Education, Skills and Employment (2014) *Continuity of Learning: A resource to support effective transition to school and school aged care*.

Australian Government Department of Education, Skills and Employment (2021) *Inclusion Support Program (ISP) Guidelines. Version 2.3 July 2021*

Catholic Education Office Melbourne (2013) *Gifted and Talented Students A Resource Guide for Teachers in Victorian Catholic Schools*

Early Childhood Australia Code of Ethics. (2016).

Early Childhood Australia (ECA), & Early Childhood Intervention Australia (ECIA). (2012). Position statement on the inclusion of children with disability in early childhood education and care.

http://www.earlychildhoodaustralia.org.au/wp-content/uploads/2014/06/ECA_Position_statement_Disability_Inclusion_web.pdf

Early Childhood Intervention Australia *National Guidelines for Best Practice in Early Childhood Intervention Education and Care Services National Law Act 2010*. (Amended 2018).

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

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

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

New South Wales Department of Education *High Potential and Gifted Education Policy*. (2019).

Raising Children *Supporting gifted and talented learning* <https://raisingchildren.net.au/preschoolers/play-learning/gifted-talented-children/supporting-learning>

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	Hamparbha Sharma	Nominated Supervisor/Director	01/09/2022
POLICY REVIEWED	Oct 2022	NEXT REVIEW DATE	Oct 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
Oct 2021	<ul style="list-style-type: none"> • Review of policy- Moved Families will.... to end of policy • sources checked for currency 	Oct 2022	

	<ul style="list-style-type: none"> • Updated information for Inclusion Support Program- PRODA • Reference to resource- <i>Guide to Strategic Inclusion Plan</i> added 	
Oct 2020	<ul style="list-style-type: none"> • Additional information for Approved provider and educators added • Adjustments for inclusion added <ul style="list-style-type: none"> - Family responsibilities - Inclusion Support Program - High Potential and Gifted children - Transition to School • New references added 	Oct 2021
Oct 2019	<ul style="list-style-type: none"> • Wording contextualised to FDC. • Rearranged the order of points for better flow • Points added (Highlighted). • Sources/references checked, corrected, updated, and alphabetise 	Oct. 2020
SEPTEMBER 2018	<ul style="list-style-type: none"> • New Policy created for Family Day Care Service 	Oct 2019

New Policy (Please re-check to put philosophy in)

1.4 EARLY CHILDHOOD INTERVENTION PRACTITIONER MANAGEMENT POLICY

Research has shown us that providing high quality intervention to children with diagnosed disabilities, developmental delays or children under assessment not only assists in ensuring the child can participate in everyday activities and family and community life but may substantially reduce the assistance and support required later in life. We also know that children learn best when participating in normal routines and activities with familiar people. Nurture Childcare and Education Services therefore welcomes the support of Early Childhood Intervention Practitioners.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1	Design	The design of the facilities is appropriate for the operation of a service.
3.1.1	Fit for purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
3.2.1	Inclusive environment	Outdoor and indoor spaces are organised and adapted to support every child's participation and to engage every child in quality experiences in both built and natural environments.
3.2.2	Resources support play-based learning	Resources, materials and equipment allow for multiple uses, are sufficient in number, and enable every child to engage in play-based learning.

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

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups
157	Access for parents

RELATED POLICIES

Additional Needs Policy	Educational Program Policy
Anti-Bias and Inclusion Policy	Interactions with Children, Family and Staff Policy
Child Safe Environment Policy	Orientation of New Families Policy
Code of Conduct Policy	Privacy and Confidentiality Policy
COVID-19 Management Policy	Respect for Children Policy

PURPOSE

We aim to provide an inclusive environment that supports each child to fully participate in the daily routines and activities of the FDC service. This includes providing procedures that enable us to maintain the daily schedule of children requiring visits from Early Childhood Intervention Practitioners that minimise disruptions to the child, other children, and educators. **To ensure a child safe environment and our commitment to the Child Safe Standards, any ECIP visiting FDC educators will be made aware of our FDC service's code of conduct, child safe policies including the reportable conduct scheme.**

SCOPE

This policy applies to the Educators, Educator Assistants, children, families, and Early Childhood Intervention Practitioners (ECIP) visiting the Family Day Care Service.

IMPLEMENTATION

Our Philosophy

We are keen to support our Children in care and as soon as Educator notices about child's any kind of delays or disability they will notify to Service and parents so children can be diagnosed earlier and relevant agencies can be involved without delaying the process.

The Early Years Learning Framework (EYLF) recognises that 'Partnerships ... involve educators, families and support professionals working together to explore the learning potential in every day events,

routines and play so that children with additional needs are provided with daily opportunities to learn from active participation and engagement in these experiences...' (DEEWR, 2009, p. 12).

Scheduling visits

- Visits to a child must be scheduled by the ECIP in negotiation with the FDC educator, with consideration given to the special circumstances of educators working without an educator assistant.
- The ECIP will be advised of the most appropriate times of day to schedule a visit in regard to minimising disruption to the child, and the FDC routine. The individual age-appropriate routine of the child is also to be considered.
- ECIPs will not be permitted access to the child if they arrive without a scheduled appointment.
- When scheduling visits, time must be included for communication between the educator and the ECIP after and/or before time spent with the child.
- If the ECIP has not attended the FDC service on a prior occasion they will be advised that they must bring a current WWCC and original *or* certified copies of qualifications. **The Coordinator or Nominated Supervisor will take copies of this information to keep on record at the principal office.**
- ECIPs will be advised that they are visiting a Sun Safe service and must bring a hat.
- ECIPs visiting our FDC service will be required to complete a COVID-19 health declaration upon arrival stating that they are not currently experiencing any fever at or above 37.5°C, acute respiratory infection, cough, shortness of breath, lethargy, sore throat, loss of sense of smell/taste and that they have not recently been in close proximity to a suspected or confirmed case of COVID-19.

Maintaining accurate records of ECIP visits

- Upon arrival ECIPs must **check in using the QR Code for FDC**, sign the Visitor's sign-in book, and/or the *ECIP Record of Visit* for the individual child being visited.
- Upon conclusion of the visit ECIPs must sign out in both the Visitor's sign-in book, and/or the *ECIP Record of Visit* for the individual child being visited.
- Information to be provided by the ECIP on the *ECIP Record of Visit* will include:
 - date
 - ECIP's name and contact details
 - scheduled appointment time
 - the company/business the ECIP is representing and their contact details
 - the purpose of the visit (observation, one-on-one activity etc.), and
 - the arrival and departure time.
- Upon conclusion of the visit the *ECIP Record of Visit* will be filed in the child's confidential records.

Child protection / Duty of care

- On the initial ECIP's visit he/she will provide evidence of a current WWCC, which will be photocopied and placed on file.
- The Coordinator/Nominated Supervisor or Responsible Person will ensure the ECIP is made aware of the service's commitment to the Child Safe Standards and be provided access to the relevant Child Protection and Child Safe Environment Policy.
- Qualifications and WWCC documents may either be submitted by the governing agency (prior to ECIP visit) OR in the case of individual therapists (NDIS relevant), therapists are to provide relevant documentation. The FDC Educator/ Educator Assistant will ensure these have been sighted prior to allowing entry to the premises.
- All interactions between the ECIP and the child will be conducted within sight and/or hearing of the FDC educator or educator assistant.
- At no time will a child be removed from the group: Children must remain within sight of the FDC Educator/Educator Assistant at all times.

Conclusion of visit

- At the conclusion of the visit a private space will be provided for the ECIP to have a conversation with the FDC educator, providing an educator assistant is available to maintain supervision of other children. If this is not possible the ECIP and FDC educator will seek out an area where they can conduct the discussion whilst maintaining supervision of children in attendance but minimising other children overhearing the conversation. If verbal communication or conversation is not possible during supervision of children then ECIP officer will write whole situation in a communication book and which educator can read and respond so full privacy can be maintained during care of children. (Nur)
- A summary of what has occurred will be provided by the ECIP including observations, outcomes of activities, and strategies to be implemented by the FDC educator and educator assistant.
- To ensure accountability is embedded into the process 'next moves' and 'actionable time-lines' should be employed.

Privacy and confidentiality

- Prior to conversations about the child it will be ensured that the family has given written consent to speak about their child.
- Discussions/conversations about the child will not take place in front of other children or families.
- All records of the visit will be placed in the child's confidential file in a locked cabinet.

Our Family Day Care Service will ensure:

- all visitors to the Service check in using the relevant QR Code [WA State Requirements]
- all visitors to the FDC Service adhere to strict hygiene measures as implemented within the residence or venue (handwashing, temperature checks, physical distancing, use of PPE)
- appointments are scheduled with ECIPs with regard to minimising the disruption for the child and the FDC routine
- at the time of making appointments ECIPs are advised that appointment times are not flexible as an educator assistant may be required to replace the educator
- appointment duration allows adequate time for the ECIP to consult with the educator both before and after time spent with the child
- the ECIP is notified in a timely manner if the child being visited is not in attendance at the service on the nominated visit day.
- that the Educator and Educator Assistants in the service receive the appropriate and relevant training required to support children with disabilities and/or developmental delays.

ECIPs will ensure:

- they complete a health declaration prior to entering the service- (including temperature check if required)
- they adhere to all hygiene measures implemented within the FDC residence or venue including wearing appropriate PPE
- will follow all related policies and procedure of Nurture Childcare and Educations Services.
- Will provide their full information e.g. WWCC, Education certificate, sig in/out to Educator visitor register and will provide full information regarding visit on the visitor register and on child communication book.
- all relevant information is shared with the FDC educator
- a working partnership is maintained with the FDC educators, educator assistants (if applicable), families, and all other ECIPs assigned to the child's case
- thoughtful and considered scheduling of appointments are made to minimise disruption to the child's routine, including
 - the times and duration of booked visits are respectful of the service's needs.
 - scheduled appointment times and durations are strictly adhered to.
- FDC educators and educator assistants are provided with information and strategies to support the child's learning and development

- FDC educators and educator assistants are informed of resources that are available to support the child’s learning and development
- any required documentation (such as observations) is requested prior to the visit to ensure FDC educators and/or educator assistants have reasonable time to prepare
- the service is notified in a timely manner of any cancellation of appointments
- if running late to an appointment the ECIP will contact the service to ascertain if a later time is practical or if another appointment must be scheduled.

Families Day Care Educators and Educator Assistants will ensure:

- feedback is provided to the ECIP regarding strategies implemented with the child
- documented observations are provided to the ECIP as requested
- information is shared with the child’s family [consider if translation of information is required]
- reasonable consideration is given to the timing of ECIP visits
- a working partnership is maintained with colleagues, families, and all ECIPs assigned to the child’s case
- professional development is maintained in order to provide full support for children with disabilities and/or developmental delays.

SOURCE

Department of Education and Early Childhood Development. (2011). Intervention reform project: <https://www.education.vic.gov.au/Documents/childhood/providers/needs/ecislitreviewexecsum.pdf>

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Moore, T.G. (2012). Rethinking early childhood intervention services: Implications for policy and practice *Pauline McGregor Memorial Address* presented at the 10th Biennial National Conference of Early Childhood Intervention Australia, and the 1st Asia-Pacific Early Childhood Intervention Conference, Perth, Western Australia, 9th August.

Raising Children Network: <https://raisingchildren.net.au>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2021	NEXT REVIEW DATE	SEPTEMBER 2022
MODIFICATIONS	<ul style="list-style-type: none"> • Inclusion of Child Safe Standards commitment • inclusion of requirement to check in using QR code for visitors 		



	<ul style="list-style-type: none"> sources checked for currency 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
SEPTEMBER 2020	Additional information added for COVID safe practices Sources checked for currency Minor editing	SEPTEMBER 2021
SEPTEMBER 2019	New policy drafted for Family Day Care services	SEPTEMBER 2020

1.5 TECHNOLOGY POLICY

Digital technologies and computers have become an integral part of many children’s daily lives. For this reason, it is important that our Family Day Care (FDC) educators are not only familiar with the use of digital technologies, but are able to guide children’s understanding of, and ability to use them interact, engage, access and use a range of digital technology in a child safe environment. Technology and media items will only be used as an extension to the daily program assisting in the development of social, physical, emotional, cognitive, language, and creative potential of each child. Digital technologies can be helpful in the retelling of stories about our culture, help to celebrate diversity and assist in providing an inclusive and equitable educational program. It is also helpful to show any research-based program which is hard to show children in real life. (Nur)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, and confidence as learners and effectiveness as communicators.
1.1.3	Program learning opportunities	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child’s learning.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational Program
76	Information about educational program to be given to parents

155	Interactions with children
156	Relationships in groups
181-184	Confidentiality of records and storage of records

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Cyber-Safety Policy	Dealing with Complaints Policy Educational Program Policy Privacy and confidentiality policy Social Media Policy
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PURPOSE

Nurture Childcare and Education Service will ensure FDC educators implement responsible behaviour and limit screen time for only 30-45 minutes and will plan and make sure that all program should for children learning and overall development. (NUR)

when using technology, respecting the children, and the privacy of families and educators. Educators will exercise appropriate judgement and behave in a professional and ethical manner when using technology. At all times, FDC educators will provide a child safe environment and supervise children when using technology to minimise the opportunity for abuse or other harm to occur (Child Safe Standard 8).

SCOPE

This policy applies to the Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Technology when used appropriately, can be a tool for learning, especially when educators play an active role. The Internet is a magnificent resource for research, communication, and extending programming ideas and interests. Computer use within our Service aims to encourage children to solve problems and use logical reasoning, leading children to make decisions and choices and assisting them to use computer software competently and safely. FDC educators are diligent in ensuring children are only able to access age-appropriate technology on any device provided at the FDC service/residence or approved venue.

Definition of terms

App: An abbreviation of the term 'Application'- refers to small programs that can be downloaded or installed on mobile phones

Coding:	Process of creating and inputting messages that can be understood by others or a digital device such as a computer robotic toy or app
Digital data:	Information that is transmitted digitally, including (but not limited to) text, audio, images and video
Digital technology:	enables large amounts of data to be stored and shared so it can be accessed, created and used by people anywhere and at any time
Digital documentation:	recording and analysing children’s engagement and learning using digital tools. (Includes photos, text and video and may be communicated via an online program).
Interactive whiteboard:	a digital screen that projects content for groups of children to view or co-view or co-engage. Incorporates touch sensitive or responsive controls so the user may engage via the screen rather than a mouse or keyboard

(Source: ECA Statement on young children and digital technologies, 2018.)

Examples of technology for early childhood education may include:

- touchscreen devices- tablets (iPads)
- programs that develop literacy or numeracy skills with ICT such as word processing, desktop publishing
- internet and information literacy skills
- Robotic toys- such as bee bots
- scanners
- Interactive whiteboards/data projectors

Management of the Family Day Care Service will:

- provide professional learning to educators in response to the ECA- *Statement on young children and digital technology*
- provide professional development, information to educators related to the [e-Safety Commissioner- Early Years Program](#)
- provide regular training for all FDC educators on reporting obligations (including mandatory reporting) and child safe practices
- report any breach of child protection legislation to relevant authorities- police WA, regulatory authority through NQA ITS portal (*see: Child Safe Environment, Child Protection Policies*)
- identify technology training needs of FDC educators for provide professional development
- ensure risk assessments of FDC residence and/or venue reflect on the physical environment to ensure it supports child safe practices

- o consider the location of digital technology/equipment to ensure FDC educators can supervise children when children are using digital technologies
- o ensure all devices used in a FDC residence or venue are set up safety- with controls, filters and safe search settings
- o ensure all devices are password protected with access for FDC educator/educator assistant only
- ensure the Service *Privacy and Confidentiality Policy* is adhered to at all times by FDC educators
- ensure there is no unauthorised access to the FDC Service’s technology facilities (programs, software program etc.)
- ensure all FDC educators have appropriate login details to provide secure usage
- ensure all technological devices have current virus protection software installed
- develop guidelines about how technology will be used by FDC educators in the residence/venue
- provide information to parents about technology use within the FDC Service
- seek permission from families to use digital documentation including photographs of children via social media and/or other forms of documentation platforms (see: *Social Media Policy*)
- ensure children, FDC educators and parents are aware of our service’s complaints handling process to raise any concerns they may have about the use of digital technologies or any other matter (see: *Dealing with Complaints Policy*)
- discuss with
- educators’ terms regarding sharing personal data online; ensure children’s personal information where children can be identified such as name, address, age, date of birth etc is not shared online
- must ensure that no breaches of copyright eventuate if screening/viewing DVDs

Families Day Care educators and educator assistants will:

- comply with current legislation and Service policies
- keep passwords confidential
- model appropriate use of digital devices and online services for learning purposes
- identify and minimise risks to children in physical and online environments
- only permit children to use devices in open areas of the service to ensure close monitoring and supervision
- log out of computer and software programs after each use
- only access and modify files and data for which they have authorisation
- not harass, slander, intimidate, embarrass, defame, or seek to offend another person, group of people, or organisation via technological devices
- not make copies of, transmit, steal, or loan copies to other persons of Service documents

- not use personal mobile devices to take photos, access social media whilst providing education and care to children or breach children and families' privacy
- ask permission before taking photos of children on any device so children begin an understanding of how photos of them can be used and where they will be published
- ensure they are aware of their mandatory reporting requirements and respond and report any concerns related to child safety including inappropriate use of digital technology to the Approved provider or nominated supervisor
- ensure privacy levels are set on electronic devices when in use by young children
- participate in professional development opportunities about online safety and digital technology
- ensure children's personal information where children can be identified such as name, address, age, date of birth etc is not shared online

In relation to children, educators and educator assistants will:

- support children's natural curiosity for technology
- provide children with access to age-appropriate technologies to help develop their computer literacy skills
- introduce concepts to children about online safety at age-appropriate levels
- only provide programs or apps that they have viewed and assessed prior to introducing to children
- build on children's learning and inspire the ongoing and enthusiastic acquisition of knowledge through technology
- use technology to build on current projects and document children's learning
- limit the amount of time spent on screens as per recommended screen times
- support children in turn-taking and learning to share when using digital technologies in collaboration with others
- provide a child safe environment to children- reminding them if they encounter anything unexpected that makes them feel uncomfortable, scared or upset, they can seek support from the FDC educator or educator assistant
- teach children to 'ask before they tap' or do anything new on a device
- limit experiences involving screen use to those which have an educational component or include movement and gross motor activity
- discuss with children the role of screen time in their lives and support them in making appropriate choices about their use of screen time for both education and recreation
- model appropriate screen behaviours and self-regulation to the children
- encourage productive sedentary experiences for rest and relaxation that are not technology reliant
- ensure that an appropriate balance between inactive and active time is maintained each day.

- ensure that under no circumstances the screen is used as a reward or to manage challenging behaviours
- educate and support children to begin to develop skills to critically evaluate sources of information on the internet.

Guidelines for use of technology within our FDC Service

- implement risk management strategies to ensure children are always supervised when using any digital device
- use of digital technologies is used to promote social interactions between children, peers and adults
- programs must be carefully selected and be suitable to the needs and development levels of each child using or watching various types of technology or media
- programs and apps will be chosen to support and promote children’s cognitive investment
- all online devices have appropriate filtering and monitoring in place with safe settings activated
- all devices are password protected with access for educator/educator assistant only
- postural awareness will be promoted when using devices
- technology is used to assist in expanding the content of the daily program and appropriate current affairs (e.g. the Olympic Games, environmental resources).
- technology is predominantly used where play-based and ‘hands-on’ experiences cannot provide the same information (e.g. investigating planets or dinosaurs). It will not replace appropriate experiences nor professional pedagogy.
- programs are chosen that are engaging and age appropriate to children: Only ‘G’ rated television programs and movies will be viewed at the FDC residence or venue
- the use of TV and watching DVD’s will be kept to a minimum. When used:
- programs depicting violence and/or inappropriate content (including graphic news reports) will not be shown
- TV programs or videos will only be shown that have positive messages about relationships, family and life
- information about programs to be viewed will be shared with families beforehand to ensure that they approve of the content. This may include:
 - title
 - synopsis of program
 - rating
 - length of program
- all content will be socially and culturally considerate and appropriate.

- timeframes for 'screen time' according to Australia's Physical Activity and Sedentary Behaviour Guidelines are:
 - Children birth to one year should not spend any time in front of a screen.
 - Children 2 to 5 years of age should be limited to less than one hour per day.
 - Children 5-12 years of age should limit screen time for entertainment to no more than 2 hours a day.
- children will be taught responsible concepts of digital use and citizenship as children are '*growing up digital*'
- only quality developmentally appropriate interactive media will be used.

In relation to families our service and educators will:

- create shared understandings between families and educators about digital technology use, by adults, in front of children
- provide information regarding online safety to families [eSafetyparents](#)
- provide families with information about the digital technology used by the Service and FDC educator
- request written consent from parents/families to collect and share personal information, images or videos of their children online (Website, Facebook, Instagram or [\[enter name of parent communication app\]](#))
- provide information to parents and families about how to make a complaint and what to expect from our complaints handling processes (*see: Dealing with Complaints Policy*)
- provide information and advice to families about the selection of digital media content, apps and games that are appropriate for use by young children
- provide information about the apps and programs used by the FDC educator
- support families to understand that negative effects of exposure to disturbing or arousing content and screens before sleep time.

SOURCE

Australian Government. Department of Education, Skills and Employment. (2009). *Belonging, being and becoming: The early years learning framework for Australia*.

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Australian Government. eSafety Commissioner Early Years program for educators

<https://www.esafety.gov.au/educators/early-years-program>

Australian Government Department of Health. (2014). Australia's Physical Activity and Sedentary Behaviour Guidelines:

<https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-publth-strateg-phys-act-guidelines>

Commission for Children and Young People. (2021). [Victoria's new Child Safe Standards](#)

Early Childhood Australia *Statement on young children and digital technologies*. (2018).

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NSW Office of the Children’s Guardian. (2020). [Guide to the Child Safe Standards](#)

Revised National Quality Standard. (2018).

The Australian Council on Children and the Media for the Australian Research Alliance for Children and Youth. (2011). *Television and young children: Quality, choice and the role of parents: What the experts and parents say.*

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2021	NEXT REVIEW DATE	Sept 2022
MODIFICATIONS	<ul style="list-style-type: none"> policy reviewed to include recommendations for the implementation of the Child Safe Standards relating to the use of technology additional related policies included sources checked and updated 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2020	<ul style="list-style-type: none"> Minor edits to introduction to policy Related regulations amended Added content to support ECA Statement on young children and digital technologies Definition of terms and examples of technology Additional section- Families Source- updated		OCTOBER 2021
OCTOBER 2019	New policy drafted		OCTOBER 2020

1.6 CELEBRATIONS POLICY

Rituals and traditions strengthen our partnership with children, families and community bringing a sense of belonging to our Family Day Care Service. We believe that celebrations and cultural traditions need to be handled sensitively. The value in educating children, families and educators are fundamental to our inclusive program. Both the planning and preparation, and the events themselves, can be a satisfying and pleasurable experience.

‘Children belong first to a family, a cultural group, a neighbourhood and a wider community. Belonging acknowledges children’s interdependence with others and the basis of relationships in defining identities.

In early childhood and throughout life, relationships are crucial to a sense of belonging. Belonging is central to being and becoming in that it shares who children are and who they can become’ (EYLF, 2009, p.7).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
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	
77	Health, hygiene and safe food practices
78	Food and beverages
90	Medical conditions policy
155	Interactions with children

162	Health information to be kept in enrolment record
170	Policies and procedures to be followed
171	Policies and procedures to be kept available

RELATED POLICIES

Anaphylaxis Management Policy	Family Communication Policy
Dental Health Policy	Multicultural Policy
Diabetes Management Policy	Nutrition Food Safety Policy
Enrolment Policy	Professional Development Policy

PURPOSE

Incorporating celebrations into children’s services appropriately can be used to strengthen the partnership with children and families, creating a feeling of belonging and developing a sense of community amongst families, educators and children.

Celebrations provide an opportunity for children to develop respect for diverse values and beliefs as they learn about practices, which are different to their own. To ensure we are providing an inclusive program and environment, it is imperative to recognise the array of celebrations, both religious and worldly, that take place throughout the year in our community and to have an understanding of, and respect for, cultural diversity in our Family Day Care services.

SCOPE

This policy applies to children, families, educators/educator assistants, management and visitors of the Family Day Care Service.

IMPLEMENTATION

Under the *Education and Care Services National Regulations*, an approved provider must ensure policies and procedures are in place to provide a child safe environment. When providing opportunities for children to celebrate special occasions incorporating food or beverages, consideration must be made to ensure children with medical conditions that can be impacted by food are clearly identified and risk minimisation plans are in place and educators and staff implement these plans.

Coordinators and Family Day Care Educators will ensure:

- to incorporate relevant, culturally based experiences and celebrations within the children’s program which address different learning opportunities, including: fostering a sense of belonging and inclusions for every child, family, and staff member (EYLF, p.7); increasing children’s understanding

of, and respect for, diversity and differences (EYLF, p.13); raising children's self-awareness and confidence, providing for children's holistic development and supporting a positive identity for every child and family (EYLF, p.2).

- cultural competence is authentically embedded in practices and programs within the FDC Service and deliver positive outcomes for children and families
- special occasions are celebrated in ways that recognise, respect and strengthen children's appreciation of diversity and difference
- religious celebrations such as Christmas and Easter are recognised within the service and reflected in our programs
- cultural celebrations that are significant to our families and relevant to our broader community are implemented within the service when possible
- stereotypes about particular celebrations/cultural events are not assumed
- families are aware of the *Celebration Policy* during their orientation process and kept updated throughout the year via centre correspondence
- sensitivity to issues such as family composition is respected (e.g.: Mother's & Father's Day)
- families' beliefs about celebrating birthdays is respected within the FDC Service
- healthy options for birthday celebrations are discussed with families which may include fruit platter, fruit salad, watermelon balls or muffins in preference to a cake
- families discuss cake options with the FDC educator *prior* to celebrations
- if a cake is required for a child's birthday it is recommended that cupcakes be provided as these reduce the major cross-contamination allergy risks associated with most other cakes (nuts, eggs) and are more hygienic for educators to manage.
- parents provide ingredients of any cakes brought to the service (if store bought, the 'use by' date and ingredients must be clearly labelled)
- families are reminded that we are an 'Allergy Aware' Service prior to celebrations and food that cannot be brought into the FDC service is clearly identified [adjust to suit your own context]
- the FDC educator is aware and has the opportunity to make alternate arrangements if families would prefer that their child does NOT participate in such celebrations
- if this is the case, the educator will respect the rights and feelings of this child and provide an alternative experience for them to participate in so that they do not feel that they are being left out
- the FDC Service has an '*Events Calendar*' that is used to support such events throughout the year. We ask that families add their celebration to the calendar so the FDC educators can prepare the program.
- families are encouraged to be involved in the preparation and/or the celebration
- FDC educators remain current with the professional knowledge and skills that support planning for and engaging in culturally inclusive practice

- they liaise with our local Aboriginal educational consultative group to provide advice on relevant cultural celebrations and correct protocols to be followed (e.g. NADIOC Week, Sorry Day, National Reconciliation Week)
- advance planning is adhered to if food or drink is provided for children at the FDC residence. Additionally, all parents must be advised prior to the celebration. This allows for any feedback / concerns from parents which can then be taken into account as part of the normal planning involved in such activities.
- safety issues are taken into account prior to the implementation of celebratory experiences.
- our *Nutritional Food Safety Policy* is reflected when planning for celebrations
- Professional Development is considered as a tool to assist to expand educator's knowledge of cultural awareness and cultural celebrations

Family Day Care Educators and/or Educator Assistants will:

- ensure the use of candles is carried out with the children's safety in mind. A full risk assessment will be submitted to the Coordinator prior to such celebrations.
- identify any children with medical conditions that may be impacted by particular foods and if required complete risk minimisations plans/risk assessments to ensure children's safety
- ensure each child is provided with a separate cupcake (with a candle, if they wish) for the child celebrating their birthday.
- be aware of cultural tokenism and stereotyping
- encourage and support family members to be involved in sharing their customs and celebrations
- ensure children have the agency to make choices about the celebrations they would like to participate in, engaging families to give advice on customs
- ensure that children have the resources and time necessary to be able to celebrate effectively
- provide young children and toddlers with materials that reflect a significant event or celebration, which they have recently participated
- ensure that families who do not wish to be involved in celebrations have an option to not participate
- balance family values about receiving gifts and products from their children and educator's values about avoiding product-based activities by developing creative and meaningful gifts for families
- notify the community about the celebration e.g. taking photos to display in the FDC residence- notice board, front entry or displaying children's artwork and drawings about the celebration
- provide opportunities for children to participate in open ended celebration activities
- provide a flexible program that enables children to have agency about the activities in which they participate
- celebrate traditions and customs relevant to children and community

- ensure that the same amount of time and energy is dedicated to ALL celebrations
- invite families to share their own personal experiences of celebrations
- ensure resources such as picture storybooks, images, and music are reflective of contemporary celebrations to which children can relate
- be respectful of all religions and cultural backgrounds
- participate in professional development to raise cultural awareness around cultural celebrations

SOURCE

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

Australian Government. Department of Education, Skills and Employment. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).

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National Health and Medical Research Council. (2013). 5th *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

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REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2021	NEXT REVIEW DATE	NOVEMBER 2022
MODIFICATIONS	<ul style="list-style-type: none"> • Addition of related Education and Care National Regulations • additional related polices • reference to risk minimisation plans for medical conditions sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
NOVEMBER 2020	<ul style="list-style-type: none"> • liaising with local Aboriginal educational consultants added • healthy options for birthday cakes include • sources checked for currency 		NOVEMBER 2020
NOVEMBER 2019	New policy drafted for Family Day Care		NOVEMBER 2020

QA-2

2 CHILDREN HEALTH AND SAFETY

2.1 ACCEPTANCE AND REFUSAL AUTHORISATION POLICY

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

NATIONAL QUALITY STANDARD (NQS)

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

NSW EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement- anaphylaxis or asthma emergency
96	Self-administration of medication
99	Children leaving the education and care service

102	Authorisation for excursions
102D	Authorisation for service to transport children
157	Access for parents
160	Child enrolment records to be kept by approved provider
161	Authorisation to be kept in enrolment record
165	Record of visitors
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

RELATED POLICIES

Administration of Medication Policy Anaphylaxis Management Policy Arrival and Departure Policy Asthma Management Policy Child Protection Policy Child Safe Environment Policy Diabetes Management Policy Governance Policy Emergency and evacuation Policy Enrolment Policy	Epilepsy Management Policy Excursion Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Orientation of Families Policy Safe Transportation Policy Sun Safe Policy Water Safety Policy
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PURPOSE

Our priority is ensuring the health, safety and wellbeing of children. Our Family Day Care Service aims to ensure that all FDC educators 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 in discussion with the Co-ordinator, Police or other authorities.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

The Family Day Care Service will ensure we comply with the current *Education and Care Services National Regulations*, which require the approved provider to have policies and procedures in place relating to the acceptance and refusal of authorisations. Nurture Childcare and Education Services--parent or guardian authorisation to be provided in matters including:

- Administration of medication to children
- Self-administration of medication for children who are over preschool age
- Administration of medical treatment, dental treatment, and general first aid treatment
- Emergency Ambulance transportation
- Transportation- including regular outings and regular transportation
- 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 FDC service, or trips outside the service premises
- Children leaving the premises in the care of someone other than a parent or guardian

THE APPROVED PROVIDER WILL ENSURE THAT:

- the *Acceptance and Refusal Authorisation Policy* is reviewed and maintained by FDC Service management and adhered to at all times by educators and educator assistants
- policies and procedures are readily accessible to nominated supervisors, coordinators, FDC educators and staff and available for inspection
- an enrolment record is kept for each child that includes authorisations signed by a parent or a person authorised to
 - consent to medical treatment of the child if relevant
 - to authorise the education and care service to transport the child or arrange transportation for the child
- all FDC educators and staff follow the policies and procedures of our Service
- all parents/guardians have completed the authorised person's section of their child's enrolment form including authorised nominees (refer to *Enrolment Policy*), and that the form is signed and dated before the child commences at the FDC Service

- permission forms for excursions are provided to the parent/guardian or authorised nominee prior to the excursion (refer to *Excursion Policy* and *Safe Transportation Policy*)
- parent/guardians are provided with a copy of relevant policies for our FDC Service or are aware of how they can be accessed
- attendance records are maintained for all children attending the FDC Service
- a written record of all visitors to the FDC residence/venue, including time of arrival and departure and reasons for visit is documented
- where a child requires medication to be administered by educators/staff, that an *Administration of Medication Record* is completed, and authorisation provided by the parent/guardian or authorised nominee and included with the child's record (Refer to *Administration of Medication Policy*).
- where a child over preschool age, and is authorised by the parent or guardian to self-administer medication, this is recorded in the Medication Record
- FDC educators/educator assistants do not administer medication without the authorisation of parent/guardian or authorised nominee except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Asthma Management Policy, Anaphylaxis Management Policy, Diabetes Management Policy, and Epilepsy Management Policy*).
- consult with parents/guardians, the child's health practitioner and FDC educator to determine the circumstances that the child could self-administer their medication as per their ASCIA Action Plan for Anaphylaxis or Asthma Foundation Action Plan for Asthma
- determine where self-administered medication should be stored by the FDC service (asthma, anaphylaxis or diabetes medication must be stored in an easily accessible location)
- FDC educators and educator assistants 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
- FDC educators and educator assistants 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
- FDC educators/educator assistants allow a child to depart the Service only with:
 - a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
 - with a person authorised by a parent or authorised nominee; or
 - leaves in accordance with the written authorisation of the parent; or authorised nominee; or
 - is taken on an excursion; or
 - in the case of a medical emergency or another emergency (Refer to *Arrival and Departure Policy* and *Emergency Evacuation Policy*)

- there are procedures in place if an inappropriate person or a person who does not appear to be fit to care for the child attempts to collect the child from the FDC service or poses a risk to the children of educator (for example, an intoxicated person) (refer to *Arrival and Departure of Children Policy*).
- notify families at least 14 days before changing the policy or procedures (Reg. 172)

EDUCATORS AND EDUCATOR ASSISTANTS WILL:

- follow the policies and procedures of the FDC Service
- ensure documentation relating to authorisations contains:
 - the name of the child enrolled in the service
 - date
 - signature of the child's parent/guardian and authorised nominee as named on the enrolment form
- 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
- ensure that parents/guardians sign and date permission forms for excursions prior to the excursion being implemented
- allow a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee
- check that parents/guardians or authorised nominees sign the attendance record as their child arrives and departs from the Service
- ensure a written record of all visitors to the FDC residence or approved venue, including time of arrival and departure and reasons for visit is documented
- administer medication only with the written authorisation of a parent/guardian or authorised nominee as per the *Administration of Medication Record*, except in the case of an emergency, including an asthma, anaphylaxis emergency
- waive compliance where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. In accordance with National Regulations (R.93) the Service can administer medication in these circumstances without authorisation. If these situations occur Management will be required to contact the parent/guardian as soon as practicable after the medication has been administered and emergency services. Notification to the Regulatory Authority is required within 24 hours of a serious incident
- allow a child over pre-school age to self-administer medication under the following circumstances:
 - a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication.

- medication is stored safely by the FDC educator, who will provide it to the child when required
- supervision is provided by the FDC educator whilst the child is self-administering.
- a recording is made in the medication record for the child that the medication has been self-administered
- allow a child to depart from the FDC Service only with:
 - a person who is the parent/guardian or authorised nominee named in the child's enrolment record; or
 - with a person authorised by a parent or authorised nominee; or
 - leaves in accordance with the written authorisation of the parent/guardian; or authorised nominee; or
 - is taken on an excursion; or
 - in the case of a medical emergency or another emergency (Refer to *Arrival and Departure Policy* and *Emergency Evacuation Policy*).
- follow procedures if an inappropriate person attempts to collect a child from the Service and poses a risk to the safety of the children or educator (for example, an intoxicated person).
- exercise the right of refusal if written or verbal authorisations do not comply with National Regulations or Child Protection Legislation. If an authorisation is refused by the FDC 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*).
- inform the family and 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 FDC Service
- complete and sign the authorised person section of their child's enrolment form before their child commences at the FDC Service
- ensure that changes to nominated authorised persons are provided to the FDC 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 FDC residence/venue
- sign and date permission forms for regular transportation and regular outings
- sign and date permission forms for excursions
- sign the attendance record as their child arrives and departs from the FDC residence/venue
- provide written authorisation on the Administration of Medication Form when their child requires medication to be administered by an educator, including signing and dating it for inclusion in the child's medication records
- provide a Medical Management Plan or Action Plan from their child's health practitioner regarding circumstances by which the child could self-administer their medication (e.g.: Asthma inhaler)
- be familiar with circumstances where authorisations may be refused/not applicable.

AUTHORISATION REQUIREMENTS

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

Administration of medication	<ul style="list-style-type: none"> • Name of the child • <i>Administration of Medication Record</i> is signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication • Authorisation is provided by a parent or guardian for the child to self-administer medication as per their Action Plan • Name of the medication to be administered • Clearly indicate the time and date the medication is to be administered • Dosage of the medication to be administered • Method of dosage (e.g.: oral or inhaled) • Whether the medication is to be self-administered (asthma, diabetes) • Period of authorisation (actual days and dates: from and to). • Date the authorisation is signed • Medication must be in its original container and bearing the correct child's name • Medication is not past its expiry or use-by date • Medication is administered in accordance with any instructions attached to the medication or provided by a registered medical practitioner • A second person checks the signed <i>Administration of Medication Record</i>, checks the dosage of the medication, and witnesses its administration • The educator administering medication and witness must write their full name and sign the medication record • Details of the administration must be recorded in the medication record • Supervision is provided by an educator whilst a child is self-administering medication • A recording is made in the medication record for the child that the medication has been self-administered
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<p>Medical treatment of the child including transportation by an ambulance service</p> <p>(Included and authorised initially as part of the child's enrolment record)</p>	<ul style="list-style-type: none"> • Name of the child • Authorisation to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service • Authorisation for the transportation of the child by an ambulance service • Name, address and telephone number of the child's registered medical practitioner or medical service • Child's Medicare number • Name of the parent or guardian providing authorisation <p>Relationship to the child</p>
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<p>Emergency Medical Treatment</p> <p>(included and authorised initially as part of the child's enrolment record or as updates during enrolment)</p>	<ul style="list-style-type: none"> • The Service is able to seek emergency medical assistance for a child as required (i.e. medical practitioner, ambulance or hospital) without seeking further authorisation from a parent or guardian in the case of an emergency, including for emergencies relating to medical conditions noted on the enrolment form.
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<p>Collection of children</p> <p>(Included and authorised initially as part of the child's enrolment record or as updated during enrolment)</p>	<ul style="list-style-type: none"> • Name of the child • Name of the parent or the guardian of the child or the authorised nominee on the enrolment form providing authorisation • Name of the person/s authorised by a parent or authorised nominee named in the child's enrolment record to collect the child from the premises • State relationship to the child of the persons authorised to collect the child from the premises • Signature of the person providing authorisation and date of authorisation
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<p>Transportation</p> <p>(other than as part of an excursion)</p>	<p>If the transportation is 'regular transportation' the authorisation is only required to be obtained once in a 12-month period</p> <ul style="list-style-type: none"> • Name of the child • the reason the child is to be transported • if the authorisation is for regular transportation, a description of when the child is to be transported and the date the child is to be transported • a description of the proposed pick-up location and destination • the means of transport • the period of time during which the child is to be transported • the anticipated number of children likely to be transported • the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation • any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported • that a risk assessment has been prepared and is available at the education and care service • that written policies and procedures for transporting children are available at the education and care service
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Excursions	<p>The authorisation must state:</p> <ul style="list-style-type: none"> • Name of the child • Date of the excursion (unless for a regular outing) • Reason for the excursion • Proposed destination for the excursion • Method of transport to be used • Route to be taken to and from the excursion • Period of time away from premise- include time leaving premise and time returning to premise • Proposed activities to be undertaken by the child during the excursion • Anticipated number of children likely to be attending the excursion • Ratio of educators attending the excursion to the number of children attending the excursion • Number of staff members and any other adults who will accompany and supervise the children on the excursion (including parents, students, volunteers) • Statement that a risk assessment has been prepared and is available at the service • Name of the parent or guardian-providing authorisation • Relationship to the child • Signature of the person providing authorisation and date of authorisation • Details of any water hazards and risks associated with water-based activities (to be included in risk assessment). <p>Items that should be taken on the excursion</p>
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Regular outing	<p>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:</p> <ul style="list-style-type: none"> • 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) • proposed activities to be undertaken • anticipated ratio of educators to the anticipated number of children • that a risk assessment has been prepared and is available at the service
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<p>Sunscreen and Insect Repellent application</p> <p>(Permission to apply sunscreen is included on enrolment form)</p>	<ul style="list-style-type: none"> Name of child Permission authorised for staff to apply SPF 30 or higher broad-spectrum, water-resistant sunscreen supplied by the service or 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 Safety Data Sheet required for all products Permission authorised for staff to apply insect repellent supplied by the service or Permission authorised for staff to apply insect repellent supplied by the parent/guardian [adjust for your own service requirements] <p>Note: the use of sunscreen on babies under 6 months is not recommended due to their sensitive skin.</p>
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<p>Confirmation of Authorisation</p>	<ul style="list-style-type: none"> All authorisation forms received (including the initial enrolment form) are to be checked for completion. All authorisations (excluding the initial enrolment form) are checked to ensure that the authoriser (name and signature) is the nominated parent or guardian on the enrolment form. If incomplete or inappropriately signed, the authorisation form should be returned to the parent or guardian for correction. Children will be suspended from any activity requiring authorisation until the appropriate form has been correctly completed and signed.
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SOURCE

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

ACECQA. (2021). Policy and procedure guidelines. *Acceptance and refusal of authorisations*.

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 2018).

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

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

Guide to the National Quality Standard. (2017).

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JANUARY 2022	NEXT REVIEW DATE	JANUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> Policy reviewed as part of review cycle See below for edits (September 2021) 		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
SEPTEMBER 2021	<ul style="list-style-type: none"> • Additional law/regulations added- ACECQA Guidelines to Policy and Procedures document- (June 2021) • Regular outing authorisation information added • insect repellent authorisation- optional and service specific 	JANUARY 2022
JANUARY 2021	<ul style="list-style-type: none"> • additional information added for Safe Transportation of children • written authorisation requirements for regular outings and regular transportation- new section added • sources checked for currency 	JANUARY 2022
JUNE 2020	<ul style="list-style-type: none"> • small edits to align with <i>Arrival and Departure Policy</i> • additional information for refusals of authorisation- Child Protection Legislation • addition of regulations regarding asthma and anaphylaxis and access for parents and self-administration of medication • additional points added for self-administration of medication • additional related policies added 	JANUARY 2021
JANUARY 2020	<ul style="list-style-type: none"> • Small edits to wording as indicated • removal of 'excluding Paracetamol' from administration of medication • Permission for sunscreen and insect repellent guidance added • sources checked for currency 	JANUARY 2021
JANUARY 2019	<ul style="list-style-type: none"> • Additional information added to points. • 'Related policies' added as per those referenced in the document. • Rearranged the order of points for better flow • Points added (Highlighted). • Sources/references corrected, updated, and alphabetised. 	JANUARY 2020
JANUARY 2018	<ul style="list-style-type: none"> • Minor changes made to comply with changes to the Education and Care National Regulations. • Added related policy section 	JANUARY 2019
DECEMBER 2017	<ul style="list-style-type: none"> • Updated policy to comply with new National Quality Standard and Education and Care Regulations 	NOVEMBER 2018
MAY 2017	<ul style="list-style-type: none"> • Modifications made to adhere to Family Day Care Service 	TBA

2.2 ARRIVAL AND DEPARTURE POLICY DELIVERY OF CHILDREN TO, AND COLLECTION FROM EDUCATION AND CARE SERVICE PREMISES

Under the *Education and Care Services National Regulations* the approved provider must ensure that policies and procedures are in place for the delivery of children to, and collection from, service premises and take reasonable steps to ensure those policies are followed. (ACECQA 2021).

Arrival and departure times are planned to promote a smooth transition between home and our Family Day Care Service. The opportunity to build secure, respectful and reciprocal relationships between children and families is promoted during arrival and departure times where educators have the opportunity to engage in conversations with families and support each child's well-being.

To ensure the safety of children at our Family Day Care Service our *Arrival and Departure Policy* is strictly adhered to, allowing only nominated authorised persons to collect children at any time throughout the day. The daily sign in and out register is not only a legally required document to record children's attendance as per National Law and Regulations but also used as a record of the children on the premises should an emergency evacuation be required to be implemented.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

84	Awareness of child protection law
86	Notification to parents of incidents, injury, trauma and illness
87	Incident, injury, trauma and illness record
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
102	Authorisations for excursions
102C	Conduct of risk assessment for transporting children by education and care service
102D	Authorisation for service to transport children
122	Educators must be working directly with children to be included in ratios
157	Access for parents
158	Children's attendance record to be kept by approved provider
159	Children's attendance record to be kept by family day care educator
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
165	Record of visitors
168	Education and care services must have policies and procedures
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
177	Prescribed enrolment and other documents to be kept by approved provider
S162 (A)	Persons in day-to-day charge and nominated supervisors to have child protection training
S165	Offence to inadequately supervise children
S167	Offence relating to protection of children from harm or hazard
S170	Offence relating to unauthorised persons on education and care service premises

RELATED POLICIES

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

PURPOSE

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

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

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

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL ENSURE:

- FDC educators provide adequate supervision when children arrive and depart the approved FDC residence/venue
- the relevant educator to child ratios is adhered to at all times
- accurate attendance records are kept by the FDC educator
- children only leave the FDC residence or venue in the care of a parent or authorised person or in accordance with written authorisation as per Regulation 99

- enrolment records are kept for each child enrolled in the FDC Service at the principal office and the FDC residence or approved venue including the name, address and contact details of
 - any emergency contacts
 - any authorised nominee
 - any person authorised to consent to medical treatment or administration of medication
 - any person authorised to give permission to the educator to take the child off the premises
 - any person who is authorised to authorize the education and care service to transport the child or arrange transportation
 - details of any court order, parenting orders or parenting plan
 - authorisations for the service to take the child on regular outings
 - authorisations for the service to take the child on regular transportation
 - any medical management plan, anaphylaxis medical management plan or risk minimisation plan
- should any serious incident occur, the FDC educator will complete an Incident, injury, trauma or illness record and provide to the Approved Provider and parent (see *Incident, Injury, Trauma and Illness Policy and Procedure*)
- in the case of a serious incident occurring, the regulatory authority must be notified within 24 hours through the [NQA IT System](#)
- all new engaged educators and staff are provided with an induction including an understanding of this policy
- all FDC educators are provided with procedures and training on how they will verify the identity of an authorised nominee or a person authorised by the parent or authorised nominee to collect the child (including procedures of what to do when an unauthorised person attempts to collect a child)

ARRIVALS AT THE FDC RESIDENCE OR APPROVED VENUE (Educator will ensure)

Our FDC Service has an obligation to ensure the health and safety of employees, children and visitors in our workplace, so far as reasonably practicable. Our FDC Service has implemented the following measures: any person visiting a FDC residence or approved venue- including families 'dropping off' children, must sign a Parent/Visitor Health Declaration by verbal, call, email, message confirming that they have not

- been in *close contact* with anyone with a positive COVID-19 diagnosis in the past 14 days
 - returned from a state or territory where self-isolation border measures are in place
- any person who is displaying symptoms such as: fever, coughing, sore throat, fatigue and shortness of breath should not attend our Service under any circumstance.

- parents and visitors are currently NOT permitted to enter the Family Day Care residence unless this is prearranged with the Family Day Care educator/Approved Provider (collection of a sick child; interview for enrolment)
- a designated area for drop off/ pick up will be clearly indicated
- signage clearly indicates the requirement of all adults to adhere to physical distancing requirements (1.5 metres)
- children will be welcomed by the FDC educator and a non-contact device used to sign their child into the service or parents are asked to bring their own pen to sign their child into the service
- the device will be disinfected between use
- all children need to be signed in by an authorised person. Note: the signing in of a child is verification of the accuracy of the record. Information required on the register includes the child's name, the date and time and the signature of the person dropping off the child
- the parent/authorised person must also advise the FDC educator/educator assistant who will be collecting the child/children
- should families forget to sign their child/children in, and their signature cannot reasonably be obtained, National Regulations require the FDC educator to sign the child in
- sign in sheets/attendance records are to be used as a record in the case of an emergency to account for all children present at the FDC service on any given day
- a child's medication needs, or any other important or relevant information should be passed on to the FDC educator by the person delivering the child
- the FDC educator will check that the family has completed an *Administration of Medication Record* and store the medication appropriately, away from children's reach
- in order for children to feel secure and safe, FDC educators should ensure children are greeted warmly and children have the chance to say goodbye to the person dropping them off. Saying goodbye helps to build trust, while parents/guardians leaving without saying goodbye could cause the child to think they have been left behind
- due to enhanced safety and hygiene measures to mitigate the risk of COVID-19, interactions with FDC educators will be limited and physical distancing will be adhered to at all times between adults
- should families require longer conversations regarding their child's care, these should be conducted via phone or email where possible
- a locker or shelf space will be made available to children and their families. A sign is posted above the lockers nominating a symbol for each child.
- in the case of a separated family, either biological parent is able to add a contact in writing unless a court order is provided to the FDC Service stating that one parent has sole custody and responsibility.

DEPARTURE (Educator and families will ensure)

FDC Educator must ensure children other than collection or delivery child must not allow to leave the premises to involve with other family members, parents of the child and should remain in supervision and inside of the FDC premises.

Parents must have to pick their children on time and must have to sign out the child on the same time. Parents requesting educators to keep children after sign out from the FDC because of their friendly relationship then it is parents' responsibility to make sure that children will remain safe and secure after hours without putting them in register or booked session of care. During this time service will not responsible for any incident happened.

Parents before Sign in and after sign out are the only responsible for the child wellbeing and safety. Even if they left child under educator care due to their family and friendly relation with the parent. Any incident happened during casual relation with family or educator will not considered as part of education and care session. No liability will be taken if parents & Educator has family relation and child left to educator as family friend.

Parents must have to ensure that if they sign out the child then child must be in their control and should follow rules made in FDC for their health and safety. Child got injured during parents' presence will be considered as parents' responsibility and service & educators are not responsible for any of that kind incident. (Nur)

- Children may only leave the FDC premises
 - in accordance with the written authorisation of the child's parent or authorised nominee named in the child's enrolment record *or*
 - taken on an excursion; **or on transportation provided or arranged by the FDC educator with the written authorisation of the child's parent or authorised nominee;** or
 - given into the care of a person or taken outside the premises; or
 - because the child requires medical, hospital or ambulance care or treatment; or
 - because of another emergency (evacuation due to bush fire, flood)
- In the case of an emergency, (because the child requires medical, hospital or ambulance care or treatment), where the parent or a previously authorised nominee (as indicated in the child's enrolment form) is unable to collect the child, the parent or person responsible for the child (as listed on enrolment form as having a parenting role) may telephone the service and arrange an alternative person to pick up the child. This contact must then be confirmed in writing to the Service (email, text or letter)
- parents are to advise their child's FDC educator if someone different is picking up their child, both verbally and on the sign in/out sheet. This person is to be named on the enrolment form or added in writing as an authorised nominee for the child.
- photo identification must be sighted by the educator before the child is released. If the educator/educator assistant cannot verify the person's identity, they may be unable to release the child into that person's care, even if the person is named on the enrolment form.

- all children must be signed out by their parent (or a person authorised by the parent) when the child is collected from our FDC Service **including each child's name, date and time they depart**. If the parent or other person forgets to sign the child out, they will be signed out by the educator
- **if tablets are used to sign children out of the service, they must be disinfected between use/ pens must be wiped with a disinfectant wipe between uses or parents are requested to use their own pen**
- children must be signed out on the same sheet that they were signed in on (date, time, signature)
- parents/authorised nominees are requested to arrive to collect their child/children by **6.00pm**.
- no child will be withheld from an authorised contact or biological parent named on the enrolment form unless a current court order is on file at the FDC Service (copy provided to the FDC educator) if any parent will not or forget to provide the court order to FDC educator than service or educator will not responsible for child handover.
- in the case of a particular person (including a biological parent) being denied access to a child, the service requires a written notice (court order) from a court of law.
 - the educator will attempt to prevent that person from entering the service and taking the child; however, the safety of other children must be considered.
 - FDC educators/educator assistants will not be expected to physically prevent any person from leaving the service
 - in such cases, the parent with custody will be contacted along with the local police and appropriate authorities
 - where possible the educator will provide police with the make, colour, and registration number of the vehicle being driven by the unauthorised person, and the direction of travel when they left the Service
 - a court order overrules any requests made by parents to adapt or make changes. For the protection of the children and educators, parents are asked not to give **our front door code** to anyone other than those absolutely necessary.
- in the case of a serious incident occurring, as described above, the regulatory authority must be notified within 24 hours through the [NQA IT System](#)
- the FDC educator will ensure that the authorised nominee pick-up list for each child is kept up to date. It is our policy that we do not allow anyone **under the age of 16** to collect children.
- if the person collecting the child appears to be intoxicated or under the influence of drugs, and educators feel that the person is unfit to take responsibility for the child, educators will:
 - discuss their concerns with the person, without the child being present if possible, and
 - suggest they contact another parent or authorised nominee to collect the child
 - follow procedures to protect the safety of children and staff of the education and care service as per Child Protection Law and Child Protection Policy
 - contact the Police and other regulatory authorities

- o the FDC educator will also inform the Approved Provider/Coordinator of the incident
- children may leave the premises in the event of an emergency, including medical emergencies outlined in our *Emergency Evacuation Policy*.
- details of absences during the day will be recorded.

SCHOOL AGED CHILDREN

If a child is attending the FDC Service for before and/or after school care, the educator is responsible for:

- signing the child 'out' of care upon dropping the child to school and 'in' care upon collecting the child from school
- ensuring they have contact details and timetables for the bus operator if the child is using School Bus transportation
- ensuring they have school contact phone numbers in case of an emergency
- ensuring they know the safest walking route to and from school if the child is authorised to walk to school
- following steps should the child not arrive home by the expected time (including contacting the school; contacting the parent/s; contacting the coordinator; notifying Police and if a serious incident has occurred- notifying the Regulatory Authority)

Parents will provide a signature or initial the educator's records upon collecting their child at the end of the day.

If Educator is picking child from home as part of the transportation of children, then Educator will sign in the child when he/she will reach to FDC premises. Child sign out then will be done when child will reach to school. Again, child will be sign in when will collected from the school and then parents will sign finally when they will receive the child.

If educator is transporting children to facilitate the parents/families or children then not liability or responsibility will be taken till children are not sign in and taken as part of Education and Care in FDC.

VISITORS

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

- signage will clearly indicate who is permitted to enter the FDC service
- signage will alert all adults to adhere to physical distancing requirements
- all visitors must adhere to our *Handwashing Policy* and wash their hands upon arrival and departure of the service

LATE COLLECTION OF CHILDREN

- if parents/guardians know they are going to be late, they must notify the FDC educator and make arrangements for someone else authorised to collect child
- if parents/guardians have not arrived by 6:00pm, the FDC educator will attempt to contact them via telephone. If the FDC educator or Coordinator is unable to contact parents/guardians and the child has not been collected, alternative contacts as listed on the enrolment form will be contacted to organise the collection of the child
- late collection fees may be charged if a child
- due to licensing and insurance purposes, if by 6:00pm neither the parent/guardian or any authorised nominee are available or contactable and the educator has other commitments, the Coordinator/Approved Provider may need to contact the police and other relevant authorities.
- where families are continually late to collect children, a *Late Collection of Children* letter will be presented to parents/guardians
- should this non-compliance continue, the FDC Service reserves the right to terminate a child's enrolment.
- Children collected late due to family relation with educator and if it's not part of education and care then not responsibility and responsibility will be taken once child is not part of Education and care in FDC & educator finish the day of care.

SOURCE

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

Australian Children's Education & Care Quality Authority (ACECQA). 2020. Policy and Procedure Guidelines. *Delivery to, and Collection from Education and Care Services*.

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

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

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

Education and Care Services National Regulations. (2011)

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

Guide to the National Quality Framework. (2018). (Amended 2020).

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

Revised National Quality Standard. (2018).

Safe Work Australia (2020)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2021/JAN 2022	NEXT REVIEW DATE	JANUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Policy reviewed to align with Policy Guidelines from ACECQA August 2021 • Additional section added for Approved Provider/Nominated Supervisor/Responsible Person roles • minor edits to reflect changes to ECEC services re: COVID-19- statements in red must be contextualised to each FDC Service (see State/Territory requirements) • Policy reviewed as part of annual policy review. No additional changes 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JANUARY 2021	<ul style="list-style-type: none"> • review of policy regarding COVID-19 restrictions/guidelines for ECEC services- statements in red may be adjusted to suit individual services in each state/territory 		JANUARY 2022
JUNE 2020	<ul style="list-style-type: none"> • addition to introduction of policy • updated to include risk mitigation measures for arrival and departure due to COVID-19 • additional hygiene procedures added- re handwashing • additional related policies • additional sources added- • link to National Regulations • R99 (4)(b) reasons why a child may leave premises • School aged children section added 		JANUARY 2021
JANUARY 2020	<ul style="list-style-type: none"> • Additional relevant regulations added • Related policies updated • Late Collection information added and reworded • Sources checked for currency 		JANUARY 2021
JANUARY 2019	<ul style="list-style-type: none"> • Introductory statement and purpose re-written. • Additional information added to points. • Rearranged the order of points for better flow • Points added (Highlighted). • Sources/references alphabetised. 		JANUARY 2020

JANUARY 2018	<ul style="list-style-type: none"> Minor changes made to support compliance Related policy section added 	January 2019
JANUARY 2017	<ul style="list-style-type: none"> Minor modifications made to comply with NQS changes 	JANUARY 2017
MAY 2017	Amendments made to comply with Family Day Care requirements	TBA

2.3 MANAGING AN AGGRESSIVE PARENT POLICY

Our Family Day Care (FDC) Service aims to establish and maintain positive and open relationships with all parents of enrolled children. However, we understand that on occasion there may be times when a parent or visitor arrives at our FDC Service displaying aggressive, difficult, or challenging behavior. Our FDC Service is committed to maintain a safe workplace for all FDC educators, Educator and visitors and ensure FDC educators have the skills to safely prevent and de-escalate aggressive behaviors. Workplace violence can be any incident where a person is abused, threatened, or assaulted whilst engaged in work. We do request to parents to call to service management then showing aggression to Educator because of wellbeing of other children, FDC educator and other families. Aggression is un acceptable and police may be called and report will be sent to department of Education if parents are using any type of aggression, then following proper channel of complaint policies to solve the problems. All parents will have opportunities WILL BE provided to solve their concern and service provider will do it full of honesty and gentility. Parents don't need to worry about whether they will be heard or not. Service will provide full guidance and support to resolve their matter without being biased. Service has zero tolerance policy and Parents may be asked to leave the FDC and enrolment may be terminated for the safety and security of other children, parents, FDC educator of for the wellbeing of aggressive parents as well though all Educators are being trained and informed to respect and care all families and their members.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.2	Safety	Each child is protected

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
170	Policies and procedures must be followed
173	Prescribed information to be displayed

RELATED POLICIES

Code of Conduct Policy Dealing with Complaints Policy (Families) Enrolment Policy	Family Communication Policy Interactions with Children, Family and Educator Policy Privacy and Confidentiality Policy
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PURPOSE

Our Family Day Care Service aims to ensure that all Educator members have skills and understanding of conflict resolution strategies to manage situations involving angry or aggressive parents or visitors.

SCOPE

This policy applies to families, visitors, educators, educator assistants, approved provider, nominated supervisor, management and Educator of the Service.

IMPLEMENTATION

Parents have the right to make a complaint or report a concern to our Family Day Care Service at any time. Complaints may be real or perceived, and of a serious nature or more trivial nature (but important to them) such as not being able to quickly find their child's shoes at the end of the day. However, on occasion a parent's feelings may escalate into anger or aggression, not necessarily due to the concern at hand, but due to other events or situations they have had to already deal with that day, or due to the effect of drugs or alcohol or mental health.

WHAT IS 'AGGRESSIVE BEHAVIOUR' OR 'WORKPLACE VIOLENCE'?

Within this policy, aggressive behaviour or workplace violence could include, but is not limited to:

- verbal abuse and threats
- intimidation and insults
- angry and hostile behaviour
- shouting and swearing
- stamping feet
- physical violence

- threatening behaviours

These behaviours could be caused due to:

- frustration
- intoxication
- substance misuse or abuse
- psychological imbalances or disturbances

MANAGEMENT WILL ENSURE THAT:

- violence and aggression toward FDC educators and/or Educator are treated like any other hazard
- a risk assessment is conducted to identify possible hazards and identify control measures
- a procedure/plan is developed to de-escalate any aggression or violence and ensure the safety and wellbeing of FDC educators and Educator
- all FDC educators and Educator are familiar with this policy and are provided with opportunities to review and modify this policy
- FDC educators and Educator are provided with training to learn skills to safely prevent and de-escalate aggressive behaviours- such as conflict resolution
- FDC educators and Educator involved in a situation involving an angry or aggressive parent or visitor will be provided time for a debrief session following the event with a FDC Coordinator and/or offered professional support
- families are clearly informed, that any aggressive behaviour towards Educator will not be tolerated.
- aggressive parents who want decision according to themselves & threaten educator and service to post review on social media without having a healthy conversation with the service coordinator/nominated supervisor will be answered according to right of reply. So, parents / Guardians must have to communicate positively any of their concern with the service coordinator if they are not satisfied with the response of educator to remain comply with service policy and procedure (NUR).
- FDC educator refuse to deliver the child/ren to the intoxicated parent and then call to authorise nominee to collect the child/ren from the FDC. on the same time educator must have to report to the service through email about the incident. (NUR)
- families are made aware of our *Dealing with Complaints Policy* and *Code of Conduct* at time of enrolment of their child
- the name and telephone number of the person to whom complaints can be made is clearly visible at our FDC service.

FDC EDUCATORS/EDUCATOR

Should a situation arise where a FDC educator or Educator member is confronted by an aggressive or violent parent or visitor, they will:

- remain calm
- implement strategies to de-escalate the aggressive behaviours
- advise the parent or visitor that you will get the Nominated Supervisor/ FDC Coordinator /appropriate person to come and speak to them
- offer and encourage the parent or visitor to discuss the matter at another time when children are not present
- calmly tell the parent or visitor that you are prepared to listen, but the interview cannot continue if he/she continues to use a raised voice or inappropriate language
- if the same behaviour continues, advise the parent or visitor that they need to leave the FDC residence/ approved venue
- ensure children are removed from the area/room if a parent or visitor becomes hostile in an area where children are located
- advise the parent or visitor that the police will be contacted if they are refusing to leave the FDC residence/ approved venue

When you feel the parent or visitor has calmed down enough to discuss the issue:

- remain calm
- be aware of what you say and how you say it (tone of voice)
- do not be provoked into getting into an argument
- listen effectively and allow the parent to talk without interrupting
- when the parent or visitor has got the main facts 'off their chest', restate what you believe the problem to be politely and respectfully
- ask relevant questions to clarify any issues
- as soon as the issue has been clarified begin to work on a solution: Note, do not give excuses as to why something may or may not have happened as it may anger the parent or visitor again. Instead, focus on moving forward with strategies the parent or visitor will accept to solve the problem.
- when discussing solutions clearly explain any limitations of the FDC Service (regulations, policies and procedures)
- refer to *Dealing with Complaints Policy* (family) for information about procedural fairness, strategies and practices to promote conflict resolution

Dealing with difficult, challenging and aggressive behaviours can have a huge impact on FDC educator or Educator's wellbeing.

Following the incident Management will ensure the FDC educator or Educator involved will:

- be provided with a ‘debriefing’ time. This may be talking to a manager or colleague, or simply moving off the floor for a short time
- document the incident and provide management with a copy
- follow up on anything agreed to with the parent or visitor or monitor that a FDC Coordinator / management follows up in a timely manner
- be aware of any modifications to care or procedures and have a thorough understanding of the situation
- respect the confidentiality and/or privacy rights of the parent, family or visitor
- evaluate the risk assessment for the FDC Service regarding aggression and/or violence.

SOURCE

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Kearns, K. (2010). *The big picture: Working in children’s services series*. Frenchs Forest, NSW: Pearson Australia.

NSW Ombudsman. (2014). Model guidelines – Managing and responding to threats, aggressive behaviour and violence from members of the public.

Waniganayake, M., Cheeseman, S., Fenech, M., Hadley, F., & Shepherd, W. (2012). *Leadership: Contexts and complexities in early childhood education*. South Melbourne, Victoria: Oxford University Press.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JANUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • New Policy developed for FDC Services 		

2.4 EMERGENCY AND EVACUATION POLICY

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place for emergency and evacuation and take reasonable steps to ensure policies and procedures are followed. (ACECQA, 2021).

Emergency and evacuation situations in early education and care services may arise for a variety of reasons, often suddenly and unexpectedly. It is vital that if an emergency arises educators are confident to manage the situation effectively and efficiently, maintaining the safety and wellbeing of children, families, and visitors.

Ensuring that educators and children know what to do in an emergency requires vigilant planning and practice. Regularly practicing the drills for emergency situations also provides an opportunity to help support and build on children’s coping mechanisms and resilience. All Educators must have to practices for emergency and evacuation including lockdown procedure so children can be safe and secure and can understand the mean of evacuation procedure. Educator ignoring the procedure times and not including children and found guilty by department will be responsible for all penalties imposed by department of education to the service due to negligence of Educator.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
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	
12(d)	Meaning of a serious incident- any emergency for which emergency services attended
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
168	Education and Care Services must have policies and procedures

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

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of First Aid Policy Arrival and Departure Policy Bush Fire Policy Child Safe Environment Policy Enrolment Policy Family Communication Policy	Health and Safety Policy Incident, Illness, Injury and Trauma Policy Lockdown Policy Retention of Records Policy Supervision Policy
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PURPOSE

Nurture Childcare and Education Services has a duty of care to maintain the safety and wellbeing of each child, the educator, and all persons residing or visiting the FDC residence during an emergency or evacuation situation. We are committed to identifying risks and potential hazards of emergency and evacuation situations by conducting thorough risk assessments on an annual basis and continually planning for further risk minimisation and improvement to our policy and procedures.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

We define an emergency as an unplanned, sudden or unexpected event or situation that requires immediate action to prevent harm, injury, or illness to persons, or damage to the FDC Service's premises. Emergency situations may pose a risk to an individual's health and safety. It is important that FDC Services identify potential emergencies that may be specific to their location and environment.

An emergency is any event, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of children at the service. (Guide to the NQF)

Circumstances under which an emergency evacuation will occur may include:

- Fire within the residence/building or surrounding garden/backyard
- Fire in the surrounding area where the residence or venue may be in danger
- Flood
- Cyclone, severe storm or dust storm or other natural weather event

- dangerous animal, insect or reptile
- Terrorist threat
- Other circumstances may include:
 - gas explosion, traffic accident, or any event which could render the building unsafe (eg: earthquake).

[Our Bushfire Policy contains specific information about Bushfire Risk Management Plans and evacuation plans for Bush Fires.]

To ensure compliance with National Regulations, our FDC Service will ensure that:

- emergency and evacuation policies and procedures are available for inspection at the FDC residence/venue at all times
- the Approved Provider and FDC educator conduct a risk assessment to identify potential emergencies that are relevant to the approved residence/venue annually
- educators are assisted to develop evacuation plans and procedures and to identify a safe area in the residence or venue in case of a situation that would require a 'lockdown emergency'
- relevant stakeholders/authorities are consulted for advice and guidance to improve risk mitigation strategies as part of our emergency and evacuation plan (police, fire, parents/families)
- consideration is made to evacuate infant/s and non-ambulant children evacuating the premises resulting in enhanced ratios
- additional consideration is made for FDC services operating in multi-storey residence or buildings (assembly areas, stairwells, non-ambulant children, supervision) [Reg. 97(4)]
- emergency evacuation plans are displayed in prominent positions near each exit and in rooms occupied by the children
- the plan includes a floor plan for ease of reference with clearly defined assembly points and clearly marked exit routes in case of an emergency
- the emergency and evacuation procedures include instructions for what must be done in the event of an emergency
- emergency evacuation rehearsals (drills) will be practiced and reviewed every three months by the FDC educator, educator assistant, students, volunteers, and children present on the day
- FDC educators, educator assistants, coordinators and volunteers are aware of emergency evacuation procedures and regulatory requirements
- FDC educator and educator assistants are aware of their responsibilities and roles in the event of an emergency situation- including evacuation and lock downs
- there is an induction process in place to inform educators, educator assistants, coordinators, students and volunteers of the emergency and evacuation policy and procedure
- each drill is documented, and records kept at both the FDC residence and principal office

- in the case of Bush Fire emergency, the FDC principal office maintains a current data base of all residences and their locations living in bushfire prone areas (see *Bush Fire Policy*)
- a risk assessment is conducted following any emergency evacuation to ensure the FDC residence is safe to continue to provide education and care to children
- an emergency telephone list (located next to the telephone) includes the numbers for:
 - Police
 - Local fire station
 - Rural Fire Service
 - State Emergency Services (SEs)

EDUCATORS WILL:

- maintain an up-to-date register of emergency telephone numbers for all children and provide a copy to be kept at the principal office
- ensure a copy of the register of emergency telephone numbers is kept in an *Emergency Evacuation Bag* along with a portable first aid kit, copy of the emergency procedure
- ensure they are contactable whilst children are in attendance by emergency services (i.e.: have a mobile phone charged and accessible)
- display emergency telephone numbers prominently in the kitchen, office and each room that is occupied by children in the residence/or venue
- rehearse, document and evaluate emergency evacuation procedures **every 3 months**. To ensure best practice we will conduct emergency evacuation drills in a weekly block once a term so that all children experience an evacuation on a regular basis
- ensure spontaneous rehearsals also take place during the year to assist in refining risk management procedures and evacuation procedures
- time the planned or spontaneous emergency evacuation drill and document in the *Emergency Evacuation Rehearsal Record*
- after reflection, notes on any areas that need improving or revising are to be documented in the *Emergency Evacuation Rehearsal Record*. Educators will discuss with the Approved Provider/Nominated Supervisor and implement strategies to make continuous improvement to procedures which will be documented in the Service's Quality Improvement Plan (QIP).
- maintain a record ensuring that all children participate in the emergency evacuation rehearsal at least **4 times** per year
- consider how to safely evacuate infant/s and children with any disabilities (include in your procedure)
- keep children calm during evacuation drills
- ensure all exits have exit signs displayed clearly
- ensure there are no obstructions in hallways, stairways prevent access to exits

- ensure the sign-in book is completed daily to be used as an attendance roll
- keep a written record of all visitors to the FDC residence
- ensure all children, family members and any visitors are accounted for during the day
- communicate with families when evacuation drills have taken place to discuss with children
- ensure assembly area is clearly identified and checked regularly (update plan if an alternative location may be required- depending on the reason for evacuation)
- ensure all fire extinguishers, fire blankets, fire hoses, and other emergency equipment located throughout the residence are inspected and tested at six monthly intervals by an authorised company as per the Australian Safety Standard AS 1851-2012: *Maintenance of Fire Protection Systems and Equipment*.
- ensure extinguishers are emptied, pressure tested, and refilled every five years
- ensure all tests performed on emergency equipment and the date on which it was tested is recorded on a label or metal tag attached to the unit. Certificates to verify testing will be filed and provided to the principal office of the FDC service
- ensure smoke detectors are regularly tested and batteries replaced annually
- ensure educator assistants and visitors to the FDC Service are familiar with the *Emergency Evacuation Policy* and procedure

Once an emergency situation is over, the educator will collaborate with the Approved Provider to conduct a thorough evaluation of the emergency procedure, actions and communication implemented to determine if any changes need to be made.

Families will:

- ensure contact details are kept up to date
- provide emergency contact details on their child's enrolment form and advise the FDC educator and principal office of any change of name or phone number
- ensure the attendance record for their child is completed each day
- ensure they are aware of the service's *Emergency and Evacuation Policy* and procedures
- follow the directions of the FDC educator or coordinator in the event of an emergency or evacuation

EVACUATION PROCEDURE

In the event of an emergency, the educator will make the decision to evacuate. The educator may be notified of the need to evacuate by: Emergency Services if an emergency situation is announced (bush fire, flood, damaging winds/storm).

The educator will:

- calmly inform children and visitors and other residents of the FDC residence to evacuate
- move all children to evacuation assembly location taking emergency evacuation bag (ensure sign in book/record, gather medication, visitor sign in sheets)
- request assistance to move infants or children with disabilities from other adults in the home/ educator assistant or emergency services if unable to complete the evacuation on their own
- check that all children and adults registered in attendance book are accounted for
- once children are safely evacuated, administer first aid if required
- call 000 and provide their name, address and nearest cross street, reason for emergency, mobile phone contact number, number of children evacuating
- notify the Approved Provider/Coordinator of the evacuation (only if children's safety is not compromised)
- if the identified evacuation assembly area is not accessible, identify an alternative area where children and other adults will be safe. Communicate with emergency services to confirm your assembly area
- remain calm and reassure children
- once emergency services arrive, request assistance with supervision and contact parents/emergency contacts
- notify FDC approved provider/coordinator of the evacuation
- once area is confirmed to be safe by emergency services, return to the residence with children and visitors
- ensure attendance is checked against register
- In the event of a fire within the service resulting in damaged phone lines, the educator may evacuate the children and seek assistance from neighbouring residents and / or use the mobile phone as per the Emergency Evacuation Plan

Important:

Following the emergency evacuation, the educator will complete an *Emergency Evacuation Incident Report* and an *Incident, Injury, Trauma and Illness Record*. The approved provider will make a notification of a serious incident to a regulatory authority (within 24 hours) through the [NQA IT System](#) when emergency services have attended an education and care service in response to an emergency, rather than as a precaution or for any other reason.

LOCKDOWN PROCEDURE

In the event of a situation where there is immediate threat or danger to the educator and children,

a 'lock down' will be implemented. The educator will have identified a safe room for this purpose as part of the Emergency Plan. A safe room should have doors that can be locked from the inside and have limited or no windows. (see *Lockdown Policy* for further information)

The educator will:

- calmly move children inside the residence to a designated area (as indicated in the Emergency Plan).
- move babies and children with mobility disabilities to designated area
- inform children- *'this is a lockdown, stay calm and quiet'* (as per drills)
- do not let the unauthorised person/s into the residence
- conduct a head count and check attendance against sign in register
- lock external doors, window and close blinds and turn off lights
- turn mobile phone onto silent/vibrate
- contact 000 stating the name and address of the service, the nature of the emergency, the nearest cross street, the number of children and adults in lockdown
- reassure children
- wait for emergency services arrive and provide clearance
- once cleared by emergency services, contact Approved Provider of FDC Service
- ensure all families are notified of the incident as soon as practicable after the lockdown has ended (consult with the Coordinator/Approved Provider for guidance)
- assist the Approved Provider to complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children

DEALING WITH TRAUMA

Emergencies and natural disasters are extremely stressful, and it is normal for children and adults to feel overwhelmed and distressed. People cope with trauma in many different ways. Children look to adults for reassurance, care and opportunities to share their feelings. It is important for FDC educators to understand the impact of disasters and seek help when needed.

The FDC Approved Provider/Nominated Supervisor will support educators to provide information to parents and families following any emergency or natural disaster including:

- will the service be open in the days and weeks ahead?
- how to find alternative care and education
- how to contact services for support with dealing with trauma

Several organisations offer support for educators in these situations:

[Emerging Minds](#)

BeYou- [Trauma informed practice](#)

PREPARING FOR AN EMERGENCY

Australian Government Department of Education, Skills and Employment Resources

<https://www.dese.gov.au/child-care-package/ccp-resources-providers/help-emergency>

Australian Government Bureau of Meteorology <http://www.bom.gov.au/>

JURISDICTION SPECIFIC WEBSITE DETAILS FOR EACH STATE

AUSTRALIAN CAPITAL TERRITORY (ACT)
ACT Police: www.police.act.gov.au ACT Rural Fire Service: http://esa.act.gov.au/actrfs/ ACT State Emergency Service: http://esa.act.gov.au/actses
NEW SOUTH WALES (NSW)
NSW Police: www.police.nsw.gov.au NSW Rural Fire Service: www.rfs.nsw.gov.au NSW State Emergency Services: www.ses.nsw.gov.au
NORTHERN TERRITORY (NT)
Northern Territory Police, Fire and Emergency Services: www.pfes.nt.gov.au
QUEENSLAND (QLD)
Queensland Police: www.police.qld.gov.au Queensland State Emergency Services www.ses.qld.gov.au Rural Fire Service: www.ruralfire.qld.gov.au
TASMANIA (TAS)
State Emergency Service Tasmania: www.ses.tas.gov.au Tasmanian Fire Service: www.fire.tas.gov.au Tasmanian Police: www.police.tas.gov.au
VICTORIA (VIC)

Country Fire Authority Victoria: www.cfa.vic.gov.au
 Victoria Police: www.police.vic.gov.au
 Victoria State Emergency Service: www.ses.vic.gov.au

WESTERN AUSTRALIA (WA)

Department of Fire and Emergency Services: www.dfes.wa.gov.au
 State Emergency Service:
<https://www.dfes.wa.gov.au/aboutus/operationalinformation/Pages/stateemergencyservice.aspx>
 WA Police: www.police.wa.gov.au

SOUTH AUSTRALIA (SA)

Country Fire Service: www.cfs.sa.gov.au
 South Australia Police: www.police.sa.gov.au
 South Australian State Emergency Service: www.ses.sa.gov.au

SOURCE

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

Australian Children’s Education & Care Quality Authority. (2021). Policy and procedure guidelines- *Emergency and evacuation guidelines*.

Australian Government Department of Education, Skills and Employment (2020). Help in an emergency

Australian Government – Emergency Services: <http://www.australia.gov.au/information-and-services/public-safety-and-law/emergency-services>

Early Childhood Australia Code of Ethics. (2016).

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

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

Fire Protection Association Australia: www.fpaa.com.au/

Fire System Services: <http://www.firesys.com.au/Fire-Extinguisher-Service-and-Maintenance-pg14686.html>

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

Guide to the National Quality Framework. (2018). (amended 2020).

NSW Rural Fire Service: www.rfs.com.au

Revised National Quality Standard. (2018).

Work Health and Safety Act 2011.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2021/April 2022	NEXT REVIEW DATE	October 2023
MODIFICATIONS	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA <i>Emergency and Evacuation Policy Guidelines</i> (June 2021) Additional legislative requirements added Additional related policies 		

	<ul style="list-style-type: none"> Additional section added- <i>Families will</i> Reviewed as part of annual review cycle 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
October 2021	<ul style="list-style-type: none"> minor editing additional regulations and related policies added definition of emergency section moved to beginning of policy 	September 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> additional sections added to assist FDC educators in planning, rehearsing and conducting an emergency evacuation -Procedures for Evacuation and Lock Down -Dealing with Trauma -resources to assist with trauma added 	JANUARY 2021
JANUARY 2020	<ul style="list-style-type: none"> Additional information added to introduction Purpose modified Additional information added to content Sources checked for currency- small edits highlighted 	JANUARY 2021
JANUARY 2019	<ul style="list-style-type: none"> Places to insert emergency phone numbers deleted & point added to ensure these numbers are on the emergency phone list by the phone Rearranged the order of some points for better flow. Points added (highlighted). Sources/references corrected, updated, and alphabetised. Sources/references alphabetised. Minor formatting (line spacing & paragraph spacing) for consistency throughout policy. 	JANUARY 2020
JANUARY 2018	<ul style="list-style-type: none"> Minor adjustment in Education and Care Services National Regulations section Added related policy section Adjustment on page two in respect of revised NQS 	JANUARY 2019
OCTOBER 2017	<ul style="list-style-type: none"> Updated the references to comply with revised National Quality Standard 	JANUARY 2018
JANUARY 2017	<ul style="list-style-type: none"> updated and included Emergency Evacuation requirements outlined in the National Regulations 	JANUARY 2018
AUGUST 2017	<ul style="list-style-type: none"> Updated to meet the National Law and/or National Regulations in respect of a serious incidents and notification purposes. 	

2.5 LOCKDOWN POLICY

Under the *Education and Care Services National Regulations* the approved provider must ensure that policies and procedures are in place for emergency and evacuation situations (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170) (ACECQA 2021).

Our Family Day Care Service (FDC) is committed to the ongoing safety and wellbeing of children, staff, families and visitors. To achieve this, we will implement a clear plan to manage all emergency situations, including a plan for emergencies that may require our FDC educators to go into lockdown. We will ensure our FDC educators and educator assistants, are well equipped with the knowledge and expertise to respond effectively when required. Educators and children will regularly rehearse emergency procedures, including lockdown to ensure their safety and wellbeing.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
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	
12(d)	Meaning of a serious incident- any emergency for which emergency services attended
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
168	Education and Care Services must have policies and procedures
170	Policies and procedures are to be followed
171	Policies and procedures to be kept available

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Arrival and Departure Policy Child Safe Environment Policy Emergency Evacuation Policy Family Communication Policy	Health and Safety Incident, Injury, Trauma and Illness Policy Retention of Records Policy Supervision Policy
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PURPOSE

Nurture Childcare and Education Service aim to minimise the risk of harm, ensuring the safety of children, FDC educators, educator assistants, families and visitors of the Family Day Care Service in the event of a threatening situation.

SCOPE

This policy applies to the **Approved Provider, Nominated Supervisor, Coordinator, Educators, Educator Assistants, children, families, and visitors (including contractors) of the Family Day Care Service.**

IMPLEMENTATION

Our FDC educators have set procedures to follow in the event of any emergency requiring evacuation or lockdown at their residence or venue. These procedures comply with regulatory requirements and are consistent with recommendations by recognised authorities. They are designed to ensure an efficient, safe, and calm procedure for all children, educators, educator assistants, families, visitors and family members residing at the FDC residence.

Whilst many emergency situations will require the educator and children to evacuate from the residence or venue, there are potential situations that will require a 'lockdown' situation.

Within early childhood services there are three types of *lockdown* that may be required:

- **'External threat'** indicating that there is a potential threat outside that you wish to prevent from entering the premises. For example:
 - unidentified dangerous animal or insects
- **'Shelter-in-place'** which generally will be required when there is a real or perceived threat to health or safety. For example:
 - Severe storms
 - Extreme smoke from a local or distant bushfire
 - Chemical or hazardous substance spill
 - Gas leak / atmospheric hazardous substance

- Flood
- **'Full lockdown'** for situations that involve serious threats such as:
 - Potentially dangerous unwanted or uninvited intruder
 - Potentially dangerous person due to intoxication or substance abuse
 - Receiving an emergency services warning about a reported incident or civil disturbance

Lockdown means that all windows and external doors are locked, and where possible internal doors are locked, and blinds closed.

For a *'shelter-in-place'* or *'external threat'* lockdown, children are able to participate in the usual experiences and activities: However, for a *'full lockdown'* children and adults must be moved to a room/position that does not allow them to be viewed.

Where possible access should be maintained to a bathroom and enough space should be available for children to be comfortably involved in quiet activities. It is therefore vital that an appropriate space/room has been identified and displayed on an Emergency Lockdown Procedure. **This information must be displayed in a prominent position near each exit at the premises in relation to regulation 97(4). This information can be displayed on the back of the Evacuation Plan, which can then be quickly taken from the wall when required. This act will ensure that in a situation involving unwanted visitors, or previous visitors that have now returned with malicious intent, that the plan is not visible or available.**

THE APPROVED PROVIDER, COORDINATOR AND FDC EDUCATOR WILL:

- develop, and annually review, a risk assessment to identify potential emergencies that may require a FDC educator to go into lockdown (a risk assessment is required for each FDC educator's residence or venue)
- engage relevant stakeholders/authorities to improve risk mitigation strategies for lockdown situations as part of an Emergency Management Plan for each FDC educator's residence/venue (fire, police, families, FDC coordinator, Approved Provider)
- identify a safe area in the residence in case of a situation that would require a 'lockdown emergency'
- ensure capacity to lock internal doors within the residence/venue
- consider procedures for non-ambulant children and implications for the FDC educator in the event of a lockdown (especially for a multi-story setting)
- ensure students and educator assistants are provided with information and training about lockdown procedures upon induction
- ▶ ensure emergency evacuation **floor plans and instructions**/procedures are displayed in prominent positions near each exit and outdoor learning environments **(Lockdown information should be displayed on the back of this plan)**

- ensure that educator assistants (if applicable) and family members living in the residence, are aware of the alert signal and procedure for lockdowns
- design a movement and wellbeing plan to follow
- develop an effective strategy for checking the roll and communicating with children, educator assistants, visitors and other family members at the residence/venue
- document roles and responsibilities of self and educator assistant (if applicable)
- plan to maintain children's safety
- ensure lockdown drills are practiced **every three months** at different times to ensure all children have the opportunity to participate
- ensure lockdown drills are reviewed and reflected upon each time they occur and are adequately documented including any improvements
- communicate with families about lockdown procedures and drills whenever these occur

IN THE EVENT OF A LOCKDOWN THE FDC EDUCATOR WILL:

- calmly move children inside the residence to a designated area (as indicated in the Emergency Plan).
- move babies and children with mobility disabilities to designated area
- ensure other family members residing in the residence are aware of the lockdown situation and required procedures/roles
- inform children- *'this is a lockdown, stay calm and quiet'* (as per drills)
- do not let the unauthorised person/s into the residence
- conduct a head count and check attendance against sign in register
- lock external doors, window and close blinds and turn off lights
- turn mobile phone onto silent/vibrate
- contact 000 stating the name and address of the service, the nature of the emergency, the nearest cross street, the number of children and adults in lockdown
- reassure children
- wait for emergency services arrive and provide clearance
- once cleared by emergency services, contact Approved Provider of FDC Service
- ensure all families are notified of the incident as soon as practicable after the lockdown has ended (consult with the Coordinator/Approved Provider for guidance)
- assist the Approved Provider to complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children

ADDITIONALLY, DURING A SHELTER-IN-PLACE LOCKDOWN, THE FDC EDUCATOR WILL:

Use any available linen to block gaps around doors or window to minimise the entry of smoke/hazardous chemicals.

ADDITIONALLY, DURING A FULL LOCKDOWN, THE FDC EDUCATOR WILL:

- turn off all lights
- clear any room/hallway that cannot be secured
- silence television and radio/CD player
- silence mobile devices such as phones
- ensure all children remain low away from doors and windows
- encourage all children to remain quiet: Have books ready for children to look at to assist with engaging them during the lockdown
- ensure all children and any other person in the room to remain out of sight of external windows and glass doors, and internal viewing windows
- ensure all families are notified of the incident as soon as practicable after the lockdown has ended (consult with the Coordinator/Approved Provider for guidance)
- assist the Approved Provider to complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children
- cooperate with the Approved Provider to provide opportunities for debriefing and counselling for families and children

RESOURCE

Emergency lockdown rehearsal record- Childcare Centre Desktop

[Lockdown Procedure – Childcare Centre Desktop](#)

SOURCE

[Australian Children’s Education and Care Quality Authority. \(2021\). Emergency and Evacuation Policy Guidelines.](#)

ADT. (2019). Best practices for campus and school lockdown procedures:

Australian Government Department of Education, Skills and Employment (2020). Help in an emergency

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

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

Guide to the National Quality Framework. (2018). (Amended 2020)

Kearns, K. (2017). *The Business of Childcare* (4th Ed.).

Queensland Government Natural disaster resources

<https://education.qld.gov.au/initiativesstrategies/Documents/children-natural-disaster-strategies.doc>

Revised National Quality Standard. (2018)

Victoria State Government Department of Education and Training (2018). *Responding to Intruder Threat Guidelines for Early Childhood Services and Schools*.

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	September 2022	NEXT REVIEW DATE	October 2023
MODIFICATIONS	<ul style="list-style-type: none"> Content reviewed regarding placement of Lockdown Procedure. Procedure to be displayed in a prominent position near each exit- (as advised by NSW Regulatory Authority) Link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
September 2022	<ul style="list-style-type: none"> Policy reviewed as part of annual cycle Sources checked for currency No major changes 		October 2023
October 2021	<ul style="list-style-type: none"> Additional points added to various sections as highlighted Amendments to reflect FDC services/individual FDC educators Sources updated and additional references added minor editing throughout 		October 2022
October 2020	<ul style="list-style-type: none"> Additional information added to points New content added (highlighted) Sources/references corrected and updated 		October 2021
September 2019	New policy drafted for Family Day Care services		October 2020

2.6 NAPPY CHANGE AND TOILETING POLICY

Our Family Day Care Service aims to ensure Family Day Care educators meet the needs of children by providing a clean, safe, and hygienic place for nappy changes and toileting in their residence or venue. We believe that nappy-changing and toileting rituals provided in a caring and responsive manner are valuable opportunities to promote children's learning, meet individual needs, and to develop strong relationships with children.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.

2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	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 Educator are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
115	Premises designed to facilitate supervision
116	Assessments of family day care residences and approved family day care venues
155	Interactions with children
156	Relationships in groups

RELATED POLICIES

Control of Infectious Diseases Policy Family Communication Policy Interactions with Children, Families and Educator Policy	Hand Washing Policy Health and Safety Policy Supervision Policy
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PURPOSE

We aim to ensure best practice guidelines are adhered to for nappy changing and toileting, ensuring that bathrooms used by children and nappy change areas are maintained in a hygienic state in order to eliminate or reduce the spread of infectious disease. Our FDC Service will also ensure that the nappy change and toileting routines implemented are used as an opportunity for one-on-one positive interactions between the FDC educator and child.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Nappy changes and toileting routines are incorporated into the FDC educator's routine, both at designated times and throughout the day to meet children's individual needs. Educators will communicate with parents to develop continuity between their FDC service and home in regard to their child's nappy change and toileting practices. FDC educators will develop a toileting plan in consultation with parents to develop a consistent approach to toilet training. Educators/educator assistants must be responsive to special requirements related to culture, religion, or privacy.

Toileting and nappy changing will be carried out at frequent intervals throughout the day. Children who are in nappies will have each nappy change recorded in the Nappy Change Register by the FDC Educator. This is available for parents to sight. The FDC Educator will monitor the progress of a child's toilet training and provide information to parents of how many times the child actually sat on the toilet or managed to use the toilet in a day.

Having their needs met quickly and in a caring responsive way builds children's sense of trust and security. It is also important to remember that the way that educators react to soiled or wet nappies, toileting needs, and toileting accidents give children powerful messages about themselves and their bodies.

Nappy changing and toileting routines are an excellent opportunity for educators/educator assistants to:

- conduct one-to-one interactions with babies, toddlers, and children, giving them undivided attention
- build trusting and caring relationships with babies, toddlers, and children
- interact with babies and toddlers using verbal and non-verbal communication and respond to children's communication
- participate in age-appropriate activities with children, such as singing, saying rhymes
- build children's understanding of what is happening by inviting them to the bathroom and supporting their ability to predict what will happen next in the routine
- help children begin to develop and extend their self-help skills, which includes handwashing and dressing, and encouraging children to identify the feeling of accomplishment and pride that come with this
- educators/educator assistants will carry out nappy changing; however, at times if a student is required to carry out this as part of their practical requirements, they will be under the constant supervision of the educator.

Appropriate hygiene practices must be maintained, and procedures followed to minimise any risk of infection at all times. Educators/educator assistants will continuously role-model and promote healthy hygiene practices and hand washing procedures, encouraging and supporting the children to follow these practices.

THE FAMILY DAY CARE SERVICE WILL:

- implement policies, procedures, and training for FDC educators to ensure nappy change procedures support children's safety, protection, relationships, and learning
- conduct annual assessments of the Family Day Care residence/venue
- consider the suitability of nappy change arrangements for children attending, or likely to attend the service who wear nappies
- ensure FDC educators display handwashing posters in bathrooms and near nappy change area
- provide information to families at time of enrolment about:
 - use of disposable nappies
 - procedures if their child develops or presents with nappy rash
 - Administration of Medication authorisation for application of products to treat nappy rash including prescription treatments or over the counter creams
 - requests to provide adequate supplies of clothes for children who are toilet training
 - the importance of ongoing and open communication between educators and families about nappy changing and toilet training with their child

THE FDC EDUCATOR and/or EDUCATOR ASSISTANT WILL:

- provide an adequate and appropriate hygienic facility for nappy changing
- ensure the nappy change facility is designed and located in a way that prevents unsupervised access by children
- ensure that the nappy change facility is designed and maintained in a way that facilitates supervision of children at all times, having regard to the need to maintain the rights and dignity of the children using the facilities
- discuss children's individual needs with families to ensure practices are reflective of their home environment and are culturally sensitive
- develop systems to ensure that soiled clothing and soiled nappies are disposed of or stored in a location that children cannot access
- ensure that adult and children's hand washing facilities are located within the nappy change area and procedures are displayed visually and in community languages in appropriate areas
- ensure handwashing posters are displayed in bathrooms and nappy change areas

- ensure nappies are checked regularly throughout the day to ensure children are not susceptible to nappy rash and discomfort. A system to record this routine will be maintained for reporting purposes.
- provide information to families regarding children’s nappy changes
- ensure nappy bins have a ‘hands-free’ lid
- ensure nappy bins are located out of children’s reach, preferably in a child-proof cupboard
- ensure nappy bins are emptied once during the day and at the end of each day, or more regularly as required
- ensure nappy change procedures remain compliant and current (see Appendix 1: Nappy changing procedure below)
- always follow the FDC service’s requirements for nappy changing and toileting and communicating with families
- utilise nappy change times to interact with children, toddlers, and babies on an individual basis. The nappy change time will allow the educator to converse, sing, play, and generally interact with the child. This time is a particularly good time for supporting language skills
- organise the nappy change area to promote positive interactions and promote positive learning experiences. For example, place pictures or mobiles to stimulate children’s interactions and to encourage learning and language development
- ensure physical contact and direct supervision with babies and toddlers throughout the nappy change experience
- ensure no child is left alone on a nappy change mat or bench
- keep nappy change area fully stocked with all required materials at all times to ensure efficiency and the health and safety of each child
- encourage mobile children to walk to the nappy change area
- assist the mobile baby or toddler to walk up the steps onto the nappy change bench to minimise lifting by educators and to promote children’s agency. Where a child is not walking, educators will follow manual handling practices to lift and carry the baby to the nappy change mat.
- only apply nappy cream to a child if authorisation is provided in an Administration of Medication form, signed by the parent/guardian.
- FDC educators must ensure to change nappy change mat if the mat is not in good condition/rip/tear from any of the corner to remain comply with national quality area 2 children health and safety and service policy and procedure (NUR).
- FDC educator must ensure that if they noticed any of rash/ scratch/unusual mark during first nappy change in the morning please straightway text to the parents to avoid any issue risen by the parents (NUR)
- FDC educator will show nappy change facility to the parents during orientation before their child/ren enrolment (NUR)

TOILET TRAINING

Toileting occurs at any time of the day and is specific to individual needs. The FDC educator will communicate with parents/guardians to develop consistency between home and the service in regard to their child's toileting habits. FDC educators must be aware of and consider any special requirements related to culture, religion, or privacy needs. Educators can support to child during toilet training but families or parents must have to do their duties for child toilet training. Some of the parents expecting only from educator that they will help them to train their child but it is also duty of their parents even if they are busy in their life or in work but mutual understanding and support is always required to get best outcome. There were several examples when educators are supporting families to train their child but families putting nappies on when child reached to home which makes educator's effort in vain and also confuse to child during toilet training.

Decisions about when to begin toilet training will be made by families or may occur through shared decision making between families and the FDC educator. This decision is based on mutual respect and open communication, which is crucial for a successful outcome. Families may have strong views and preferences about when and how their child learns to use the toilet, which may come from their cultural background or individual preferences which must be respected by educators/educator assistants. The priority of the individual child's wellbeing is paramount, and the decision to begin assisting the child to learn to use the toilet should be based on signs of readiness from the child and discussion with families.

Early signs of readiness may start to appear when children are around two years old, but appear closer to the child's third birthday. However, boys will show signs of readiness later than girls. These signs may include:

- showing interest in the toilet, including having an interest in others using the toilet
- indicating a need to go to the toilet either before, or while they are passing urine or faeces
- staying dryer for longer periods of time
- beginning to dislike wearing a nappy and trying to pull it off when it's wet or soiled
- indicating a desire to sit on the toilet

It is important to keep the process subdued and not place unnecessary attention and pressure on the child to perform. Acknowledging children's successes, no matter how infrequent or small is vital for their self-esteem and confidence. Families and educators can expect accidents, which should be treated respectfully, without fuss, and in a supportive manner.

Educators and families will communicate with each other regarding how the toilet learning is progressing, both in care and at home. This will support children to become more familiar and comfortable with the toilet training process. Children will be given the opportunity to complete the toileting procedure, such as toileting, flushing the toilet, and washing and drying their hands, but will always be supervised and assisted if required.

During this milestone, children should be empowered and encouraged to be successful. Toilet training varies for individual children. As educators we can take advantage of the child being in a group and the many opportunities that provides for learning from each other. Educators and families need to remember that comparing children is inappropriate as there will always be individual differences and variables.

EDUCATORS WILL:

- request parents to supply a clean change of clothing for children who are toilet training
- assist the child to use the toilet
- assist the child to get dressed (and if required, change into dry clothes)
- encourage children, especially girls, to wipe front to back to reduce introducing bowel bacteria to the urinary tract
- encourage children to flush the toilet
- encourage and assist children to wash and dry their hands thoroughly as per *Handwashing Policy*

If the child has soiled or wet their clothes:

- place soiled clothes in a plastic bag or alternative and keep these in a designated area for parents to take home- rinse any wet and/or soiled clothes
- wash their own hands after helping children use the toilet
- wear disposable gloves, paper towel, disposable cloths, detergent and bleach if necessary when dealing with spills- such as urine, faeces or vomit

SOURCE

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

Australian Children's Education & Care Quality Authority. National Quality Standard Information Sheet. (2018) *Toileting and Nappy Changing Principles and Practices*.

Early Childhood Australia Code of Ethics. (2016).

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

Family & Community Services. (2019). Babies and toddlers: Toilet training:

<https://www.facs.nsw.gov.au/families/parenting/caring-for/toddlers>

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

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government.

Raising Children Network (2018) Nappy rash <https://raisingchildren.net.au/newborns/health-daily-care/poos-wees-nappies/nappy-rash>

Revised National Quality Standard. (2018).

The NSW Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	OCTOBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> Review of policy as part of annual cycle process Minor edits in formatting Sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	<ul style="list-style-type: none"> additional related policies additional information added to FDC service section re: parent communication administration of medication forms required for application of nappy rash cream additional section for educators related to toilet training inclusion of 'draft' Nappy change procedure as Appendix 1 	SEPTEMBER 2022	
JANUARY 2020	<ul style="list-style-type: none"> Additional regulations and responsibilities added Rewording of some content Additional information added where relevant Sources/references corrected and updated 	JANUARY 2021	
JANUARY 2019	<ul style="list-style-type: none"> Rearranged the order of points for better flow Sources/references corrected, updated, and alphabetised. Unnecessary/unrelated references deleted. 	JANUARY 2020	
AUGUST 2018	New Policy Created for Family Day Care Service to support best practice	JANUARY 2019	

Appendix 1

Nappy changing procedure

Preparation

1. Before changing a child's nappy, make sure you have everything you need within reach eg: disposable gloves, nappies, wipes, paper towel
2. Wash your hands with soap and water and dry thoroughly with paper towel
3. Place paper towel/sheet on nappy change mat

4. Put on disposable gloves on both hands

Changing

5. Lie child down on the change table
6. Always keep a hand on the child to prevent falling
7. Remove child's nappy and any other clothing with urine/feces. (The child may urinate, so have a spare cloth handy).
8. Use the front of the nappy to wipe off any feces
9. Use the tabs of the nappy to fold the nappy together in order to stop leakage and put in a hands-free lidded bin
10. Place any soiled clothes (including a cloth nappy) in a plastic bag
11. Using wipes, clean the child's bottom and genital area
12. Hold child's legs up with your fingers between the ankles and gently lift the child's bottom, wiping front to back
13. Remove the paper towel/mat and put in a hands-free lidded bin
14. Remove your gloves turning them inside out and dispose in the bin (Do not let your skin touch the outer contaminated gloves)
15. If nappy cream is required due to nappy rash, place on a new glove (check *Administration of Medication* form for authorisation)
16. Administer child's nappy cream using your gloved finger to apply generously
17. Dispose of glove
18. Open a clean nappy, with fastening tabs towards the top. Lift child's ankles and slip the nappy beneath their bottom
19. Fold the front flap up, tuck it firmly around baby's waist and secure each tab. Ensure not to make the nappy too tight.
20. Dress the child
21. Remove child from the change table
22. Wash your hands and the child's hands
23. Encourage the child to go and play with the other children

Cleaning

24. After each nappy change, clean the change table with detergent and warm water, rubbing with paper towel or a cloth, then rinse and dry
25. Dispose of paper towel
26. Wash and dry your hands thoroughly with soap and water
27. At the end of each day, thoroughly wash the nappy change mat and nappy change area with soap and water. Allow the change mat to dry, preferably in the sun.

28. Disinfect area with bleach solution in the event of spills (urine/feces/vomit). Additional hygiene measures must be implemented to reduce spread of diseases such as gastroenteritis

IMPORTANT: Do Not Take the risk for child and yourself & never leave a child unattended on a change table. It is good to spend more time but procedure must be safe and secure for Educator and Child

2.7 SICK STAFF/FDC EDUCATOR POLICY

Education and Care Services National Law and Regulations and Workplace Health and Safety legislation require early childhood education and care services to implement specific measures to minimise the spread of infectious illness and maintain a healthy environment for not only children, but also Family Day Care (FDC) educators, staff and other adults who may visit the FDC service. Whilst we urge families to keep their child away from childcare when they are sick, we also urge staff to take leave if they are unwell to minimise the transmission of infectious disease and illness to others.

Nurture Childcare and Education Service relies on staff and FDC educators being at their best every day. Staff and FDC educators often overlook their own health resulting in exhaustion, stress, and illness. When a staff member or FDC educator is unwell with an illness or injury, it is critical that they take care of their own health and take time to recover before returning to the demands and responsibilities of an early childhood education and care setting.

Educator who feels that they can't operate the service due to their sickness then they must have to inform to parents and service as soon as possible so parents and service can do suitable arrangement for children and families wherever possible.

Service may ask to submit GP certificate stating that, "Educator is sick due to _____ (state the reason if possible) & will exclude from the work _____ (Time period). If service asking for certificate that Educator must have to provide one without delaying the process.

Educator providing false or misleading information results may be suspended or terminate from the service without any pre notice.

Any Educator can't leave the service within their leave period or must have to follow the service leaving procedure once get back to normal health conditions. (Nur)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.

2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

12	Meaning of serious incident
77	Health, hygiene and safe food practices
83	Staff members and family day care educators not to be affected by alcohol or drugs
85	Incident, injury, trauma and illness policies and procedures
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
Sec.174(2)(a)	Serious incident- any emergency for which emergency services attended

RELATED LEGISLATION

Fair Work Act 2009
 Work Health and Safety Act 2011
 Children's Services Award 2010
 Privacy Act 1988

RELATED POLICIES

Code of Conduct Policy Control of Infectious Diseases Policy Handwashing Policy Immunisation Policy Incident, Injury, Trauma and Illness Policy	Medical Conditions Policy Privacy and Confidentiality Policy Sick Child Policy Staff Leave Entitlement Policy
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PURPOSE

We promote and maintain the health and wellbeing of all staff by ensuring as far as is reasonably practicable, the health and safety of our staff and others at the workplace. Our Family Day Care Service maintains an environment where measures are in place to eliminate or manage hazards and risks of illness or injury. This policy communicates clear directions and guidance about protocols and actions staff members and FDC educators should follow to avoid adversely affecting the safety and health of children, other staff members, FDC educators and visitors to the FDC Service.

SCOPE

This policy applies to staff, Approved Provider, **Nominated Supervisor**, Coordinator, educators, educator assistants, management, students and visitors of the FDC Service.

IMPLEMENTATION

Our Family Day Care Service promotes the need for a safe, healthy and inclusive workplace. FDC educators who are healthy provide the best possible education and care to children and are able to provide support to their colleagues. To enable compliance with *Work Health and Safety legislation* and our *Code of Conduct Policy*, all staff and FDC educators must take reasonable care for their own health and safety and others in the workplace.

Minimizing the spread of illness, infections and diseases

We aim to minimise cross contamination and the spread of infectious illnesses by implementing best practice and high standards of personal hygiene within our FDC Service. Recommendations by the Australian Government National Health and Medical Research Council publication, *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) and Safe Work Australia, guide our policies and protocols.

Staff and FDC educators are provided with information about the recommended vaccines for early childhood educators including yearly influenza vaccinations as per our [Western Australia State Govt.](#)

Regulation

Staff and FDC educators are required to provide an *Immunisation History Statement* from the Australian Immunisation Register (AIR) and/or records from their general practitioner to management for their staff or educator record.

Vaccination is important as not only can staff members catch a potentially serious infection such as measles or whooping cough, but they could also then inadvertently pass it onto children in care who are too young to have had their vaccinations or to women who may be pregnant.

The Australian Government recommends everyone over the age of 6 months have an annual Influenza (flu) vaccine and all adults receive COVID-19 vaccinations.

Whilst our FDC Service cannot require employees and FDC educators to be vaccinated against coronavirus, we strongly recommend all staff receive the COVID-19 vaccine to reduce the health, social and emotional impacts of the COVID-19 pandemic. But Service and Educators must have to follow Western Australia State Govt. directions whenever asked to do so and all policies and procedure should

be seen in the context of govt. order and must have to follow and govt. regulations will be above the service policies and procedure and cannot be challenged if found difference in between govt. orders and service policies and procedures. (Nur)

Exclusion periods and notification of infectious diseases are guided by the *Australian Government- Department of Health* and local public health units in our jurisdiction as per the Public Health Act. These apply to children, FDC educators and staff at the FDC Service.

In the event of an outbreak of a vaccine preventable disease at our service, staff or FDC educators who are not vaccinated will be notified and should be excluded from their workplace.

see: [Minimum periods for exclusion from childcare services](#)

To help minimise the spread of illness and infectious diseases within our FDC Service, rigorous hygiene and infection control procedures are implemented including:

- effective and frequent hand washing hygiene
- cough and sneeze etiquette
- use of gloves by FDC educators and any visiting staff (coordinator) when administering medication, nappy changing, wiping children's noses, cleaning etc
- effective cleaning of the environment, toys and resources
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service and
- exclusion of children, FDC educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- wearing of face masks when mandated by Public Health Orders.

The Approved Provider, Nominated Supervisor/ Responsible Person will ensure:

- staff members and FDC educators provide an Immunisation History Statement at time of employment and update this record whenever they receive a seasonal vaccination (including mandatory COVID-19 vaccination requirements, check your state/territory for immunisation requirements [see: Employee Immunisation Record])
- all staff and FDC educators are aware of the required procedure of informing management when they are sick and unable to attend the workplace or operate the FDC Service
- staff members and FDC educators are encouraged to disclose any health problems that may be life threatening or may affect their work [e.g.; risk of anaphylaxis, diabetes, asthma, epilepsy]
- staff and FDC educators are provided with information about available vaccinations to help protect them from serious illnesses such as whooping cough and COVID-19

- staff and FDC educators are encouraged to have yearly influenza vaccinations
- staff and FDC educators adhere to our *Work Health and Safety Policy*
- incidents and accidents are reported in accordance with Education and Care Services National Regulations and Work Health and Safety guidelines
- staff and FDC educators comply with all current public health order directions (Including testing and isolation requirements of COVID-19) where required **according to WA state Govt. Health guidelines (Nur)**
- the regulatory authority is notified of any serious incident for which emergency services attend the service within 7 days.

Leave entitlements for Staff working in the FDC Service principal office

[A registered agreement award or contract may set out different entitlements, however these cannot be less than the minimum stated above.]

- sick leave can be used for personal illness or to take time off work to help care for ill or injured family members
- staff members are informed about sick leave entitlements during the induction process
- **where a staff member applies for sick leave of three (3) days or more, a certificate stating the nature of the illness and period of time the person is unfit for work must be provided by a registered medical practitioner**
- **evidence may be requested for any sick leave where a staff member is unable to work due to illness or injury**
 - in the case of carer's leave, staff may be asked to provide **evidence a medical certificate or statutory declaration** if they are required to care for family member
 - **evidence may include a medical certificate, which must state the staff member was genuinely entitled to the sick or carers leave and be provided by a registered medical practitioner**
 - **a statutory declaration is considered an acceptable form of evidence**
 - **if a staff member does not provide evidence when asked they may not be entitled to paid sick or carers leave**
- staff are aware of their accrued leave balance each year
- management monitors and review staff absences regularly
- return to work programs are facilitated to assist staff to return to work following an injury or incident as per workers compensation obligations

Under the Children's Services Award **2010** and Educational Services (Teachers) Award **2020**, full time employees are entitled to 10 days of sick and carer's leave for each year of employment. Part time

employees are entitled to the same leave entitlements on a pro-rata basis. Sick leave accumulates each year. Casuals are not entitled to paid sick or carer's leave.

Evidence may be requested for personal leave to state the staff member was genuinely entitled to the sick or carers leave and be provided by a registered medical practitioner. A statutory declaration is considered an acceptable form of evidence. If a staff member does not provide evidence when asked they may not be entitled to paid sick or carers leave

FDC educator leave

A registered Family Day Care educator is an independent Sole Trader engaged by Nurture Childcare and Education Services and are therefore NOT employees of the organisation. There are no provisions for sick leave entitlements.

Staff members and FDC educators will:

- provide management with their *Immunisation History Statement* or other records from their general practitioner to provide evidence of immunisations (including mandatory COVID-19 vaccination requirements,
- consider disclosing any health diagnosis that may be life threatening or may affect their work (e.g., risk of anaphylaxis, diabetes, asthma, epilepsy)
- provide a health care plan to provide guidance on management of their health care need in case of an emergency e.g., ASCIA Anaphylaxis Action Plan
- inform the FDC Service/ FDC Coordinator the location of their EpiPen® if they are at risk of anaphylaxis
- regularly review their health care plans if they have ongoing medical needs such as asthma or anaphylaxis, epilepsy or diabetes [or any other medical condition that requires ongoing management]
- update their emergency contact details in staff or educator records annually or when required
- assist work colleagues to understand their own health, safety and wellbeing accountabilities and responsibilities
- be excluded from the FDC Service if they have had diarrhoea and vomiting for 48 hours after symptoms have ceased to reduce infection transmission
- adhere to exclusion/isolation periods if they have any infectious disease
- inform management if their medical condition/illness or injury affects their ability to perform their job
- inform management if prescribed medication may cause health or safety issues for themselves or others (e.g.: medication making them drowsy)

- provide evidence of their illness or injury as soon as practicable if requested by management
- provide evidence if they are required to care for a family member if requested by management

FDC educators will:

- contact the FDC Service/ FDC Coordinator by phone as soon as possible to notify they are unable to provide care due to sudden illness, other emergency or if a family member is unwell with an infectious illness
- comply with all public health direction orders (including testing and isolation requirements of COVID-19) where required
- communicate their recovery time/plan openly and honestly with management

The FDC Service/ FDC Coordinator will:

- endeavour to find a back-up educator and contact parents if the FDC educator is unable to provide care.
- advise parents at time of enrolment that it is not always possible to find back-up care in the event of sudden illness of a FDC educator
- require the FDC educator to provide a medical certificate after an illness to ensure the educator or family member is no longer infectious and they are fit to provide education and care to children
- ensure FDC educators are aware that they cannot charge fees or claim CCS if the FDC educator is unavailable to provide care.

Privacy and Confidentiality

Staff members and FDC educators are required to notify management if they are affected by an infectious disease. Privacy laws, however, protect staff members or FDC educators from disclosing other non-infectious illnesses to their employer. Information about staff member or FDC educators' health cannot be shared with others without their consent.

This may be applicable for staff or FDC educators who have a life-threatening illness or a mental illness. Staff or FDC educators should inform management if reasonable adjustments need to be made to their duties to allow them to continue to work due to their illness. Advice from a registered medical practitioner may be required to assist in managing work duties and ensuring the wellbeing and safety of others.

Returning to work after surgery

Staff members and FDC educators who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate and safe to return to their workplace.

A medical clearance statement will be required to ensure the staff member or FDC educator is fit and able to return to normal duties.

Reporting outbreaks to the public health unit

The Approved Provider is required to notify the local [Public Health Unit](#) (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the FDC Service, FDC educator or staff member is suffering from one of the following vaccine preventable diseases or highly infectious illnesses:

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ('German measles')
- Measles
- Pertussis ('whooping cough')
- Tetanus
- An outbreak of 2 or more people with gastrointestinal or respiratory illness
- any confirmed case of coronavirus- (COVID-19)

Policy Evaluation

Our FDC Service relies on staff and FDC educators being at their best every day and we are committed to promote the health, safety and well-being of staff members and FDC educators at all times. This policy will be evaluated and reviewed annually as part of our review cycle.

SOURCE

ASCIA Action Plans, Treatment Plans, & Checklists for Anaphylaxis and Allergic Reactions:

<https://www.allergy.org.au/hp/ascia-plans-action-and-treatment>

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

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

Department of Health NSW Vaccination of staff working in Early Childhood Services

<https://www.health.nsw.gov.au/immunisation/Factsheets/vaccination-early-childhood-staff.pdf>

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

Fair Work Ombudsman <https://www.fairwork.gov.au/leave/sick-and-carers-leave>

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

Guide to the National Quality Standard. (2020).

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.). *Public Health Act 2010*

Privacy Act 1988

Revised National Quality Standard. (2018).

Safe Work Australia – www.safework.nsw.gov.au

[Western Australian Education and Care Services National Regulations](#)

Work Health and Safety Act 2011 (Cth).

Work Health and Safety Regulations 2017

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • edits regarding evidence required for sick/carers leave entitlements • link to Western Australian Education and Care Services National Regulations added in 'Sources' • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JUNE 2022	New Policy developed for Family Day Care Services	AUGUST 2022	

2.8 MANAGING AN UNIDENTIFIED DOG POLICY

There may be occasions when an uninvited dog manages to enter the Family Day Care (FDC) residence or approved venue's grounds/playground area. To ensure children are not placed at risk, all precautions will be taken to minimise the likelihood of this situation, and should it occur, all FDC educators will respond immediately in accordance with this policy.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY

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

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP

7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

104	Fencing
168	Education and care services must have policies and procedures

RELATED POLICIES

Child Safe Environment Policy Health and Safety Policy	Lockdown Policy Supervision Policy
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PURPOSE

We aim to ensure that all children, educators, families, and visitors remain safe from unexpected situations such as an uninvited dog entering the playground.

SCOPE

This policy applies to management, FDC educators, educator assistants, approved provider, nominated supervisor, visitors, children, families and staff of the Family Day Care Service.

DEFINITIONS

A **companion animal** is a dog, cat or other animal prescribed by the regulations and includes pets, working dogs on rural properties, guard dogs, police dogs, and corrective services dog (*Companion Animals Act 1998*).

Approved animal welfare organisation means the Royal Society for the Prevention of Cruelty to Animals (RSPCA), and the Animal Welfare League.

IMPLEMENTATION

There are many reasons why an uninvited dog may enter a FDC residence or approved venue's grounds or playground area, whether a companion dog, or a stray. It may be that the dog has been frightened by a thunderstorm and escaped his yard and somehow found his way into ours. It could be that a hungry stray has been attracted to the smell of food scraps, or it may be that a friendly but lonely neighbourhood dog has been attracted to the yard by the sounds of children playing. However regardless of the cause, our FDC educators will take immediate action to ensure the children's safety.

In Australia dogs must be registered and micro-chipped. If a dog is then 'lost', the dog and owner can be reunited to its owner by scanning and reading the microchip, which can be done by the local council, a vet, or an approved animal welfare organisation. However, the owner must legally notify the local council within 72 hours of the dog known to be missing so that it can be placed on a 'lost dog register'. It is therefore always best to make the local council the first point of contact should an uninvited dog make its way into a FDC residence or approved venue grounds/playground.

Dog body language: Signs that a dog may be scared or aggressive.

Shrill barking

Teeth bared (may or may not be growling)

Closed, tight mouth

Stiff, rigid body with legs braced

Tail held rigid in any position, between the legs, or a slow stiff wag

Ears back against the head or flattened (ears pricked up or forward demonstrate interest in something – continue to use caution)

Hackles raised

Staring directly at you

Approaching you with head lowered

As a dog's intent and behaviour can change rapidly, it is always best to exercise caution when the safety of children is involved and treat all dogs as dangerous unless extremely obvious that it is friendly (loose body movements, tail wagging and held high, 'bounding' and 'jumping' on the spot, or not hesitating in enthusiastically approaching people).

Source: Best Friends Animal Society (2018); Dog's Home (2014); Pet Source (2010).

MANAGEMENT AND FDC EDUCATORS WILL ENSURE THAT:

- daily checks are made of the outdoor learning environment to ensure fencing is intact, gates locked and there is no sign of an unidentified dog or animal on the premises
- any outdoor area that is used by children is enclosed by a fence that prevents the intrusion of unwanted dogs and/or other animals
- following the entry of an uninvited dog into the grounds/playground, immediate steps will be taken to secure the fencing to eliminate the possibility of this situation being repeated
- the external rubbish bin is not filled to a point that the lid will not securely close, and FDC educators are aware to tightly bag all food scraps before placing them in the bin to avoid attracting hungry strays
- FDC educators are proactive in ensuring all children use rubbish bins if eating outside
- all FDC educators follow the policies and procedures of our FDC Service.

IN THE EVENT OF AN UNIDENTIFIED DOG OR OTHER ANIMAL ENTERING THE PREMISES

The FDC educators will:

- calmly guide children indoors by approaching groups of children and giving instruction to quietly move inside: Shouting to all children or using a bell could frighten the dog (If a dog has entered the yard during or just after a thunderstorm, the children will likely already be inside).
- if the position of the dog is preventing the children's re-entry to the residence/venue, children will be guided quietly via the emergency playground exit to enter from the front door
- implement 'External threat' procedures (*See Lockdown Policy*)
- contact local council for assistance

For extremely friendly dogs only:

- a friendly dog will generally come running to you if you beckon: Stand still and speak softly to the dog and offer the back of your hand for him to sniff. Remain motionless while you allow the dog time to explore your hand. Always remain wary to ensure he continues to display signs of non-threatening behaviour.
- check to see if the dog is wearing a collar and tag. If so, the owner can be contacted. Whilst waiting for the owner to collect the dog, secure it in a location away from the playground, ensuring it has shade and fresh drinking water. If the owner offers a reward, do not accept it: Part of belonging to a community is doing the 'right thing' without expectation of a reward for doing so.
- if the phone number on the tag is incorrect, or the owner does not answer the phone nor return your call within a reasonable time frame, call your local council and advise them of the situation.
- if the dog does not have a tag, call your local council and advise them of the situation.

- do not allow the dog to be taken into the custody of any staff member or family with the intent of displaying 'found' posters in the community as this frequently attracts persons who dishonestly claim ownership of expensive breeds to then sell.

For all other dogs:

- avoid confronting the dog: Do not try to chase it out of the playground or touch it
- contact the local council immediately and advise them of the situation. Ensure that you tell them the dog is in an early education and care service
- ensure the children remain inside until the dog has been collected
- provide support for children who are afraid of dogs.

Educators will:

- discuss with the children how to behave with a dog or puppy (e.g., calmly, no aggressive patting, no pulling tails, use quiet voices, etc.) as part of the curriculum to minimise the risk of provoked dog attacks outside the FDC Service
- develop children's understanding that the owner should always be asked before patting a dog
- teach children how to tell if a dog is happy, scared, or aggressive *but* ensure they know never to approach a strange dog.

STATE-BY-STATE DOG REGISTRATION AND MICROCHIPPING REQUIREMENTS

AUSTRALIAN CAPITAL TERRITORY (ACT)
<ul style="list-style-type: none"> • Dogs must be registered if they are over eight weeks old • Section 84 of the <i>Domestic Animals Act 2000</i> and Regulation 7 of the <i>Domestic Animals Regulation 2001</i> requires micro-chipping of cats and dogs prior to sale/transfer and by 12 weeks of age.

NEW SOUTH WALES (NSW)
<ul style="list-style-type: none"> • Dogs must be registered with the local council by six months of age • Section 8 of the <i>Companion Animals Act 1998</i> requires micro-chipping of cats and dogs prior to sale/transfer and by 12 weeks of age.

NORTHERN TERRITORY (NT)

- Dogs must be registered with the local council by three months of age
- Dogs are not required to be micro-chipped by the state *but* are generally required under individual local council regulations.

QUEENSLAND (QLD)

- Dogs must be registered with the local council by three months of age
- Section 14 of the *Animal Management (Cats and Dogs) Act 2008* requires micro-chipping of dogs prior to reaching 12 weeks of age.

TASMANIA (TAS)

- Dogs must be registered with the local council by six months of age
- Section 15A of the *Dog Control Act 2000* requires micro-chipping of dogs by 6 months of age.

VICTORIA (VIC)

- Dogs must be registered with the local council by three months of age
- Section 10C of the *Domestic Animals Act 1994* requires dogs to be micro-chipped as a condition of registration.

WESTERN AUSTRALIA (WA)

- Dogs must be registered with the local council by three months of age
- Section 21 of the *Dog Act 1976* requires dogs to be micro-chipped when they have reached 3 months of age regardless of registration status.

SOUTH AUSTRALIA (SA)

- Dogs must be registered with the local council by three months of age
- Part 4A of the *Dog and Cat Management (Miscellaneous) Amendment Act 2016* requires micro-chipping of dogs prior to sale/transfer and prior to reaching 12 weeks of age.

Source: RSPCA Australia

SOURCE

Best Friends Animal Society. (2018). *Dog body language*. <https://bestfriends.org/resources/dog-body-language>
Companion Animals Act 1998: http://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/nsw/consol_act/caa1998174/
 RSPCA Australia: www.rspca.org.au

Dog's Home. (2014). *Don't pet that dog: 3 signs most people don't know*. <https://www.dogshomepa.org/dont-pet-that-dog-3-signs-most-people-dont-know/>

NSW Government. Office of Local Government: <https://www.olg.nsw.gov.au/public/dogs-and-cats/information-for-the-community/lost-and-found-cats-and-dogs>

Royal Society for the Protection of Animals NSW (RSPCA): www.rspcansw.org.au

Victoria State Government: *Stray cats and dogs*. <https://agriculture.vic.gov.au/livestock-and-animals/animal-welfare-victoria/animal-welfare/stray-and-unwanted-animals/ive-found-a-lost-stray-or-injured-animal>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	Sept 2022	NEXT REVIEW DATE	Oct 2023
MODIFICATIONS	<ul style="list-style-type: none"> New Policy developed for FDC Services 		

2.9 ADMINISTRATION OF FIRST AID POLICY

Under the Education and Care Services National Regulations the approved provider must ensure policies and procedures are in place for the administration of first aid (Reg. 168) and take reasonable steps to ensure policies and procedures are followed.

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

NATIONAL QUALITY STANDARD (NQS)

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

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement-anaphylaxis or asthma emergency
97	Emergency and evacuation procedures
101	Conduct a risk assessment for excursions
102C	Conduct a risk assessment for transporting of children by the education and care service
136 (3)	First Aid Qualifications
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
168 (2)(a)(iv)	The administration of first aid
169	Additional policies and procedures for family day care services
174	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority

183	Storage of records and other documents
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RELATED POLICIES

Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Child Safe Environment Policy Diabetes Management Policy Enrolment Policy Epilepsy Policy Family Communication Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Responsible Person Policy Safe Transportation Policy Sick Child Policy Sun Safety Policy Supervision Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

Our Family Day Care Service has a duty of care to provide and protect the health and safety of children, families, educators, and visitors of the Service. As educators primarily work alone in their approved residence whilst providing care for children, this policy aims to support educators to:

- Preserve life
- Ensure the environment is safe and other people are not in danger of becoming ill or injured
- Ensure that ill or injured persons are stabilised and comforted until medical assistance intervenes
- Relieve pain, if possible
- Monitor ill or injured persons and promote recovery
- Provide immediate and effective first aid to children or adults
- Ensure processes are in place to provide supervision for other children in care whilst first aid is administered

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

SCOPE

This policy applies to the approved provider, coordinator, educators, and educator assistants of the Family Day Care Service.

IMPLEMENTATION

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

The Family Day Care Service, Coordinator or Nominated Supervisor will:

- ensure all Family Day Care educators and educator assistants hold current approved first aid qualifications, have undertaken current approved anaphylaxis management training and current approved emergency asthma management training
- ensure these qualifications meet the requirements of the [Education and Care Services National Regulations](#) and are approved by ACECQA
- **provide internal training of the administration of an auto-injection device annually and document training on FDC educator and educator assistant's Educator records (not mandatory)**
- implement training and develop procedures to assist educators know the steps of alerting emergency services, administer first aid and provide supervision to other children in their care
- ensure information relating to the administration of first aid resulting from an incident, injury or trauma is recorded on the *Incident, Injury, Trauma and Illness Record* as soon as possible or within 24 hours
- ensure families are notified of any event requiring first aid administration as soon as practicable but no later than 24 hours after the incident, injury or trauma requiring first aid
- ensure FDC educators are offered support and debriefing after a serious incident requiring the administration of first aid
- keep up to date with any changes in procedures for administration of first aid and ensuring that all FDC educators are informed of these changes
- ensure appropriate documentation is being recorded regarding incidents, injury, trauma and illnesses and the administration of first aid
- ensure that each FDC educator has an easily accessible and clearly identified first aid kit in each residence or approved venue
- conduct audits on first aid kits at individual FDC educator's residence /venues
- evaluate risk assessments conducted by FDC educators prior to approving any excursions, regular outings or when providing transport

Family Day Care educators and educator assistants are responsible for:

- safeguarding every reasonable precaution to protect children at the FDC residence/venue from harm and/or hazards that can cause injury
- consider procedures of how they will be able to administer first aid to a child if required whilst they are working on their own in their residence
- discuss possible situations for emergency situations with the Coordinator and Approved Provider
- confidently administering first aid as required to incidents involving children enrolled in their service
- ensuring that all children are adequately supervised while providing first aid and comfort for a child involved in an incident or suffering trauma
- always act in a respectful manner when administering first aid
- consider if an ambulance is required as soon as possible. Follow directions provided by emergency services
- continue to administer first aid until emergency services arrive and take over treatment
- if possible, call for assistance from the educator assistant to assist in supervising other children in care whilst first aid is administered. The educator is expected to ensure other children in care are not placed in any danger whilst first aid is administered to another child or adult
- ensuring they hold:
 - a current ACECQA approved first aid qualification
 - current approved anaphylaxis management training qualifications
 - current approved emergency asthma management training qualifications

(Safe Work Australia recommends first aid qualifications should be renewed every three years)

- refreshing their CPR and administration of an auto-injector device training at least annually (not mandated)
- Educator must renew his/her first aid qualification and CPR before its expire so its important to display them where they can easily check (NUR)
- Educator must renew his/her CPR annually if its not done then they need to complete full first aid course (NUR) because of their negligence.
- If Nurture childcare and education services receives any penalties or infringement notice from any of the department because of educator negligence, educator is fully responsible to pay those penalties on any infringement notice. (NUR)
- ensuring first aid training details are recorded at the Service Principal office and kept up to date
- ensuring there is an induction process for all new educator assistants, and casual and relief educators that includes providing information on the location of first aid kits and specific first aid requirements and individual children's allergies and individual medical management plans
- Ensuring medical management plan should be displayed on the fridge or near to the kitchen area

- ensuring that parents are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at the service and recording details on the *Incident, Injury, Trauma and Illness Record*
- contacting families immediately if a child has had a head injury whilst at the FDC Service
- ensuring a resuscitation flow chart is displayed in a prominent position in the indoor and outdoor environments of the FDC residence/venue
- providing and maintaining an appropriate number of up-to-date, fully equipped first aid kits that meet Australian Standards
- conducting a risk assessment prior to an excursion, regular outing or when providing regular transportation of children to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]
- ensuring authorisation is gained with the Approved Provider before any excursion, regular outing or transportation of children is made
- providing and maintaining a transportable first aid kit that can be taken to excursions and other activities
- monitoring the contents of all first aid kits and arranging replacement of stock, including when the use-by date has been reached
- disposing of out-of-date materials appropriate
- ensuring first aid kits are recognisable and readily accessible to adults wherever the educator is educating and caring for children as part of a Family Day Care service.

See Procedure in the event of an Incident, Injury, Trauma

Incident, Injury, Trauma and Illness Record must include:

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

Families will:

- sign FDC *Incident, Injury, Trauma and Illness Record* acknowledging they have been made aware of the incident and the first aid that treatment that was given to the child
- provide the required information for the FDC Service's medication record
- provide the service with a medical management plan for their child if required
- provide written consent (via the enrolment record) for FDC educators or educator assistants to administer first aid, seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital
- be contactable, either directly or through emergency contacts listed on the child's enrolment record

First Aid Kit

The approved provider of the Service will ensure that first aid kits are kept up to date and in accordance with National Education and Care Service Regulations at each Family Day Care residence or venue.

All First Aid Kits at the FDC residence or venue must:

- be suitably equipped
- not be locked
- not contain paracetamol
- be suitable for the number children and sufficient for the immediate treatment of injuries at the FDC Service
- be easily accessible to the FDC educator and educator assistant
- be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents.
- be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments
- contain a list of the contents of the kit
- be regularly checked using the First Aid Kit Checklist to ensure the contents are as listed and have not degraded or expired
- have a white cross on a green background with the words 'First Aid' prominently displayed on the outside.
- be easily recognisable.
- be easy to access and if applicable, located where there is a risk of injury occurring
- be available in the FDC educator's vehicle
- **be provided on each floor of a multi-level FDC service/venue**
- be stocked with precautionary items such as sunscreen and water if using outdoors.
- be taken on excursions
- be maintained in proper condition and the contents restocked as required.

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

First Aid Procedure in the event of an Incident, Illness, Injury or Trauma

See Appendix 1 below

First Aid Check/Audit

Our FDC Service will refer to the First Aid Kit-Inventory and Checklist from *Childcare Centre Desktop* (see Appendix 2) or refer to the Checklist in Safe Work Australia’s First Aid in the Workplace Code of Practice as a guide. (Appendix E- Example of contents)

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

SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines- *Administration of First Aid Guidelines*
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
 Education and Care Services National Regulations. (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2018). (Amended 2020).
 Revised National Quality Standard. (2018).
 Safe Work Australia First Aid in the Workplace Code of Practice: <https://www.safeworkaustralia.gov.au/law-and-regulation/codes-practice>
 Safe Work Australia Legislative Fact Sheets First Aiders: <https://www.safeworkaustralia.gov.au/first-aid>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA Administration of First Aid Policy (August 2021) Additional legislative requirements added 	MAY 2022	

	<ul style="list-style-type: none"> Additional related policies 	
MAY 2021	<ul style="list-style-type: none"> minor edits annual training for auto injectors highlighted as best practice (not mandatory) 	MAY 2022
SEPTEMBER 2020	<p>Additional links to National Regulations added</p> <p>Support for educators in the event of an injury, accident and first aid is required to be administered</p> <p>Risk assessment for 'regular outings' and transportation added</p> <p>Appendix added for Procedure for Incident Illness Injury or Trauma</p>	MAY 2021
MAY 2020	<p>Additional section for Family Day Care Service, Coordinator</p> <p>Merge of FDC educator and Educator Assistant roles</p> <p>minor formatting edits</p> <p>First Aid Inventory and checklist included as Appendix</p> <p>sources checked for currency</p>	MAY 2021
MAY 2019	<p>Sources checked for currency – removed if obsolete. URLs added.</p> <p>Sources/references alphabetised.</p> <p>Minor formatting for consistency throughout policy.</p> <p>'Related policies' alphabetised.</p>	MAY 2020
MAY 2018	<p>Updated policy to work in collaboration with Safe Work Australia.</p>	MAY 2019
DECEMBER 2017	<p>Updated to meet the National Law and/or National Regulations in respect of a serious incidents and notification purposes.</p> <p>Updated to include revised National Quality Standard</p>	MAY 2018
MAY 2017	<p>Amendments made to comply with Family Day Care requirements</p>	TBA

APPENDIX- 1

PROCEDURE IN THE EVENT OF AN INCIDENT, INJURY, TRAUMA or ILLNESS

If an incident, injury or illness occurs whilst a child is under the care of a FDC educator, the educator will administer First Aid and seek hospital transportation and treatment if required. In the event of a child being subjected to trauma, educators will support children following advice from other professional bodies such as Emerging Minds & BeYou.

Emergency Response Procedures

Follow instructions as per the child's ASCIA Action Plans for children who are known to have asthma or allergies including anaphylaxis

- Administer adrenaline autoinjector or reliever inhaler medication (Ventolin) as instructed
- Contact an ambulance **immediately** for any incident involving anaphylaxis
- Contact an ambulance **immediately** for asthma emergencies if the child cannot breathe normally after following their Action Plan for asthma and receiving reliever inhaler medication or if their breathing become worse.

Head Injuries

All head injuries will be considered as serious and should be assessed by a doctor or the nearest hospital. The child must be closely observed until the parent or guardian collects the child from the educator- or they are transferred to hospital.

- if the child has suffered a head injury and is unconscious, they should not be moved unless there is immediate danger
 - Call for an Ambulance immediately
 - Monitor the airway and breathing until the arrival of an ambulance
 - If breathing stops or they have no pulse, begin CPR immediately

Incident or injury management

The educator will:

- ensure the safety of themselves and others- DRSABCD (Danger, Response, Send for Help, Airway, Breathing, CPR, Defibrillation)
- attend to the child immediately
- if the illness or incident involves asthma or anaphylaxis, refer to the child's Medical Management Plan or Action Plan
- administer First Aid procedures
- assess whether further medical attention is required (hospital or other medical assistance)
- call for help- Contact an ambulance and stay with the child
- contact the parent/s or nominated authorised person on the child's enrolment form to inform them an ambulance has been called and request them to either:
 - come immediately to educator's residence or place of incident/injury or
 - meet the ambulance at the hospital
- immediately arrange for assistance (contact approved provider to request assistance) to care for children in care whilst you travel with an injured/ill child in an ambulance
- if unable to provide supervision for attending children, sign injured child into paramedic's care to be met at the hospital by the parent or authorised nominee or approved provider
- remain with the child until the ambulance arrives

- reassure the child and other children
- ensure any medical conditions/history is readily available (e.g.: Emergency Action Plan for Asthma or Anaphylaxis)
- Action Plans should provide guidance of First Aid responses in an emergency as provided by the child's doctor and authorised by the child's parents

Calling an ambulance

Do not hesitate to contact an ambulance if you think emergency services are required.

If a child displays any of the following symptoms or suffers any of the following call 000:

- the child has experienced unconsciousness or an altered state of unconsciousness
- is experiencing difficulty breathing for any reason
- has difficulty breathing and has not responded to reliever inhaler medication (even if they are not diagnosed with Asthma)
- is showing signs of shock
- is experiencing severe bleeding, or is vomiting blood
- has an injury to their head, neck or back
- could have broken bones
- has an extremely high temperature, with or without a rash
- has a temperature above 38°C for an infant under 3 months old

Dial 000 and be prepared to answer the following:

- the address of where the ambulance is required and the closest cross street
- what the problem is
- how many people are injured
- the child/person's age
- the child/person's gender
- if the child/person is conscious and
- if the child/person is breathing

2.10 BOTTLE SAFETY AND PREPARATION POLICY

Infants and young children are more susceptible to food borne illness making it necessary for Family Day Care educators to implement the highest level of health and hygiene practices within their approved residence/venues. Safe practices for handling, storing, preparing and heating breast milk or formula must be implemented to minimise risks to children being cared for by Family Day Care educators.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
168	Education and care services must have policies and procedures
170	Policies and Procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Breastfeeding Policy Health and Safety Policy	Nutrition and Food Safety Policy Work Health and Safety Policy
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PURPOSE

To ensure Family Day Care educators maintain hygienic premises for infants and toddlers requiring bottles, educators will certify that bottles are prepared safely and hygienically and that practices meet Work Health and Safety and current Food Safety Standards.

Our Family Day Care Service encourages all educators to complete professional development in safe food handling and menu planning to increase knowledge and awareness of individual responsibilities.

SCOPE

This policy applies to children, families, Family Day Care educators, educator assistants and visitors of the Service.

IMPLEMENTATION

During their first year of life, babies are at their most vulnerable to viruses, bacteria, and parasitic infections, due to their immune system not yet being fully developed. Unsafe or careless food handling practices can therefore lead to anything from a mild attack of thrush to a more serious condition of gastroenteritis, all of which are similar to food poisoning and can cause vomiting and diarrhoea, and subsequent dehydration.

To ensure that bottles are consistently prepared in a safe and hygienic manner, educators will adhere to the Family Day Care Service procedures at all times.

Family Day Care educators will:

- ensure that they are fully aware of the procedures for preparing, heating and storing bottles of formula and breast milk
- wash hand thoroughly and wear gloves when preparing bottles
- ensure that children have access to safe drinking water at all times and are regularly offered food and beverages appropriate to their individual needs
- develop procedures for the safe storage and heating of food provided in bottles
- implement safe food handling practices
- seek to provide a supportive environment for breastfeeding
- store all bottles in an appropriate area for food preparation and storage that complies with the food safety standards for kitchens and food preparation areas
- adhere to the procedure for the safe storage and heating of food provided in bottles
- ensure infants over 6 months of age are given small amounts of cooled boiled tap water in addition to breastmilk or formula
- ensure infants and children are not given fruit juice in their bottle due to the increase risk of tooth decay
- adhere to each child's feeding routine
- complete a record of the amount of milk each infant consumed including times of feeds
- communicate regularly with families about infant and children's feeding patterns and routines

Families will:

- be informed during orientation that children's bottles must be clearly labelled with the child's name
- label bottles containing breast milk or formula with the date of preparation or expression
- be encouraged to supply breast milk in well labelled, multiple small quantities to prevent wastage

- be asked to provide a labelled bottle(s) for use at the Service for children having regular cow's milk in their bottles
- be encouraged to communicate regularly with the educator about their children's bottle and feeding requirements
- not put fruit juice in children's bottles.

STERILISING BOTTLES, TEATS AND DUMMIES

After sterilising any item for infants, it is important to remember not to touch any part that will go into the baby's mouth with your hands. Generally, all sterilising systems come with tongs for this purpose, which must also be sterilised with the items.

Always read and follow the manufacturer's instructions that come with the sterilising system and ensure that the recommended sterilising times are strictly adhered to.

Prior to using any sterilising system or device or removing items from a steriliser staff will wash their hands. This is the single most effective way of preventing the spread of infection.

Steam Sterilising

Electric steam sterilising is based on hospital methods and is quick and efficient, taking eight to twelve minutes plus cooling time. Care must be taken that only equipment that is safe to boil is sterilised in this manner. For example, some parts of breast pumps cannot be boiled. Bottles, teats and other items must be placed upside down and must have sufficient room (not touching any other item) to ensure they are fully sterilised.

Microwave steamers take around five to eight minutes to work, plus cooling time. Note that metal utensils cannot be used in microwaves. Where possible leave the lid on the steriliser until it has cooled sufficiently to prevent steam burns. If using a microwave for sterilising, ensure that a purpose designed sterilisation container is being used.

Boiling

Most bottle-feeding equipment must be boiled for at least 10 minutes. Ensure the pot you use is large enough for all bottles to be completely submerged and use the pot exclusively for sterilising. Be aware that teats that are frequently boiled become sticky and may need to be replaced more frequently than if using other sterilisation methods.

Chemical Sterilising

Chemical sterilisation is achieved using cold water and a non-toxic liquid or tablet that is added to cold water to create a sterilising solution that is highly effective in killing bacteria. It is extremely safe to use and can be applied to the skin or even swallowed with no harmful effects. Educators need to check that there are no air bubbles left in the bottles to ensure complete sterilisation.

Always read the manufacturer's instructions to ensure the solution is mixed correctly and items are left in the solution for the required amount of time: Generally, they are sterile after half an hour and can be safely left in the solution for up to 24 hours. The solution must be changed daily.

Avoid leaving sterilised empty bottles out on work surfaces as they will quickly lose their sterility. Ideally, sterilisers have built-in storage facilities and bottles can be removed when required.

Note: Dishwashers can be used to clean bottles and equipment, but these items must still be sterilised – the dishwasher does not sterilise.

Storing Sterilised Bottles

If not using sterilised bottles immediately, care needs to be taken to store them correctly to avoid them coming into contact with bacteria.

- Ensure your hands and the work bench are clean
- Using sterile tongs, place the teat 'upside-down' in the bottle, and place the sterilised cap and lid on the bottle
- Store bottles in a clean place away from dust
- If not used within 24 hours sterilised bottles should be sterilised again before use.

PREPARING FORMULA

Before preparing formula

- Ensure your hands and the work bench are clean
- Boil water and leave to cool for approximately 30 minutes. This will ensure that the water is not too hot (70°C is the best temperature to prepare formula as it will dissolve easily).

When preparing infant formula always closely follow the instructions on the tin. In general:

- always wash hands thoroughly prior to preparing formula
- do not compact the formula powder in the scoop, and always ensure the correct ratio of formula to water as specified on the tin: Too little formula powder may leave the infant hungry, whilst too much can cause constipation
- always use a sterilised knife to level the top of the scoop when measuring the formula powder
- without touching the teat shake the bottle well to mix the contents

- cool the made-up formula as quickly as possible: If using immediately run under cold tap water or place in a large bowl of cold water (with the lid on to avoid contaminating the teat).
- if not using immediately made-up formula should be cooled and stored in the fridge.

Heating bottles

- Heat bottles once only
- Do not allow a bottle to cool and then reheat as this can allow germs to grow
- Stand the bottle in a container of hot water for no more than 15 minutes
- Before feeding the infant, check the temperature of the milk by letting a small drop fall on the inside of your wrist
- **Do not** microwave breast milk or bottles
- **Do not** refreeze thawed breast milk
- Discard any milk that has not been used.

STORING BOTTLES

Formula or breast milk needs to be kept refrigerated or frozen. Keep a non-mercury thermometer in your fridge so that you can check that the temperature is below 5°C.

It is best to make up fresh formula for each feed and give it to the child as soon as it has cooled. If this is not possible, the freshly made formula should be cooled immediately and stored in the back of the refrigerator (where it is coldest) for no more than 24 hours. Throw away any formula that is left over. Do not freeze or reheat leftover made-up formula.

Breast milk can be stored in several ways, which include:

1. refrigerated for no more than 72 hours at 4°C or lower (4°C is the typical temperature of a standard fridge).
2. storing bottles in the back of the fridge where it is coldest. Do not store bottles inside the refrigerator door
3. frozen in a separate freezer section of a refrigerator for up to 3 months; if your freezer is a compartment inside the refrigerator, rather than a separate section with its own door, then only store the breast milk for 2 weeks. Frozen in a deep freeze (–18 °C or lower) for 6–12 months.

Frozen breast milk can be thawed:

1. in the refrigerator and used within 24 hours
2. standing the bottle in a container of lukewarm water and used straight away.

SOURCE

Australian Breastfeeding Association www.breastfeeding.asn.au

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

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Safe Food and Health Service Executive. (2013). How to prepare your baby’s bottle.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> Minor edits Additional regulations added Sources checked 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
FEBRUARY 2021	<ul style="list-style-type: none"> minor changes to policy (storage of breast milk in fridge amended) sources checked for currency 	FEBRUARY 2022	
FEBRUARY 2020	<ul style="list-style-type: none"> Added sections: <i>Storing sterilised bottles and Preparing formula</i> <i>Storing breast milk and formula, sterilising Chemical sterilising and heating bottles</i> Additional information added to points Added section on record keeping for parents 	FEBRUARY 2021	
FEBRUARY 2019	<ul style="list-style-type: none"> Re-worded opening statement and purpose. Combined with <i>Sterilising bottles and teats policy</i>. Added sections: <i>Storing sterilised bottles and Preparing formula</i>. 	FEBRUARY 2020	

	<ul style="list-style-type: none"> • Changed heading from <i>Storing bottles</i> to <i>Storing breast milk and formula</i>. • Changed heading from <i>Cold water sterilising</i> to <i>Chemical sterilising</i>. • Additional information added to points • Rearranged the order of points for better flow • Sources checked for currency 	
FEBRUARY 2018	<ul style="list-style-type: none"> • Added the 'related policies' list • Included statements regarding handling & storage to further support compliance 	FEBRUARY 2019
DECEMBER 2017	<ul style="list-style-type: none"> • Updated policy to comply with the revised National Quality Standard 	FEBRUARY 2018
MAY 2017	<ul style="list-style-type: none"> • Modifications made to adhere to Family Day Care Service 	DECEMBER 2017

2.10.1 FORMULA BOTTLE PREPARATION PROCEDURE

1. Thoroughly wash hands and wear gloves when preparing bottles
2. All bottle preparation will be completed in the designated bottle and food preparation area
3. The bottle and food preparation area will always be clean and hygienic and will only ever be used for the purpose intended
4. All food and bottles will be kept totally separate from the nappy change and toileting areas
5. Prepare formula as per the instructions on the formula container and use the provided scoop for measurement, using cooled boiled water for infants under 12 months of age.
6. Once formula is made it must be used or kept in the refrigerator. Discard any leftover formula
7. Formula bottles will not be re-heated as this can allow germs to grow
8. Do not warm bottles in the microwave as microwave ovens distribute heat unevenly. Water in the milk can turn to steam that collects at the top of the bottle, and there is a danger that the infant could be scalded.
9. Educators will use **bottle warmers** that have a thermostat control to heat Infant Formula/Cow's Milk/Breast Milk
 - educators will use the bottle warmer as per the manufacturer's instructions
 - educators will ensure that bottle warmers are inaccessible to children at all times

- bottles will be warmed for less than 10 minutes
10. Test the temperature of bottle contents by placing a few drops on the inside of the wrist before feeding the child
 11. Supervise children with bottles at all times. Children will not be placed on beds or in cots for feeding as this can be a choking hazard.
 12. Give bottles to children before going to bed to reduce the risk of tooth decay
 13. Rinse all children's bottles thoroughly after use and leave to air dry before placing in child's bag
 14. Communicate regularly with families about children's bottle and feeding requirements
 15. Communicate with families about the amount of milk taken by the child and any changes in feeding patterns or routines.

2.10.2 BREAST MILK PREPARATION PROCEDURE

1. Breast milk that has been expressed should be brought to the FDC residence/venue in a clean sterile container labelled with the date of expression and the child's name
2. We encourage families to transport milk in cooler bags; this should be immediately given to the FDC educator, who will put it in the refrigerator
3. Milk will be kept refrigerated at 4°C until required
4. Thoroughly wash hands and wear gloves when preparing bottles
5. All bottle preparation will be done in a designated bottle and food preparation area (located in the kitchen area)
6. The bottle and food preparation area will always be clean and hygienic and will only ever be used for the purpose intended
7. All food and bottles will be kept totally separate from the nappy change and toileting areas
8. Breast milk will be warmed and/or thawed by standing the container/bottle in a container of warm water
9. Shake the bottle before feeding the infant and check the temperature of the milk on the inside of your wrist to ensure it is not too hot
10. If there is not enough breast milk from the family to meet the child's needs that day, individual families will be consulted on what the educator should do in these circumstances

11. To avoid any possible confusion, we will not store unused milk at the FDC residence/venue
12. Unused milk will be returned to the family at the end of the day when they come to collect their child
13. A quiet, private space with a comfortable chair will be provided for mothers/women to breastfeed or express milk at the FDC residence/venue.

2.11 BREASTFEEDING POLICY

Breastfeeding is important for infant’s nutrition. Australian and international health authorities recommend exclusive breastfeeding until around 6 months. At around 6 months, solid food can then be offered while breastfeeding is continued until 12 months or longer if the mother and baby wish (NSW Ministry of Health, 2014, p. 10).

Nurture Childcare and Education Service respects and supports mothers’ wishes to continue to breastfeed, as we understand that returning to work is a common reason for discontinuing breastfeeding.

All FDC educators understand their role and responsibilities to ensure the safe storage and handling of breastmilk and adhere to the feeding practices outlined by families in each approved residence/venue.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
168	Education and Care Services must have policies and procedures
170	Policies and Procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

PURPOSE

Nurture Childcare and Education Services recognises the importance of breast milk for the developing infant and will ensure that all families are aware of our commitment to supporting mothers to continue to provide their child with breast milk whilst engaging FDC educators to provide education and care for their infant/child.

SCOPE

This policy applies to the educators, educator assistants, and families of the Family Day Care Service.

IMPLEMENTATION

An important function of breast milk is to provide the mother's antibodies to the infant, assisting in the prevention of illness whilst the immune system is developed. Mothers of infants up to 12 months old will be supported to continue to breastfeed, whether by providing expressed breast milk or visiting the residence/venue of the FDC educator to feed their infant/child.

Family Day Care Coordination Unit/Nominated Supervisor will:

- provide families with breastfeeding information during enrolment and orientation
- ensure easily accessible brochures, pamphlets and other resources about breastfeeding are available for families at the principal office and also at FDC educator's residence/venues
- ensure an individual breastfeeding support plan is developed in consultation with families, including contingency plans for if the FDC educator does not have enough expressed breast milk to meet the child's needs
- familiarise all FDC educators and educator assistants with the *Breastfeeding Policy* and *Bottle Safety and Preparation Policy* and offer appropriate training as required, including alternate strategies for feeding if an infant will not accept a bottle
- ensure all approved FDC educators that have responsibility for the care of infants and young children are able to provide basic breastfeeding information and are able to refer mothers with breastfeeding concerns to appropriate resources
- promote and ensure all FDC educators promote exclusive breastfeeding until babies are about 6 months old with continued breastfeeding to one year, whilst showing due respect and support to mothers who cannot, or do not wish to breastfeed

Educators will:

- ensure the residence/venue is identified as 'breastfeeding friendly' (see Resources section below)
- provide mothers with a private, clean and quiet place to breastfeed their children or express milk at the residence/venue
- communicate regularly with families about infant and children's feeding patterns and routines
- store and handle expressed breast milk in accordance with the *Bottle Safety and Preparation Policy*
- establish and maintain connections with local breastfeeding support networks, including **WA Health** and the **Australian Breastfeeding Association**
- refer mothers with breastfeeding concerns to appropriate resources, including support services offered by **Australian Breastfeeding Association** groups or private lactation consultants
- familiarise new educator assistants with the *Breastfeeding Policy*
- promote exclusive breastfeeding until babies are about 6 months old with continued breastfeeding to one year, whilst showing due respect and support to mothers who cannot, or do not wish to breastfeed

Families will:

- be informed during orientation of requirements relating to safe transportation of breast milk, labelling bottles and communication requirements between parents and the FDC educator
- be informed of where they are able to breastfeed or express milk at each residence/venue
- be encouraged to communicate regularly with the educator about children's bottle and feeding requirements.

RESOURCES

To request a free *Breastfeeding-friendly zone* sticker for Service entry doors or windows go to: www.health.gov.au/internet/main/publishing.nsf/Content/phd-gug-stickers (see Sheet 2)

Note: This image can also be copied and printed.

Register for *Breastfeeding welcome here* Service for stickers, posters, and more: <https://www.breastfeeding.asn.au/services/welcome>

SOURCE

Australian Breastfeeding Association: www.breastfeeding.asn.au

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

Australian Government National Health and Medical Research Council. (2013). Eat for health: Infant feeding guidelines: Information for health workers.

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NSW Ministry of Health. (2014). Caring for children birth to 5 years: Food, nutrition and learning experiences. <https://www.health.nsw.gov.au/health/Publications/caring-for-children-manual.pdf>

Safe Food and Health Service Executive. (2013). How to prepare your baby's bottle.

State Government Victoria Department of Education and Early Childhood Development (2014). *Promoting Breastfeeding Victorian Breastfeeding Guidelines*

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Minor edits to formatting • No major changes to policy 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2021	<ul style="list-style-type: none"> • Policy reviewed- minor editing • page numbers added • additional Victorian Government resource added • sources checked for currency 		FEBRUARY 2022
FEBRUARY 2020	Addition to opening statement Minor formatting changed Amended Quality Standard element Checked references for currency		FEBRUARY 2021
FEBRUARY 2019	Added resources for stickers & resources. Rewrote opening statement and purpose. Additional information added to points. Duplicated information deleted. Rearranged the order of points for better flow. Points added (some but not all highlighted). Sources checked for currency. New sources/references added.		FEBRUARY 2020
FEBRUARY 2018	Modifications made to adhere to Family Day Care Service		FEBRUARY 2019

2.12 PHYSICAL ENVIRONMENT POLICY

The physical environment can contribute to children's wellbeing, happiness, and creativity as well as promoting the development of independence. It can contribute to and make visible the quality of children's learning and involvement in experiences. The choices made in a Family Day Care service about resources, materials, spaces, layout, air, and light in combination with access to a range of experiences in the indoor and outdoor areas, have a direct impact on the quality of learning opportunities available to children.

Nurture Childcare and education Services will not entertain any educator who has Water feature, Pool or Spa is available in the residence. All Educator must not visit to any place where above facilities are available as part of Service policy and procedure. If any play ground is within the area of Lake or river educator recommended not to visit to those play areas or they must have to provide 100% supervision, children should arm reach away and educator will not use any phone or attend phone call more than seconds to just respond to caller for the safety and security of the children. (Nur)

Any repair into the premises, changes into the environment must be reported to service before 14 days of the commencement of the work, should risk assess the work and work area before taking children in care. Service provider may ask to close the FDC for certain time period if suspect of anything might affect on children' health and safety which educator must have to follow without putting children life in danger.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
81	Sleep and Rest
82	Tobacco, drug and alcohol -free environment
86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises
102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing and security
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements—indoor
108	Space requirements—outdoor space
109	Toilet and hygiene facilities
110	Ventilation and natural light
111	Administrative space
112	Nappy change facilities
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision
116	Assessments of family day care residences and approved family day care venues
117	Glass (additional requirement for family day care)
156	Relationships in groups
168	Education and care service must have policies and procedures
171	Policies and procedures to be kept available
274	Swimming pools

RELATED POLICIES

Animal and Pet Policy Assessment, Approval and Re-assessment of Family Day Care residence and/or venue policy Child Safe Environment Policy Educational Programming Policy Environmentally Responsible Policy Health and Safety Policy Programming Policy	Road Safety Policy Safe Storage of Hazardous Chemicals Policy Sleep and Rest Policy Sun Safety Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

Nurture Childcare and Education Services will ensure the physical environment at each approved residence/venue is safe, stimulating, clean, and well maintained for children, families, educators, and visitors. Children’s awareness of the environment and sustainable practice will be supported through daily practices, resources and interactions. The physical environment will support children’s participation and engagement, development, learning, and safety, and will provide supervised access to positive experiences and inclusive relationships. Our Family Day Care Service ensures all educators provide an environment free from the use of tobacco and alcohol and illicit drugs.

SCOPE

This policy applies to the Approved Provider, Coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Nurture Childcare and Education Services is committed to ensuring all approved educators provide a physical environment that promotes the safety and wellbeing of children and provides effective and adequate supervision of children at all times. All approved Family Day Care residences and/or venues are assessed, including a risk assessment, at least annually by the approved provider to ensure the that the health, safety and wellbeing of children who are educated and cared for by the service are protected. It is imperative that all Educators must have to maintain and keep using the same place or rooms which are being assessed and approved to start FDC. No Educator will allow to change the approved indoor areas or outdoor areas without prior information of two weeks’ notice period. Educator will state the reason and the place to have look again so all the safety features, natural light, air condition and other matters can be assessed and approved if all conditions will be met. All Educators must have to follow service policy and procedure and may have adverse results if not followed the correct procedure before changing any place including report to ECRU for not providing suitable physical environment to the children attending the FDC (Nur)

The Approved Provider/Coordinator and Family Day Care educator responsibilities include the following:

Suitability of the residence or venue (reg.116)

The educator will ensure:

- the physical environment provides adequate supervision at all times
- natural and artificial lighting, appropriate ventilation, heating, cooling and fresh air is incorporated in the residence or venue
- appropriate areas for food preparation are provided
- all required fencing will be maintained in good condition and is compliant with current regulations
- power points not in use have safety caps, all double adaptors and power-boards are out of reach of children, and all electrical cords are secured and not dangling
- sufficient and accessible handwashing, toileting, eating, and sleeping facilities are available
- adequate and appropriate hygienic facilities for nappy changing are provided, which are soundly constructed ensuring children's safety
- the *Sun Safety Policy* and procedures are adhered to at all times
- adequate shade is provided and maintained for outdoor play. Shade options can include a combination of portable, natural and built shade.
- regular shade assessments are conducted to monitor existing shade structures and assist in planning for additional shade
- will inform to Coordinator/Nominated supervisor/Service director if there is any work is about to go on or any changes going to happen into the FDC environment. Educator wanted to make changes in the place where been approved previously. Must notify to service before 14 days and should ready for re-assessment of the residence.

Choosing appropriate resources and equipment

The educator will ensure:

- appropriately sized furniture and equipment will be provided in both the indoor and outdoor environment according to the number, ages and abilities of children attending, or likely to attend the service at the residence or venue
- resources and equipment will be chosen to reflect the cultural diversity of the FDC Service's community and the cultural diversity of contemporary Australia, including the incorporation of the Aboriginal and Torres Strait Islander community

- children will be provided with resources and equipment that encourages appropriate challenges and risk taking in accordance with their individual developmental level
- specific equipment requirements of children with additional needs will be catered for to ensure an inclusive environment
- a maintenance log and register of toys and equipment is maintained
- all purchases, including equipment and consumables for the daily running of their service will be the responsibility of the educator
- all equipment, including cots, highchairs, car seats, booster seats, strollers/prams etc meet relevant Australian Safety Standards and are assembled and maintained in accordance with safety guidelines
- families are provided with the latest safety information on items such as cots, highchairs, car seats, etc.
- climbing equipment will be set up in a safe way and compliant with Australian Safety Standards incorporating soft fall materials wherever climbing equipment is set up
- playground surfaces are compliant to specific Australian standards
- a natural environment for children to explore and experience will be provided which may include plants, trees, gardens, rock, mud and/or water
- they will participate in on-going professional development in order to enhance children's learning and ensuring a safe and educational environment
- the environment will incorporate commercial, natural, recycled, homemade, and real resources that can be used in a variety of ways to encourage children's learning and creativity
- a variety of indoor and outdoor experiences will be provided, catering for children's interests and abilities
- Educator who is not willing to provide age-appropriate resources will be warned verbally and then in writing and if no action will be taken then service will buy the resources and will provide to educator so children can explore and learn and will be charged from their payments without any notice after. But if Educator not ready to improve in their environment, then service might terminate to Educator due to not following the policy and procedure and not cooperating to service and not following correct steps for the best development of the children. If educator is having financial problem them, they must have to communicate to the service and service will provide finances to buy the resources and will deduct in small instalments to support educator and children attending the day care. (Nur)

Laundering of soiled items

The educator will:

- ensure soiled clothing is returned to a child's home for laundering

- remove soiled content and place into a plastic bag. Items will be stored securely in a sealed container or double-bagged before being placed in the child's bag.

Sleep/rest environment

The educator will:

- strictly adhere to the *Sleep and Rest Policy* and procedures
- position cots and beds to encourage a calm and relaxing environment. There will be a minimum space of 300mm between each cot to reduce the possibility of cross infection.
- regularly check cots and beds to ensure all bolts and fittings are secure and safe
- ensure all cots meet the mandatory Australian Standard for Cots- (AS/NZS 2172)
- ensure that mattresses are in good condition- clean, firm and flat and fit the cot base with no more than 20mm gap between the mattress sides and ends
- store beds in a dry area and in a location that is easy to access
- use correct manual handling techniques when moving the beds
- use light bedding materials for cots and beds
- ensure a safe environment by making regular safety checks to identify any possible hazards such as hanging cords, strings from blinds, curtains or electrical devices

2.12.1 Educator taking children less than 1 year must have to do safe sleep training through red nose website. (Nur)

2.12.2 No portable cots are allowed into the FDC service (Nur)

Ongoing Maintenance

The approved provider and educator will:

- continuously reflect on the physical environment to ensure they provide an environment that is safe, stimulating and engaging for all who interact with it
- conduct risk assessments of each residence or venue at least annually
- ensure that the approved residence or venue and its grounds comply with National Regulations
- ensure each residence/venue has regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any further recommended treatments as a result of the findings from the pest control check will be carried out in a timely manner.
- ensure playground surfacing and soft fall is checked regularly.
- **Educator must have to follow guidelines given into the monthly visit report. If Educator has been advised or given any instructions to follow then educator must have to complete the required repair or maintain the area in between the given time or date and must have to provide**

- photograph or coordinator or nominated supervisor will do follow-up visit so premises and resources can be assessed for the suitability of the FDC environment. (Nur)
- if Educator will not able to complete the work in given time, then they must have to ask for extended time in which educator must have to complete the advised work done. Otherwise, two warnings will be issued and then educator may be suspended or terminate on behalf of not providing child safe environment. (Nur)
 - If Coordinator or Nominated supervisor finds anything which is very urgent maintain or have any threat on the safety or security of children then educator must have to go to repair without taking time immediately and children must be away from work area and risk assessment must be conducted before deciding to the open the day care for children and taking children in care. (Nur)
 - If Coordinator or nominated supervisor excluded any FDC area and thinks not safe then educator must not use that area for children play or activities. If done so might have result of suspension or termination and complete report will be send to ECRU to provide further compliance action against continuous non-compliance or breach by Educator. And if directed and not followed the directions given by the coordinator ort Nominated supervisor and received any breach notice then Educator will be responsible for those fines and proceedings. (Nur)
 - All FDC used area must be intact, Maintained, and ready to use and inspections all time during operation hours of FDC. Toilet and other areas must have paints and plaster intact and neat and clean. (Nur)
 - All resourced must be age appropriate and must not have height of 600mm to prevent to children from trip or fall hazard and ground floor must be safe for trip or fall should have appropriate matt on floor which can prevent child from hazard of trip or fall. (Nur)
 - Any glazed area must be safe according to Australian and NZ safety standards and or must have safety film on to prevent glass shattering or breaking on to the children and to upkeep the FDC environment safe and secure for the children in care. (Nur)
 - All Indoor and outdoor areas must be painted and should not chipped or cracked which can be eaten or children can put in their mouth. (Nur)
 - All Walls and areas should be clean and free from webs, spiders, rust, mice, cockroaches and should be pest control annually. (Nur)
 - Second exit must be neat and clean and ready to use or inspect all the time. There should not anything on the way which can be hazard or harm during exiting from second exit. (Nur)
 - Educator must have to do rehearsal and fire drill through all designated exit areas so children can familiar and understand the other ways of safety except of usual or main exit as well. (Nur)
 - All Educator must have second exit and residence without second exit must not approved by Service coordinator or Nominated supervisor because of safety of Educator and Children in care. (Nur)

- Family day care setup should be according to children's interest, choice and need so they could have number of choices to explore and the environment must be address to child agency. (Nur)

Daily Safety Checks

The educator and educator assistants (if relevant) will conduct daily inspections of the premises and environment before children arrive. *The Opening Checklist and Outdoor Cleaning/Safety Checklist will be used as the procedure to conduct these safety checks.*

This inspection will include:

- residence perimeters
- fences/fence line
- gates
- paths
- buildings
- all rooms accessible by children
- fixed equipment
- sand pit/ mud pit (if applicable)
- water features/spa/swimming pools (

2.12.3 Must not visit to any place where water feature/Spa and swimming pools are existed as service don't support deep water activities)

This must be done in order to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals. In the event of a sharp object being found (for example a syringe) the educator will wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council.

Similarly, trees in the grounds must be checked regularly for overhanging, dead, or dangerous looking branches as well as checked for any infestations.

General Cleaning

The educator will:

- use structured *cleaning schedules* to ensure that all cleaning is carried out regularly and thoroughly
- clean the residence or venue at the end of each day and throughout the day as needed
- ensure accidents and spills are cleaned up as quickly as possible to ensure that the FDC service always maintains a high level of cleanliness and hygiene.
- Educators must have to sanitise and clean all toys with soapy water at-least weekly, toys which has put in mouth by child must be washed on the same time and children should advised not to

put in their mouth. Any dirty toys must be washed same time or should remove from the play area and out of reach of children if not possible to do same time. (Nur)

- All Cleaning products must be kept away from the reach of children and must be in locked area. (Nur)
- educators will adhere to our *Health and Safety Policy*

Storage and use of dangerous chemicals, substances, medicines or equipment

The educator will:

- ensure all procedures are followed to maintain a safe environment
- All Educator must have to KEEP ALL substances, chemicals a and medicine or equipment out of reach of children and in any circumstances, educator must not expose these things to children for children's health and safety. (Nur)
- adhere to the Service's *Safe Storage of Hazardous Chemicals Policy*

2.12.4 Bathroom

The educator will:

- provide clear supervision to children when in use (having regard to the need to maintain the rights and dignity of children)
- encourage children to follow hygiene practices- for example: hand washing, toileting
- maintain clean bathroom facilities, including using appropriate signage when the bathroom floor is wet.
- There should not any cleaning product, chemical, Razor, shampoo including but not limited should in reach of children and must be in lockable area. (Nur)

2.12.5 Maintenance of Fire Equipment

The educator will:

- ensure all fire equipment at the residence or venue is maintained as per the legal standards
- employ external agencies to assist with this maintenance
- ensure batteries in smoke alarms are replaced annually

2.12.6 Sun Protection

The educator will:

- adhere to our FDC Service *Sun Safety Policy* and procedures at all times
- implement a combination of sun protection measures whenever UV Index levels reach 3 and above
- educators will continue to check the UV rating prior to going outdoors and as the heat increases throughout the day (see *Sun Safety Policy* for further information)

- monitor the temperature of outdoor equipment and surfaces during the day to ensure the area and equipment is safe for children to play (see: Daily Playground Surface Temperature Check)

2.12.7 Water Safety

Legal requirements for pools, spas, paddling pools and inflatable pools vary across Australia. Local conditions or requirements may also apply, so it is very important to check with your local council.

National safety standards include the following recommendations:

- a) enclose swimming pools and spas, with a barrier that complies with the current Australian Standard, and that completely separates them from the house and other parts of the yard
 - b) enclose paddling pools and inflatable pools that can be filled to more than 300mm of water with a barrier that complies with the current Australian Standard, and that completely separates them from the house and other parts of the yard
 - c) make spas inaccessible with a locked pool cover or an isolation barrier that conforms to the above Standard
 - d) isolation barriers should be at least 1.2m high and without footholds that would allow a young child to climb over
 - e) ensure that gates are self-closing, self-latching and have a child-resistant lock
 - f) do not allow direct access from the house to the pool
 - g) if a door allows access to the pool, ensure that it has a self-closing, child-resistant lock
 - h) windows that allow direct access to a pool or spa should not open more than 100mm
 - i) remove objects that could help a child to climb over a fence or open a gate, door or window, including furniture and climbable plants or shrubs growing on the pool fence
 - j) remove the ladder from above-ground pools and store safely when not in use
 - k) display a permanent notice within the pool area detailing resuscitation procedures
 - l) make pool filters inaccessible to children
 - m) swimming pools at a Family Day Care residence or approved Family Day Care venue of the Service in NSW is fenced in accordance with the requirements for fencing a new swimming pool under the [Swimming Pools Act 1992 of New South Wales](#)
- make sure no child swims in any water without:
 - written permission from family member to learn water safety and swimming
 - appropriate educator/child ratios in place.
 - having sufficient numbers of educators present who have first aid or recognised water safety and rescue procedures
 - at all times children near water are closely supervised. A child will never be left unattended near any water.

- ensure that all water containers are made inaccessible to children and also make sure children’s play areas are safely fenced off from water hazards such as rivers, dams, creeks, lakes, irrigation channels, wells etc.
- immediately empty all wading pools/water troughs etc. after every use, storage should prevent the collection of water e.g. upright/inverted, also check grounds after rain or watering and empty water that has collected in holes or containers.
- ensure wading/water trough are hygienically cleaned, disinfected and chlorinated appropriately:
 - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant.
 - wash away disinfectant before filling trough.

SOURCE

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

Cancer Council NSW: <https://www.cancercouncil.com.au>

Cancer Council Australia. Be SunSmart. <https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/be-sunsmart>

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

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

Kidsafe Family Day Care Guidelines. 7th edition. (2020).

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

NSW Government *Kids and Traffic Early Childhood Road Safety Education Program*

Red nose Safe environment <https://rednose.org.au/section/safe-environment>

Revised National Quality Standard. (2018).

Swimming Pools Act 1992

Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • minor edits and inclusions to policy • sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2021	<ul style="list-style-type: none"> • re-write of policy to make more relevant and succinct 		FEBRUARY 2022

	<ul style="list-style-type: none"> repetitive points removed as these are covered in other key policies- Child Safe Environments, Storage of Hazardous Materials Information specific to Sun Safety removed- (covered in Sun Safety policy) additional KidSafe Family Day Care Guidelines included for referencing indoor/outdoor checklist moved to end of policy as a resource 	
FEBRUARY 2020	<ul style="list-style-type: none"> Minor changes to grammar, content changed Sources checked for currency Additional sources added inclusion of nappy change area/cot requirements 	FEBRUARY 2021
FEBRUARY 2019	Introductory statement and purpose modified. Grammar, punctuation and spelling edited. Additional information added to points. Sources/references corrected, updated, and alphabetised.	FEBRUARY 2020
MARCH 2018	Added the 'related policies' section Terminology changes made throughout policy to further support compliance and delivery	FEBRUARY 2019
DECEMBER 2017	Modifications made to comply with changes to the National Quality Standard	MARCH 2018
MARCH 2017	Modifications made to comply with Family Day Care Services	MARCH 2018

2.12.8 Resource Checklist

DAILY SAFETY CHECKLIST OUTDOOR/INDOOR ENVIRONMENT

Checklist: Outdoor:

- Bikes and wheeled toys** –correctly fitted helmets are worn every time children use ‘bikes’ and wheeled toys
- Building maintenance** – regularly maintain and check for hazards, check building is in a safe, clean and hygienic condition. Records of any damage and subsequent repairs are kept.
- Doors** – have finger jam protectors
- Dust mites, pet allergens** – regular dusting and vacuuming
- Educator’s personal items** –personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children
- Ensure children are visible and supervised at all times.** High-risk areas and climbing and other outdoor play equipment are supervised at all times. Hazardous equipment, machinery, chemicals, and any other materials is inaccessible to children.
- FDC home driveway** – ensure family members are aware of pedestrian safety rules such as holding their child’s hand and alighting children from the safety door. Families must always supervise their children in the car park to prevent accidents and injuries, which could occur as a result of reversing vehicles
- Fences** – securely and effectively provide a suitable barrier to all sides of outdoor play areas from roads, water hazards, and driveways. Fences have correct height for the purpose. Childproof self-locking devices are installed on gates
- Finger entrapment** – all holes or openings in playground equipment are between 8-25 mm to avoid finger entrapment
- First aid kit** is approved, maintained, and accessible throughout outdoor play
- Garbage** – safe and prompt disposal. Lidded secure bins are used that prevent child access and are maintained in a clean and safe condition
- Garden** and renovation debris removed. Branches and bushes are regularly trimmed.
- Garages and sheds** – are keep locked
- Hazardous Plants** – are identified and removed or made inaccessible to children
- Heating, cooling (air conditioners and fans) ventilation, lighting** – is comfortable, safe, maintained, guarded and kept out of reach of children
- Machinery, tools and equipment** –all engine operated or other hazardous equipment, tools or machinery are stored securely and are inaccessible to children
- Non-slip** floors, stairs, and steps are used and nonporous indoor floors for easy cleaning
- Renovation** - dangers e.g., lead, asbestos, holes and excavations –risks are minimised according to the situation (risk assessments must be conducted and approved by Approved Provider)
- Pesticide residue** - dangerous chemicals are not be used to remove vermin
- Pet and animal droppings** are cleared or inaccessible to children in outdoor areas, dogs are excluded from children’s play areas, pet interactions with children are supervised

- Play equipment** that is higher than 60cm has soft fall installed underneath at least 25cm in depth and extends 1.9m from the perimeter of the equipment as per Australian Standards (AS 4685). Outdoor play equipment is placed away from paths and solid garden edging.
- Play equipment** – check for sharp edges, splinters or protruding parts; check for spiders and insects; inspect chains and metal components for rust, wear and tear
- Pool safety, fencing and gate compliance**, paddling pools are emptied immediately after use, turned upside down, and disinfected if soiled
- Safe play rules and adequate safe play areas** – we talk with children about how to play safely. We maintain safe layouts for outdoor play areas to avoid collisions between children.
- Safety glass** is installed according to the Australian Standards on all glass doors and windows accessible to children, and safety decals on both sliding doors and plate glass doors at child and adult eye level or guarded by barriers that prevent a child from striking or falling against the glass
- Sandpits** – are covered when not in use, regularly cleaned, raked, and sand soiled by faeces or blood is removed. Sandpits are hosed and disinfected after removing contaminated sand and material
- Security** - unauthorised access is minimized with appropriate fencing and locks
- Soft fall** - appropriate ground cover under outdoor climbing and play equipment, meets Australian standards
- Spills** – are cleaned up as they occur
- Sun protection** - clothing, hats, and sunscreen, for un-shaded areas – we minimise play at peak sun exposure times. A sunshade or natural shade covers sandpits and play areas.
- Supervision and visibility of children** –children are visible and supervised at all times. High-risk areas requiring extra supervision include adventurous play experiences, playground equipment, ball sports
- Surfacing used underneath and around equipment** complies with Australian and New Zealand Standards AS/NZS 4422:2016 and is maintained regularly; materials may need to be raked, redistributed and checked weekly for spiders, sharp objects or animal litter
- Under Service access** (including buildings on stilts and footings) – access is blocked or locked
- Window fly screens** are securely fitted, maintained, and permanent
- Water hazards** – are covered and made inaccessible to children, e.g. ponds, dams, spas, creeks, nappy buckets
- Water troughs** are used under adult supervision only and will not be used without a stand, keeping it off the ground. Children remain standing on the ground whilst using the water trough.

Checklist: Indoors

- Access for children and adults with disability** - safe access is provided into, within and out of the Service. Toilet and washing facilities, are checked for hazards for wheelchairs and people with impaired sight, hearing or mobility
- Barriers** - age appropriate, child proof, self-locking barriers are in place for balconies, stairways, kitchen, bathroom, laundry, garage, other levels in the residence or venue, front and back garden
- Children at risk** – we maintain extra security and supervision for children at special risk
- Choking hazards** – the environment is monitored for small toy parts, beads, nuts, blind and curtain cords, plastic bags, sandwich bags and balloons
- Decorations and children’s artwork** – are not placed near ceiling fans, air conditioners or heaters. The use of tacks, pins, and staples is avoided.
- Emergency evacuations** –an evacuation plan and emergency contact numbers are displayed, families are informed, and evacuation procedures are regularly practiced
- Fire** – fire blanket, extinguisher, fire exits, smoke detectors, electrical safety switch are checked regularly and serviced as required
- First aid kit** with approved contents is maintained and accessible. Educators and educator assistants have current First Aid certificates
- Furniture and nursery equipment** - stable, maintained and meets Australian safety standards
- Guards and make inaccessible to Children:** heaters, coolers, fireplaces, stoves, microwaves, power points, and office equipment. Heaters are away from children’s cots
- Hazardous indoor plants** are identified or removed
- Heaters** –children cannot come in contact with hot surfaces. It is preferable to use heating where combustion products are ducted outside. If gas heating is used ensure there is adequate ventilation while the heater is operating.
- Hot water** - the hot water supply is regulated so as to keep it below the temperature at which a child can be scalded (the current KidSafe NSW Inc. recommendation is below 43.5°C).
- Machinery, tools and equipment** – all office and classroom machinery, tools, and equipment is stored securely and inaccessible to children.
- Nappy Changing-** ensure nappy changing arrangements are safe and suitable for ages of children attending service
- Noise** – we reduce excessive exposure
- Non-slip, non-porous** floors and stairs are in the building
- Pets and animals** –families are informed of pets being kept on the premises and plans to obtain new pets. Pets are vaccinated, wormed, don’t have fleas, are clean, and healthy. Pet accessories such as pet food, litter boxes, and pet toys are kept away from children. Dogs are excluded from children’s play areas. Children-pet interactions are minimal and supervised at all times.
- Record details** - Parents are notified of any child accident

- Safe play rules and adequate play spaces:** we discourage running indoors and provide safe furniture layout to avoid collisions
- Safety glass used and installed** according to Australian Standards, and Australian Building Codes on all glass doors and windows accessible to children, **safety decals** on sliding doors and plate glass doors at child and adult eye level
- Security** all entry doors are locked at all times and doorbells are on doors
- Smoke, alcohol and drug free environment** in all areas of residence/venue accessed by children
- Stairways,** ramps, corridors, hallway, external balcony are enclosed to prevent a child falling.
- Store in locked cabinet** any unsafe items, e.g. chemicals, medicines, razors, knives and electrical equipment
- Supervision and visibility of children** – children are visible and supervised at all times. High-risk areas requiring extra supervision include children in highchairs, playpens and play areas, on change tables, and in nappy change and toilet areas.
- Toys** – meet safety standards, age appropriate, maintained, and non-toxic.

2.13 CHILDREN'S BELONGINGS POLICY

We acknowledge that children will bring or carry certain personal belongings to the Family Day Care residence or venue and as such, it is important to clarify responsibilities. This policy therefore outlines the types of belongings that children may bring with them on a regular basis and the level of associated responsibility.

Parents must have to notify to Educator if they are providing anything which might be Child's comfy toy or anything which might expensive or valuable for parents to keep safe and secure and must have to collect their stuff on same day to avoid any property loss. Anything which is not notified to educator and educator is not aware or can't find those belonging is not responsible for it and can't be liable to pay for those goods. (Nur)

We also request to parents not to provide anything which is valuable ornaments, clothing, comfy toy which might attract to other children and might have sharing problem for the children although educator always respect and will take care of child's belonging according to code of conduct and code of ethics but still some children do not understand the ownership of any toy or belonging, they just got attracted and wanted to grab it or want to play with special thing of another child. In this circumstances educator might

put those belonging away to give to parents once they ready to pick their child in case of any conflict arise.

(Nur)

National Quality Standard (NQS)

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

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Interactions in groups
168	Education and care services must have policies and procedures

RELATED POLICIES

<p>Dealing with Complaints Policy (Family)</p> <p>Enrolment Policy</p> <p>Family Communication Policy</p>	<p>Orientation of New Families Policy</p> <p>Respect for children</p>
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PURPOSE

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

SCOPE

This policy applies to educators, educator assistants, children, and families of the Family Day Care Service.

IMPLEMENTATION

It can be distressing for children to misplace their toys from home whilst attending an education and care service. At times, toys brought from home can also cause conflict between children at the FDC service. Children often want to share or show other children or educators their special items from home, however, these 'treasures' may be inadvertently broken or lost. To save the upset and heartache, parents are requested to encourage children to leave their toys at home, unless they are essential to a child's emotional wellbeing and/or sense of belonging (security items). FDC educators have numerous stimulating and challenging toys and resources catering to children's interests available to play with each day in each residence or venue.

FAMILY DAY CARE EDUCATORS AND EDUCATOR ASSISTANTS WILL:

- allow children to bring personal belongings for news, including special items from gifts, holiday souvenirs, or items relating to a current interest
- facilitate opportunities for children to participate in news as a way to encourage children to talk about their special toy or personal belonging during group time. This practice encourages
 - children's social development
 - children to verbalise thoughts, fears, and feelings
 - and broadens the cultural and social understandings of all children involved in group time activities
 - the development of language skills, and
 - provides an opportunity for development of special interests for the group.
- store children's items in a safe place throughout the day, retrieving them for news time, and then returning them to safety
- remind parents, that if they choose to leave belongings in the FDC Service during the day, it is completely at their own risk.
- re-iterate our policy, that if personal belongings are particularly valuable, fragile, or hold irreplaceable emotional value, it is recommended that the child bring in the item, show it to friends and educator, and then have the parent take it with them. This allows for the child to share the excitement and experience without the risk of loss or damage.
- provide appropriate storage for lost property that will be available to children and families at all times
- manage any grievances or concerns related to lost, damaged, or stolen property of the children in accordance with the **Grievance Dealing with Complaints** Policy and Procedure.
- request that if children wish to bring in DVD/Blu-ray, music, or electronic game, these should be discussed with management and be 'G-rated'. Although media rated 'PG' (Parental Guidance) is

generally appropriate for children, it cannot be assumed that all parents want their children exposed to this rating.

- take as much care as possible in ensuring that personal belongings are returned to the correct family. To assist us with this we ask families to ensure that any item that can be labelled, either has the child's name on it, or the child's initials (for example, on the tag of soft toys where space is limited). If an item cannot be labelled it is the parent's responsibility to advise an educator that their child has this item in their possession.
- encourage children who bring special belongings into care to place them in a special '*toys from home*' box to reduce the prospect of them becoming lost or broken. For added security this box will be placed in a position that requires the assistance of the FDC educator to access.
- enforce a non-violent toy policy in which we seek family assistance in preventing their children from bringing in violent toys from home. Any such toys will be removed from the child immediately and placed in the reception area/**front entry** for parental collection at the end of the day.
- allow children to wear dress-up clothes to care, however, we ask that accessories such as guns, knives, swords, or other weaponry are left at home. Such items can encourage violent play and may present a danger to the child and others within our child care environment.
- will take as much care as possible in ensuring that children's clothing and linen items are returned to their correct family. The labelling of all items can help the FDC educator achieve this. However, the FDC educator cannot take responsibility for any damaged, lost or stolen items.
- actively encourage children to care for their belongings by:
 - reminding children appropriately when belongings need to be placed in storage. For example, lunch box into bag.
 - providing suitable storage to keep belongings safe
 - negotiating a secure and safe position with families for any item or personal belonging that is either special, expensive, or at risk of being damaged but is nevertheless being left at the residence or venue.
- inform families through relevant newsletters and publications such as the *Family Handbook* of appropriate personal belongings required at the FDC Service each day.

FAMILIES WILL:

Aware to Educator before giving any special toy to child and will collect once picking up children from FDC. It is family member's responsibility to take care of their child's belonging and remind educator on same day if anything left behind in FDC.

- be responsible for providing the child with appropriate belongings and property required for active participation in all activities and experiences. This property may include (but is not limited to):
 - enclosed footwear
 - weather appropriate clothing
 - sun safe clothing
 - wide brim hat
 - suitable School bag (backpack)
 - container/flask for water
 - appropriate food and lunch box
- ensure all personal property and belongings are clearly named or labelled or have been shown to the FDC educator upon arrival if labelling is not possible.

Comfort toys / Security items

Many children have a ‘security’ item that soothes them and helps them to cope throughout a busy day. Security items may include things such as a special blanket, dummy, soft toy, or even a strip of satin ribbon from a blanket etc.

We recommend that if children have a comfort toy or security item that it is labelled (if possible) and brought to the FDC service each day. When not required or in use we will ensure that it has a designated storage space that is known to the child.

Parents are encouraged to regularly discuss the use of comfort toys/security items with their FDC educator as their child’s needs change.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Early Childhood Australia Code of Ethics. (2016).
[Education and Care Services National Regulations](#). (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (amended 2020).
Privacy Act 1988.
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
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POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> minor edits to policy- change of policy name- <i>Dealing with Complaints</i> 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
MARCH 2021	<ul style="list-style-type: none"> addition of related regulations minor edits 	MARCH 2022	
MARCH 2020	<ul style="list-style-type: none"> Additional information added to roles of educators and staff Small edits to sentences to improve flow Sources checked for currency 	MARCH 2021	
MARCH 2019	New policy drafted for Family Day Care Services	MARCH 2020	

2.14 SUPERVISION POLICY

Supervision is an integral part of the whole care and education experience. *“At its most basic level, supervision helps to protect children from hazards or harm that may arise in their daily experiences in play, interactions with others, and daily routines.”* (Victoria Department of Education and Training, 2010, p.1).

Effective supervision allows FDC educators to actively engage in play and leisure opportunities that are meaningful to children and support their wellbeing, development and learning.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
100	Risk assessment must be conducted before an excursion
101	Conduct of risk assessment for excursions
102	Authorisation for excursions
116	Assessments of family day care residences and approved family day care venues

119	Family day care educator and family day care educator assistant to be at least 18 years old
121	Application of Division 3
123A	Family day care co-ordinator to educator ratios- family day care service
124	Number of children who can be educated and cared for-family day care
144	Family day care educator assistant
166	Children not to be alone with visitors
168	Education and care service must have policies and procedures
169	Additional policies and procedures- family day care service
176	Time to notify certain circumstances to Regulatory Authorities
CHILDREN (EDUCATION AND CARE SERVICES) NATIONAL LAW	
165	Offence to inadequately supervise children
S.167	Offence relating to protection of children from harm and hazards
S.174	Offence to fail to notify certain information to Regulatory Authority

RELATED POLICIES

Administration of Medication Policy Adventurous Play Policy Arrival and Departure Policy Bottle Safety and Preparation Policy Child Safe Environment Policy Code of Conduct Policy Cyber Safety Policy Emergency Evacuation Policy	Handwashing Policy Incident, Injury, Trauma and Illness Policy Nappy Change and Toileting Policy Physical Environment Policy Road Safety Policy Safe Transportation Policy Sleep and Rest Policy Water Safety Policy
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PURPOSE

Family Day Care educators have a duty of care to ensure children are supervised at all times, maintaining a safe and secure environment adhering to Education and Care Services National Law National Regulations. Supervision, together with thoughtful design and arrangement of children's environments, assists in the prevention and severity of injury to children.

FDC educators will actively supervise children, identifying risks and taking all necessary steps to prevent or minimise injury. Effective supervision of children also provides FDC educators with the opportunity to support and build on children's play experiences.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

The Family Day Care environment requires careful consideration for supervision as there may be a variety of ages of children attending for care and before/after school care. The FDC educator must respond to each child's developmental needs and provide a child safe environment at all times. Children may be involved in play in different parts of the FDC residence or approved venue and the educator will need to consider how to effectively supervise children. Supervision of infants and toddlers who are sleeping also need careful consideration to ensure the FDC educator can see and hear children. (See: *Sleep and Rest Policy*).

(Source: ACECQA, 2020).

2.14.1 Must Read Supervision condition to remain with Service

The Approved Provider, Coordinator, Family Day Care Educator and/or Family Day Care Educator Assistant must ensure:

That educator or assistant will not use any phone call or busy in any type of the activity or talk which might affect the supervision of children. It is educator's duty of care that children must not left alone with any person, friend, family members, visitor, children with older age, educator's own children, alone at home, locked in room, near to any park which have lake, river, ocean, water feature, pond, swimming pool, where strangers or animals are present, high resources play area including but not limited.

Children always should at front of eye of educator and must not arm reach away.

100% Supervision is required to take care of children and if educator visits to other educator, then must not engage in their own or personals communication or talk which diverts their attention and stops them to provide full supervision and care.

Educator cannot leave children on assumption bases that child/ren do not cross their limit or their boundary and will not do anything which is unsafe. Leaving children on their own wisdom is a big mistake of educator which they may pay for whole life.

Educator must have to provide supervision when children do hand wash, using toilet facilities, educator cooks or present in kitchen, when children are using any high play resources, when cooking on gas or boiling water, handling heavy or sharp, hot stuff during care of children or

activities must be avoided and should do it later when children are sleeping or leave for the day.

Educator also have to take care of child during transportation and visiting to school or park.

In any circumstances if educator not providing full supervision and doing mistake then it is educator's full responsibility to pay for breach, non-compliance or any penalty including penalty to service because of educator's misconduct or non-supervision of child/ren. Educator can-not make any excuse or can give any reason where it is clearly identifying that educator did not do his/her duty properly and will responsible for the liability to pay to on behalf of her and service (Nur)

- that the Family Day Care approved residence or approved venue is organized and maintained to facilitate effective supervision of children while maintaining the rights and dignity of all children
- regulatory authorities are notified of any serious incident or complaints alleging the safety, health or wellbeing of children has been compromised within 24hours of the incident or the time that the person becomes aware of the incident or complaint. This includes if an ambulance was call in response (not as a precaution) to the incident, situation or event.
- parents are notified as soon as practicable but within 24 hours if their child is involved in a serious incident/situation at the Service. Details of the incident/situation are to be recorded on the *Incident, Injury, Trauma and Illness Record*.
- FDC educators avoid activities or actions that will distract them from supervision, such as speaking on the phone for prolonged periods of time, taking personal phone calls, checking mobile phones or administrative tasks
- FDC educators respond to the different levels of supervision required due to children's ages and individual needs- (supervision of infants and toddlers will require children remaining in close proximity to the FDC educator, where older school aged children may be able to be effectively supervised whilst in the outdoor environment)
- each child will be within sight and/or hearing of the FDC educator or educator assistant
- children are never left in an unattended vehicle under any circumstances. This applies even if the vehicle remains in sight of the FDC educator and/or educator assistant
- adequate supervision is provided when children are transported in a vehicle at all times (see *Safe Transportation Policy* and *Road Safety Policy*)
- FDC educators hold minimum educator qualifications, or 'actively working towards' an ACECQA approved qualification

- the required educator-to-child ratio and maximum number of preschool age children or under is adhered to at all times-
 - 1:7 educator to child ratio
 - Maximum of 4 children preschool age or under.
 - Ratio includes the educator’s own children younger than 13 years of age if there is no other adult to care for them.
- they conduct risk assessments and plan ongoing supervision taking into consideration the layout of the premises and grounds, any higher risk activities, the presence of any animals, the location of activities and the location of bathroom and nappy change facilities. The supervision plan and strategies will be displayed for families in all rooms and in the outdoor area.
- they develop, maintain and regularly review a supervision plan and strategies for both the indoor and outdoor areas, which will support the FDC educator and educator assistant (if in attendance) to position themselves effectively to allow them to observe the maximum area possible.
- actively engage with children to support their learning whilst actively supervising and observing children
- implement vigilant supervision strategies for hygiene requirements including:
 - regular handwashing
 - toileting
 - cough and sneeze routines- using disposable tissues and handwashing
- a Risk Assessment and Management Plan is carried out before an authorization is requested for an excursion. The risk assessment will consider and identify the number of adults required to ensure continuous adequate supervision throughout the excursion.
- they scan the environment whilst interacting with individuals or small groups
- adequately supervise children during rest time in accordance with the *Sleep and Rest Policy* and relevant legislative requirements
- listen closely to children whilst supervising areas that may not be in a direct line of sight noticing changes in volume or tone of voice
- ensure that hazardous equipment and chemicals are inaccessible to children

Consideration will be given to the design and arrangement of children’s environments to support active supervision by:

- using supervision skills to recognise areas of risk therefore reducing the potential for injury or incident to children and adults.
- providing direct, constant and proximal monitoring to children undertaking activities that involve some risk (e.g.: carpentry, water play, climbing)

- making decisions and guiding educator assistants to make decisions about when children’s play needs to be interrupted and redirected
- supporting educator assistants with specific strategies positioning, peripheral vision and monitoring children’s arrival and departure from the FDC residence or venue.

SOURCE

Australian Children’s Education & Care Quality Authority. (2020). *Active Supervision: Ensuring safety and promoting learning.*

Australian Children’s Education & Care Quality Authority. Children’s Health and Safety. *An analysis of Quality Area 2 of the National Quality Standard.* Occasional Paper 2. (2016).

Early Childhood Australia Code of Ethics. (2016).

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

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

Frith, J., Kambouris, N., & O’Grady, O. (2003). *Health & safety in children’s centres: Model policies & practices* (2nd ed).

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

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

Revised National Quality Standard. (2018).

Tansey, S. (2005). Supervision in children’s services [Putting Children First, the Newsletter of the National Childcare Accreditation Council], Issue 15, p. 8-11.

Victoria Department of Education and Training. (2012). *Supervision* [Practice Note 12]:

<https://www.education.vic.gov.au/Documents/childhood/providers/regulation/pracnotessuperv.pdf>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance • additional information regarding consideration of supervision added to implementation section • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
APRIL 2021	<ul style="list-style-type: none"> • policy review - minor edits • sources checked for currency 		APRIL 2022
APRIL 2020	rearranged some points for better flow amended National Regulations specifically for FDC additional information added in some sections supervision for handwashing added		APRIL 2021

APRIL 2019	Terminology changed to be specific to FDC services. Introduction changed Additional information added to points. Irrelevant information deleted.	APRIL 2020
APRIL 2018	Minor terminology changes made to improve understanding and implementation	APRIL 2019
DECEMBER 2017	Updated policy to comply with current National Quality Standard	APRIL 2018
MAY 2017	Policy updated to comply with Family Day Care Regulations	TBA

2.15 ANIMAL AND PET POLICY

Nurture Childcare and Education Services believes that having a relationship with a pet and/or animal can help children develop a caring disposition and skills such as nurturing, responsibility, empathy and improved communication. Having a pet in an early childhood environment enables children who are not otherwise exposed to animals learn these skills. The pet will become part of the daily educational program and lead to activities and learning about other animals. The safety of children, however, is always our first priority. Our Family Day Care Service will ensure that no animal poses a health or safety risk to children, adults or visitors in approved family day care residences or venues.

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.
2.2	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		
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.

3.2.3	Environmentally responsible	The service cares for the environment and supports children to become environmentally responsible.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
116	Assessments of family day care residences and approved family day care venues
116 (2)	Risk posed by animals
168	Education and care services must have policies and procedures

RELATED POLICIES

Assessment, approval and re-assessment of approved family day care residence and/or venue policy Educational Program Policy Environmentally Responsible Policy Hand Washing Policy Managing Unidentified Dogs Policy	Managing Unidentified Dogs Policy Physical Environment Policy Sandpit Policy Snake Awareness Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

Having a pet at our Family Day Care Service can be a valuable part of children’s education enriching their learning about nature, ecology and relationships. Our Family Day Care Service aims to provide a safe, hygienic and humane environment for all animals and pets that visit or reside at **the FDC educator’s residence and/or approved venue** educating children in the proper care of animals.

SCOPE

This policy applies to the Approved Provider, Coordinators, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

The National Quality Standard encourages educators to understand and appreciate the natural environment and the interdependence between people, plants, animals and the land. Pets help children from a young age learn to care for other living things. They can teach a sense of responsibility, caring and tolerance. They can offer many opportunities for developing observational skills and provide basic natural science experiences. **If the educator wishes to have a pet in their Family Day Care residence or approved venue, they must make all the decisions in consultation with the approved provider/ coordinator and families. An assessment of each residence is conducted at least annually to ensure that the health, safety**

and wellbeing of children who are educated and cared for by the service are protected. Regulation 116 includes ensuring the risk posed by any animals at the residence/or venue.

Whilst there are several benefits to keeping animals within a family day care residence, there are also a range of concerns which need to be considered to ensure the safety and wellbeing of both the children and the animals. Encouraging direct contact and developing bonds with animals can help children to develop empathy. Providing children with access to animals within our service will help them learn about life cycles and relationships and improve communication skills. We feel role modelling of appropriate behaviours with animals and guidance in caring for the needs of animals are beneficial for children.

Questions to consider prior to having a pet at the FDC approved residence or venue

- Who will pay for the care and upkeep of the animal, including feeding, health care and cleaning?
- What physical space is available in the FDC residence? Is it adequate for the animal you are considering?
- Is the FDC educator and families happy with the decision to keep an animal at the service?
- What time will be available throughout the day to care for the animal?
- Are there any children or adults residing at the family day care residence who are allergic to, or have phobias of, animals?
- What changes to Service's policies and procedures need to be considered? For example, hand washing policy will need to be updated to include washing hands after having contact with the animal.
- What are the health and safety risks?

Other things to consider include

- Some animals, such as lizards, turtles, snakes, spiders and tropical fish may not be an appropriate choice. Check with a veterinarian if you are unsure whether an animal is suitable for children and check with the local health department for regulations and advice regarding animals in family day care services/residences. Some states and territories require a license for keeping certain animals.
- Animals that may be more likely to be suitable for family day care may include goldfish, hermit crabs, stick insects, mice or rats. All these animals are relatively low maintenance and can be left safely over a weekend if they are provided with enough food and water.

Assessing and Managing Risks

Whilst there are many benefits to providing children with access to animals and keeping pets at the family day care residence, there are matters that management and educators need to consider for the

safety and wellbeing of both the children and the animals concerned prior to choosing a pet or having an animal visit the Service.

A risk assessment should therefore be conducted when deciding the type of animal and the way the children engage with it.

Potential risks may include:

- diseases- from birds (Parrot fever -psittacosis) and other animals
- injury due to biting, kicking or pushing a child over (e.g. farm animals)
- scratching (e.g. chickens, rabbits, guinea pigs)
- pests and vermin (snakes, rats, mice)
- allergies (e.g. bees, wasps, ants)

DISEASE

As animals can spread disease, access to animals at the FDC residence requires special consideration to prevent this. Health authorities identify that germs can be present on the skin, hair, feathers and scales, and in the faeces, urine and saliva of animals. While these germs may not cause disease in the animal, they may cause disease in humans.

Effective hand washing and cleaning

Children and adults should employ effective hand washing after touching or feeding animals, or cleaning their bedding, tanks, cages or enclosures. However, it is important to engage children with these tasks as they learn responsibility through 'hands on' learning experiences.

Appropriate supervision and clothing

Children should also be appropriately supervised when they have contact with animals to avoid potential injury or harm to the child or the animal.

Ensure children wear appropriate clothing and footwear when handling animals and pets. Be aware of children who may have allergies to insects such as bees, wasps and ants that may be more apparent when animals are kept at the FDC residence.

FDC Service Pets

- The educator should prepare children for the animal visit, gaining perception into how the children may react to the pet.

- The educator, children and families should consider the rationale for having a pet and long-term implications of such a decision prior to getting the pet.
- All pets and their enclosures are to be kept clean and hygienic with appropriate bedding and water.
- Food will be made available for all pets and animals but kept out of reach of children at all times.
- Any animal or pet kept at the family day care residence will be regularly fed, cleaned, vaccinated, and wormed (as appropriate), and checked for fleas and diseases.
- Animals including pets will not be allowed in the sand pit or any other play area. In event that this happens, educators will refer to and adhere to the *Sand Pit Policy*.
- Animals including pets will never be taken into the food preparation area/kitchen nor will they have access to the eating or sleeping areas, toys, bedding, eating surfaces and/or utensils.
- Anyone who has handled the animal or pet will immediately wash their hands.
- Children's animal or pets will only be allowed in the educator's residence with granted permission from the coordinator and educator.
- The educational program will include how to properly care for animals and how to treat them appropriately.

Uninvited Animal Visit

There are situations that may spontaneously occur, involving animals. For example, there may be a situation where an animal or bird has made its way into the FDC residence or approved venue. Depending upon the type of animal or bird the educator may use this as a spontaneous learning experience for the children. At all times the highest priority will be to ensure the safety and wellbeing of the children.

If an animal or bird is potentially dangerous such as a snake or spider, educators will contact an appropriate authority for assistance.

Victoria: [Wildlife Victoria](#): Australian Wildlife Emergency Response 03 8400 7300

New South Wales: [NSW Wildlife Information, Rescue and Education Service](#) Inc. (WIRES) 13 000 WIRES - 13 00 094 737

National Parks and Wildlife Service - 1300 361 967 (8.30am – 5.00pm)

Queensland: Department of Environment and Heritage Protection 1300 130 372 or [RSPCA Queensland](#) 1300 264 625

Australian Capital Territory: [ACT Wildlife](#)- Hotline 043 230 0033

Tasmania: [Bonorong Wildlife Rescue](#) 0447 264 625 National Parks and Wildlife Advisory Council- 1300 827 727

South Australia: [Fauna Rescue](#) of SA (08) 8289 0896 or RSPCA South Australia 1300 4 777 22

Western Australia: Parks and Wildlife Service: [Wildcare Helpline](#): (08) 9474 9055

Northern Territory: Northern Territory Government: Wildcare Northern Territory Darwin: (08) 8988 6121

A professional should monitor the animal's movements to ensure a speedy and efficient capture, but priority is to be given to educator, child and family safety. At no time is the potentially dangerous animal, insect or bird to be approached or touched by educators, children or families.

If an unidentified dog enters the family day care residence or property, the educator/educator assistant will refer to the *Managing Unidentified Dogs Policy*.

Visits from Children's Pets

Occasionally a child may have a new pet such as a puppy or kitten that they wish to bring to the service to show their peers and educator. Whilst this provides a wonderful learning experience for children, families must be advised to seek permission from the educator prior to bringing in the pet. A risk assessment should then be completed before giving permission to the family. Families should also be advised that pets visiting the service that are not confined (for example, in a fishbowl or bird/mouse cage) must not be left at the service but be taken with the family member at the conclusion of their visit.

Pests and Vermin

- Pest control will occur at the FDC residence on an annual basis as a minimum.
- Pest control certificates are required as part of the annual assessment of a FDC residence.
- The coordinator or approved provider will monitor any occurrences at the FDC residence to determine the success of control measures.
- If pests and/or vermin are seen, or evidence of pests and/or vermin such as droppings, the FDC educator must take the necessary action to arrange for an inspection
- The FDC educator is responsible for arranging additional pest control visits for their home as required.
- Where appropriate, the educator will discuss safety issues relating to dangerous products, plants, vermin and objects with the children.
- FDC educators will thoroughly clean all areas that pests have accessed in the residence/property with disinfectant.
- If the remains of animal or animal faeces have been found, the remains will be disposed of according to the local Council guidelines and the area where the remains were found will be thoroughly disinfected.
- FDC educators are responsible for assessing any situation where animals are involved to ensure the health, safety and wellbeing of children, families and animals. (see Snake Awareness Policy)

SOURCE

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- Elliott, S., McCrea, N., Edwards, H., & University of New England. (2012). Sustainable outdoor play spaces in early childhood centres: Investigating perceptions, facilitating change and generating theory.
- Frith, J., Kambouris, N., & O’Grady, O. (2003). Health and safety in children’s centres: Model policies and practices (2nd Ed.). NSW, Australia: NSW Department of Community Services. Retrieved from http://eduserve.com/sites/default/files/iccc_resources/Child_Care_Model_Policies.pdf
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- Guide to the National Quality Framework. (2017). (amended 2020).
- Kidsafe NSW Inc. <https://kidsafe.com.au/><http://www.kidsafensw.org.au/>
- National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.).
- NSW Government Department of Health. (2018). Petting zoos and personal hygiene fact sheet. Retrieved from <https://www.health.nsw.gov.au/Infectious/factsheets/Pages/petting-zoos-and-personal-hygiene.aspx>
- Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2021	NEXT REVIEW DATE	SEPTEMBER 2022
MODIFICATIONS	<ul style="list-style-type: none"> • minor formatting edits • consistency of use of FDC residence/approved venue terms in policy • addition of Educational Program Policy • sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
SEPTEMBER 2020	<ul style="list-style-type: none"> • additional regulations added re: assessments of residence • risk assessment inclusions • pest control certificates • links added to state/territory contacts for wildlife assistance • policy more relevant to family day care educators 	SEPTEMBER 2021	
SEPTEMBER 2019	<ul style="list-style-type: none"> • Sentences reworded/refined. • Additional information added. • New section added – Visits from children’s pets. 	SEPTEMBER 2020	

	<ul style="list-style-type: none"> Sources/references corrected, updated, and alphabetised. Related policies alphabetised. 	
SEPTEMBER 2018	<ul style="list-style-type: none"> New policy created for Family Day Care Services 	SEPTEMBER 2019

2.16 MEDICAL CONDITIONS POLICY

MEDICAL CONDITIONS POLICY

To support children’s wellbeing and manage specific healthcare needs, allergy or relevant medical condition our Nurture Childcare and Education Services will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children’s health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
85	Incident, injury, trauma and illness 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) (a)	The management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis
90 (1) (iv)	Medical Conditions Communication Plan
90 (2)	The medical conditions policy of the education and care service must set out practices in relation to self-administration of medication by children over preschool age if the service permits that self-administration
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement— anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First Aid qualifications
162(c) and (d)	Health information to be kept in enrolment record
168	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

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Celebrations Policy Child Safe Environment Policy Diabetes Management Policy	Enrolment Policy Epilepsy Management Policy Family Communication Policy Health and Safety Policy Incident, Illness, Accident and Trauma Policy Nutrition Food Safety Policy Privacy & Confidentiality Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure services

have policies and procedures in place for medical conditions. We aim to efficiently respond to and manage medical conditions, health care needs or allergies of children and staff at the Family Day Care Service ensuring the safety and wellbeing of all children, staff, families and visitors

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

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

IMPLEMENTATION

We will involve all FDC educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Family Day Care Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions. There are a number of concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the FDC Service. Key procedures and strategies must be in place prior to the child commencing care at a FDC residence or venue to ensure their individual health, safety and wellbeing.

The Approved Provider/Coordinator will ensure:

- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- existing enrolment forms are reviewed, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents are provided with a copy of the *Service's Medical Conditions Policy*
- a child is not enrolled at, nor will attend the FDC 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] **Otherwise child will be denied to provide the Care in FDC setup and day care will still be charged from parents.**

- FDC educators and educator assistants have a clear understanding of children’s individual medical conditions enrolled in their service
- FDC educators, educator assistants and other staff have knowledge and access to this policy and relevant health management policies (*Asthma Management Policy/ Anaphylaxis Management Policy, Diabetes Management Policy*)
- medication will only be administered to a child:
 - if the medication is authorised in writing by a parent or authorised person
 - is administered in accordance to a child’s Medical Management Plan or other instructions provided by a registered medical practitioner
 - as prescribed by a registered medical practitioner
 - is in the original container
 - has the original label clearly showing the name of the child
 - is before the expiry/use by date
 - after the educator has checked the child’s identity and dosage of the medication against the written instructions provided
- an *Administration of Medication* Record is completed for each child and acknowledged by the parent at the end of each day
- to develop a communication plan in collaboration with the Nominated Supervisor/Responsible Person and FDC educator to ensure communication between families and educators is on-going and effective
- educators and educator assistants receive appropriate professional development and training in managing specific medical conditions and meeting children’s individual needs
- FDC educators hold current accredited first aid and CPR qualifications, emergency asthma and emergency anaphylaxis management certificates (as approved by ACECQA)
- FDC educators and educator assistants have a clear understanding about their role and responsibilities when caring for children with a medical condition
- FDC educators and educator assistants adhere to practices and procedures in relation to safe food handling and consumption of food
- families provide required information on their child’s medical condition, including:
 - medication requirements
 - allergies
 - medical practitioner contact details
 - medical management plan
- a medical management plan has been developed in consultation with parents and the child’s medical practitioner and provided to the FDC service and/or
 - an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child’s medical practitioner eg: (ASCIA) or National Asthma Council of Australia

- an individual Diabetes Management Plan is developed in consultation with parents and the child's medical practitioner
- risk minimisation plan has been developed in consultation with parents and management prior to the child commencing at the FDC service
- FDC educators will be informed immediately about any changes to a child's medical management plan, risk management plan
- to record any prescribed health information and retain copies of medical management plan, anaphylaxis management plan or asthma management plan and risk minimisation plan in the child's enrolment folder
- FDC educators and educator assistants have access to emergency contact information for the child
- casual educators are informed of children (and any other staff-educator assistant) who have specific medical conditions or food allergies, the type of condition or allergies they have and the FDC Service's procedures for dealing with emergencies involving allergies and anaphylaxis
- a notice is displayed prominently in the main entrance of the residence or venue stating that a child diagnosed at risk of anaphylaxis is being cared for or educated, and providing details of the allergen/s (regulation 173)
- a copy of the child's medical management plan is visibly displayed in an area not generally available to families and known to educators and educator assistants in the residence/venue
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication

In the event of a high-risk scenario where a child suffers from a reaction, incident, situation, or event related to a medical condition the FDC educator will:

- follow the child's medical management plan as per Regulation 90(1)(c)(ii)
- commence first aid measures/monitoring
- call an ambulance immediately by dialling 000
- contact the parent/guardian when practicable but as soon as possible
- contact the emergency contact if the parents or guardian can't be contacted when practicable but as soon as possible
- contact the Coordinator/Nominated Supervisor or Approved Provider of the FDC Service as soon as possible
- complete an *Incident, Injury, Trauma and Illness Record* as soon as possible
- request the approved provider/coordinator to notify the regulatory authority (within 24 hours) in the event of a serious incident.

Families will ensure:

They will provide accurate and correct information about child/ren health and will support to complete the enrolment process so children can remain safe and secure in FDC Setup.

No responsibility/Liability or any legal responsibility shall be taken if parents manipulate or trying to hide child's health condition and not giving full information about child health and health needs. Parents giving medicine without original container, in another container which do not have any label, manipulated label, without signing the authorization form or multi vitamin will be denied to administer by the Educator.

Parents not provide correct information or providing false and incorrect information can be report to police and Department of education and care regulatory unit and child/ren enrolment will be ceased on immediate effect and no notice period policy will be followed due to putting child and educator's and service business and lives at risk. (Nurture)

- Families provide the FDC Service management with accurate information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form
- they provide the FDC Service with a medical management plan prior to enrolment of their child
- they consult with Coordinator and FDC educator to develop a risk minimisation plan and communication plan
- the FDC Service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they acknowledge they have received a copy of the *Medical Conditions Policy* and *Administration of Medication Policy*
- they notify the FDC Service and educator if any changes are to occur to the medical management plan
- they notify the FDC Service and educator verbally when children are taking any short-term medications AND whether or not these medications may be self-administered (only applicable for a child over preschool age)
- they provide adequate supplies of the required medication and complete the *Administration of Medication Record*
- they provide an updated copy of the child's medical management plan **annually** or evidence from a Medical Practitioner to confirm the plan remains unchanged
- they provide written consent for their child's medical management plan to be displayed in the FDC residence/service.

Self-Administration of Medication

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

- a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication
- medication is stored safely by the FDC educator, who will provide it to the child when required
- supervision is provided by the FDC educator whilst the child is self-administering medication
- a recording is made in the medication record for the child that the medication has been self-administered
- parents will acknowledge the details in the medication record upon collection of their child with a signature and date

(See *Administration of Medication Policy* for further information)

MEDICAL MANAGEMENT PLAN

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

- specific details of the diagnosed health care need, allergy or relevant medication condition
- supporting documentation (if required)
- a recent photo of the child
- current medication and dosage prescribed for the child
- if relevant, state what triggers the allergy or medical condition
- first aid/emergency response that may be required
- any medication that may be required to be administered in case of an emergency
- further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance
- contact details of the medical practitioner who signed the plan
- the date of when the plan should be reviewed
- a copy of the medical management plan will be displayed for FDC educators and educator assistants to see to ensure the safety and wellbeing of the child, whilst ensuring the child's privacy by displaying only in an area generally only available to staff of the FDC Service and FDC educator
- the FDC Service must ensure the medical management plan remains current all times.

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place. (Regulation 90(1)(c))

A meeting will be arranged with the parents/guardian as soon as the FDC Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting a risk minimisation plan will be developed in consultation with the parent/guardian and FDC educator to ensure:

- that the risks relating to the child’s specific health care need, allergy, or medical condition are assessed and minimised
- that practices and procedures in relation to the safe handling, preparation, serving, and consumption of food are developed and implemented
- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all FDC educators, educator assistants, 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 care without medication prescribed by the child’s medical practitioner in relation to the child’s specific health need, allergy or medical condition
- risk minimisation plan(s) are reviewed at least annually and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child’s health and medical condition is communicated to parents at the end of each day by the educator
- parents are notified by the educator 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 the educator when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*.

COMMUNICATION PLAN

The communication plan explains how relevant staff members and volunteers are informed about the medical management and risk management plans and how the parent of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after the meeting with the parents/guardian to ensure:

- all relevant staff members, educators and volunteers are informed about the *Medical Conditions Policy*, the medical management plan and risk minimisation plan for the child; and
- an individual child communication document is created so that a parent can communicate any changes to the medical management plan and risk management plan for the child in writing.

At all times, families who have a child attending the FDC Service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child’s health management and communication plans.

Resources

[ASCIA anaphylaxis e-training for schools and early childhood education/care](#)

[ASCIA plans for Anaphylaxis](#)

[Coeliac Australia](#)

[Cystic Fibrosis Australia](#)

[Diabetes Australia](#)

[Epilepsy Foundation](#)

[National Asthma Australia](#)

[National Allergy Strategy](#)

SOURCE

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

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Department of Education Victoria *Meeting children’s health needs* (2020).

REVIEW

POLICY REVIEWED BY:	Hamparbha Sharma		Nominated Supervisor	06/2022
POLICY REVIEWED	JUNE 2022		NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	•	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED		PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	

OCTOBER 2021	•	<ul style="list-style-type: none"> • Policy reviewed and included suggested guidelines from ACECQA Dealing with Medical Conditions in Children (June 2021) • Additional section added <i>Cook and Food Handlers</i> • National Allergy Strategy link added 	JUNE 2022
MAY/JULY 2021	•	<ul style="list-style-type: none"> • Duty of Care section added • minor edits as policy was reviewed in September 2020 following feedback from QLD regulatory authority • inclusion of staff annual ASCIA anaphylaxis e-training as best practice • resources added for management of medical conditions • communication plan information added • sources checked for currency 	JUNE 2022
SEPTEMBER 2020	•	<ul style="list-style-type: none"> • additional regulations added • administration of medication regarding original container, prescribed dosage/authorisations added • minor changes to relate policy to Administration of Medication Policy • procedure for self-administration of medication added 	JUNE 2021
APRIL 2020	•	<ul style="list-style-type: none"> • additional information added to points • additional wording added to include diagnosed health care need, allergy or relevant medical condition 	JUNE 2020
JUNE 2019	•	<ul style="list-style-type: none"> • Some grammar, punctuation and spelling edited. • Some sentences reworded/refined. • Additional information added to points. • Sources/references added & alphabetised. • Related policies added. 	JUNE 2020
JUNE 2018	•	<ul style="list-style-type: none"> • Included the 'Related Policies' section and minor adjustments made to terminology. 	JUNE 2019
DECEMBER 2017	•	<ul style="list-style-type: none"> • Updated policy to comply with the changes to the National Quality Standard 	JUNE 2017
MAY 2017	•	<ul style="list-style-type: none"> • Modifications made for Family Day Care Services 	TBA

2.17 EPILEPSY MANAGEMENT POLICY

Epilepsy refers to recurring seizures where there is a disruption of normal electrical activity in the brain that can cause momentary lapses of consciousness, or sudden loss of body control (Epilepsy Australia, 2019). The effects of epilepsy can vary, some children will suffer no adverse effects while epilepsy may impact others greatly. Some children with epilepsy may have absence seizures where they are briefly unconscious. Our Family Day Care (FDC) Service will implement inclusive practices to cater for the additional requirements of children with epilepsy in a respectful and confidential manner.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
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
96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of first aid Policy	Handwashing Policy
Administration of Medication Policy	Incident, Illness, Accident, Trauma Policy
Enrolment Policy	Medical Conditions Policy
Family Communication Policy	Privacy and Confidentiality Policy
	Supervision Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions. Our Family Day Care (FDC) Service is committed to providing a safe and healthy environment that is inclusive for all children, Educator, visitors, and family members who have been diagnosed with Epilepsy. The aim of this policy is to ensure that educators, educator assistants and families are aware of their obligations in supporting children with epilepsy and the management of seizures.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

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

- a. a safe environment free from foreseeable harm and

- b. adequate supervision for all children.

FDC educators/educator assistants need to know enough about epilepsy and the management of seizures to ensure the safety and wellbeing of the children.

BACKGROUND AND LEGISLATION

Epilepsy is a common, serious neurological condition characterised by recurrent seizures due to abnormal electrical activity in the brain. While about 1 in 200 children live with epilepsy, the impact is variable – some children are greatly affected while others are not. Epilepsy is unique. There are virtually no generalisations that can be made about how epilepsy may affect a child. There is often no way to accurately predict how a child’s abilities, learning and skills will be affected by seizures. Because the child’s brain is still developing, the child, their family and doctor will be discovering more about the condition as they develop.

The most important thing to do when working with a child with epilepsy is to get to know the individual child and their condition. All children with epilepsy should have an epilepsy *medical management plan*. It is important that all those working with children living with epilepsy have a thorough understanding of the effects of seizures, required medication and appropriate first aid.

Legislation that governs the operation of approved FDC services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. National Regulations of the Education and Care Services requires management to ensure that all FDC educators and educator assistants have current approved first aid qualification. [Reg. 136 (3)]

IMPLEMENTATION

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

A copy of our *Medical Conditions Policy* will be provided to all FDC educators, volunteers, and families of the FDC Service. It is important that communication is open between families and educators so that management of epilepsy is effective.

Children diagnosed with epilepsy will not be enrolled into the FDC Service until the child’s medical management plan is completed and signed by their medical practitioner. A risk minimisation and

communication plan must be developed with parents/guardians and the FDC educator, to ensure risks are minimised and strategies developed for minimising any risk to the child.

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

Management will ensure:

- before the child's enrolment commences, the family will meet with the FDC Service and the FDC educator to begin the communication process for managing the child's medical condition in adherence with the registered medical practitioner or health professional's instructions
- parents/guardians of an enrolled child who is diagnosed with epilepsy are provided with a copy of the *Epilepsy Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- all children enrolled at the FDC Service with epilepsy must have an epilepsy medical management plan, seizure record and, where relevant, an emergency action plan, signed by a registered medical practitioner and a copy filed with their enrolment record. Records must be no more than 12 months old and updated regularly by the child's registered medical practitioner and/or neurologist.
- the medical management plan will describe the prescribed medication for that child and the circumstances in which the medication should be administered
- individual epilepsy Medical Management and Emergency Action Plans will be displayed in a key location at the FDC residence or approved venue
- a risk minimisation plan is developed in consultation with the parents of a child diagnosed with epilepsy outlining procedures to minimise the incidence and effect of a child's epilepsy. The plan will cover the child's known triggers and where relevant other common triggers which may cause an epileptic seizure.
- that no child who has been prescribed epilepsy medication attends the FDC Service without their medication
- they collaborate with parents/guardians and FDC educator to create and implement a communication plan and encourage ongoing communication between parents/guardians regarding the current status of the child's medical condition, this policy, and its implementation
- a copy of this policy is provided and reviewed during each new Educator member's induction process
- all Educator, FDC educators, educator assistants are provided with a copy the *Medical Conditions Policy* and *Epilepsy Management Policy* annually
- a copy of this policy is provided and reviewed during each new Educator member's induction process

- educators/educator assistants have completed first aid training approved by the ACECQA at least every 3 years and that this is recorded, with a copy of each Educator members' certificate held on the Service's premises
- educators/educator assistants attend regular training on the management of epilepsy and, where appropriate, emergency management of seizures using emergency epileptic medication, when a child with epilepsy is enrolled at the FDC Service
- educators/educator assistants are trained to identify children displaying the symptoms of a seizure and locate their personal medication and epilepsy medical management plan
- updated information, resources and support is regularly given to families for managing epilepsy
- that when educators/educator assistants accompanying children on excursions or to events, they carry the prescribed medication and a copy of the epilepsy medical management/action plan for any child diagnosed with epilepsy
- that they notify the Regulatory Authority of any serious incident of a child while being educated and care for at the service within 24 hours.

2.17.1 Educator Duty while orientation (Must Read)

Educators/Educator Assistants will:

Educator must ensure to check with parents during orientation time if their child has any medical condition (NUR).

- read and comply with the *Epilepsy Management Policy*, *Medical Conditions Policy* and *Administration of Medication Policy*
- ensure a copy of the child's epilepsy medical management plan is visible and known to in the FDC Service
- recognise the symptoms of a seizure and treat appropriately and in accordance with the child's epilepsy medical management plan in the event of a seizure
- record all epileptic seizures according to the epilepsy medical management plan
- take all personal epilepsy medical management plans, seizure records, medication records, and any prescribed medication on excursions and other events
- administer prescribed medication when needed according to the medical management/action plan in accordance with the service's *Administration of Medication Policy*
- identify and where possible, minimise possible seizure triggers as outlined in the child's epilepsy medical management plan
- communicate with the parents/guardians of children with epilepsy in relation to the health and safety of their child, and the supervised management of the child's epilepsy
- ensure that children with epilepsy can participate in all activities safely and to their full potential

- increase supervision of a child diagnosed with epilepsy on special occasions such as excursions, incursions, parties and family days
- maintain a record of the expiry date of the prescribed epilepsy management medication so as to ensure it is replaced prior to expiry

Families will:

- provide information upon enrolment or on diagnosis, of their child's medical condition-epilepsy
- provide an epilepsy medical management plan developed and signed by a registered medical practitioner for implementation within the FDC Service
- develop a risk minimisation plan and communication plan in collaboration with the FDC educator and coordinator/nominated supervisor
- provide the prescribed medications each day their child attends care
- maintain a record of the expiry date of medication and ensure it is replaced prior to expiry
- notify management and FDC educator of any changes to their child's medical condition including the provision of a new epilepsy medical management plan to reflect these changes as needed
- communicate all relevant information and concerns to Educator, for example, any matter relating to the health of the child.
- If families do not provide accurate information about their child medical condition to the educator and service before enrolment and they provide after enrolment care will be terminated on the same time. it is wholly solly their responsibility if any incident occurred in to the service. Service and educator will take reasonable steps to protect that child but they can't gurantee if families donot disclose their medical contion honestly to the service(NUR).

If a child (known to have an epileptic condition) suffers from an epileptic emergency the FDC educator will:

- Follow the child's medical management /action plan
- Protect the child from injury- remove any hazards that the child could come into contact with
- Not restrain the child or put anything in their mouth
- Gently roll them on to the side in the recovery position as soon as possible (not required if, for example, child is safe in a wheelchair safe and airway is clear)
- Monitor the airway
- Call an ambulance immediately by dialling 000 if:
 - a seizure continues for more than three minutes
 - another seizure quickly follows the first
 - it is the child's first seizure

- the child is having more seizures than is usual for them
 - certain medication has been administered
 - they suspect breathing difficulty or injury
- Continue first aid measures
 - Contact the parent/guardian when practicable
 - Contact the emergency contact if the parents or guardian can't be contacted when practicable
 - Notify the approved provider/coordinator of the incident
 - If the incident presented imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident through the [NQA IT System](#) (as per regulations)

If a child (NOT known to have an epileptic condition) suffers from an epileptic emergency the Educator will follow the above procedure.

2.17.2 DEFINITIONS of Focal Seizures

FOCAL SEIZURES	
<p>Focal seizures <u>without</u> impaired consciousness</p>	<p>Formerly called simple partial seizures, these arise in parts of the brain not responsible for maintaining consciousness, typically the movement or sensory areas.</p> <p>Consciousness is NOT impaired, and the effects of the seizure relate to the part of the brain involved. If the site of origin is the motor area of the brain, bodily movements may be abnormal (e.g. limp, stiff, jerking). If sensory areas of the brain are involved the person may report experiences such as tingling or numbness, changes to what they see, hear or smell, or very unusual feelings that may be hard to describe. Young children might have difficulty describing such sensations or may be frightened by these.</p>
<p>Focal Seizures <u>with</u> impaired consciousness</p>	<p>Formerly called complex partial seizures, these arise in parts of the brain responsible for maintaining awareness, responsiveness and memory, typically parts of the temporal and frontal lobes.</p> <p>Consciousness is lost and the person may appear dazed or unaware of their surroundings. Sometimes the person experiences a warning sensation or 'aura' before they lose awareness, essentially the simple partial phase of the seizure. Behaviour during a complex partial seizure relates to the site of origin and spread of the seizure.</p>

<p>Focal Seizures with impaired consciousness <i>Cont.</i></p>	<p>Often the person's actions are clumsy, and they will not respond normally to questions and commands. Behaviour may be confused, and they may exhibit automatic movements and behaviours e.g. picking at clothing, picking up objects, chewing and swallowing, trying to stand or run, appearing afraid and struggling with restraint. Colour change, wetting and vomiting can occur in complex partial seizures.</p> <p>Following the seizure, the person may remain confused for a prolonged period and may not be able to speak, see, or hear if these parts of the brain were involved. The person has no memory of what occurred during the complex partial phase of the seizure and often needs to sleep.</p>
<p>Focal Seizures becoming bilaterally convulsive</p>	<p>ocal seizures may progress due to spread of epileptic activity over one or both sides of the brain. Formerly called secondarily generalised seizures, bilaterally convulsive seizures look like generalised tonic-clonic seizures</p>

GENERALISED SEIZURES	
<p>Tonic-clonic Seizures</p>	<p>Tonic-clonic seizures produce sudden loss of consciousness, with the person commonly falling to the ground, followed by stiffening (tonic) and then rhythmic jerking (clonic) of the muscles. Shallow or 'jerky' breathing, bluish tinge of the skin and lips, drooling of saliva and often loss of bladder or bowel control generally occur.</p> <p>The seizures usually last one to three minutes and normal breathing and consciousness then returns. The person is tired following the seizure and may be confused. If the seizures last more than five minutes an ambulance should immediately be called.</p>
<p>Absence Seizures</p>	<p>Absence seizures (previously called petit mal seizures) produce a brief cessation of activity and loss of consciousness, usually lasting less than 10 seconds. Often the momentary blank stare is accompanied by subtle eye blinking and mouthing or chewing movements. Awareness returns quickly and the person continues with the previous activity. Falling and jerking do not occur in typical absences.</p>
<p>Myoclonic Seizures</p>	<p>oclonic seizures are sudden and brief muscle contractions usually only lasting a second or two, that may occur singly, repeatedly or continuously. They may involve the whole body in a massive jerk or spasm or may only involve individual limbs or muscle groups. If they involve the arms, they may cause the person to spill what they were holding. If they involve the legs or body the person may fall.</p>

Source: *Epilepsy Australia (2019).*

RESOURCES/POSTERS

[Animated Seizure First-Aid video for children](#)

[Seizure first aid posters](#)

SOURCE

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

Early Childhood Australia Code of Ethics. (2016).

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

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

Epilepsy Australia. (2021). <https://epilepsyaustralia.net>

Epilepsy Action Australia. (2020). <https://www.epilepsy.org.au/>

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

Guide to the National Quality Standard. (2020).

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

Revised National Quality Standard. (2018).

The Royal Children’s Hospital Melbourne: http://www.rch.org.au/neurology/patient_information/about_epilepsy/
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text- Family Day Care Service abbreviated to FDC Service for consistency throughout policy hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JULY 2021	<ul style="list-style-type: none"> rearranged content within policy moved definitions to end of policy deleted repetitive statements in all sections consistent wording to align with related Medical Conditions policies (asthma, anaphylaxis, diabetes) Policy review includes ACECQA policy guidelines/components (June 2021) additional resources added additional references- re: National law and regulations added sources checked for currency 		JULY 2022
JULY 2020	<ul style="list-style-type: none"> ‘Minor changes to adhere with terminology within regulations Medical Management Plan’ and Action Plan inclusion of Communication Plan and Risk Minimisation Plan 		JULY 2021

	<ul style="list-style-type: none"> • edits to ensure alignment to Family Day Care- First Aid requirements • minor punctuation edits • related policies added • additional regulations included 	
JULY 2019	<ul style="list-style-type: none"> • Section added 'If a child (NOT known to have an epileptic condition...' • Grammar and punctuation edited. • Additional information added to points. • Sources checked for currency. • Information checked & updated using trustworthy source. • New sources added. • Sources corrected & alphabetised. • Regulation 136 added. 	JULY 2020
JULY 2018	<ul style="list-style-type: none"> • New policy draft 	JULY 2019

2.18 ANAPHYLAXIS MANAGEMENT POLICY (MUST READ POLICY)

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions including anaphylaxis.

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

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

NATIONAL QUALITY STANDARDS (NQS)

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

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and 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
96	Self-administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
173(2)(g)	Prescribed information to be displayed- a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the family day care service and attends the family day care residence or family day care venue

174	Time to notify certain circumstances to Regulatory Authority
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RELATED POLICIES

Administration of first aid Policy	Incident, Injury, Trauma and Illness Policy
Administration of Medication Policy	Medical Conditions Policy
Enrolment Policy	Privacy and Confidentiality Policy
Family Communication Policy	Supervision Policy

PURPOSE

We aim to minimise the risk of an anaphylactic reaction occurring at our Family Day Care (FDC) Service by following the *Anaphylaxis Management Policy* and implementing risk minimisation strategies. We ensure all Family Day Care (FDC) educators, educator assistants and Educator members are adequately trained to respond appropriately and competently to an anaphylactic reaction.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

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

- c. a safe environment for children free of foreseeable harm and
- d. adequate supervision of children.

Our focus is keeping children safe and promoting the health, safety and wellbeing of children attending our FDC Services. FDC educators and Educator members, including relief educators, need to be aware of children at the FDC Service who suffer from allergies that may cause an anaphylactic reaction, maintaining a healthy and safe environment. Management will ensure FDC educators and Educator are aware of children's medical management plans, risk management plans and if required, medication.

BACKGROUND

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

The most common allergens in children are:

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

Signs of anaphylaxis (severe allergic reaction) include any 1 of the following:

- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking/and or a hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- pale and floppy (young children)
- abdominal pain and/or vomiting (signs of a severe allergic reaction to insects)

The key to the prevention of anaphylaxis and response to anaphylaxis within the FDC Service is awareness and knowledge of those children who have been diagnosed as at risk, awareness of allergens that could cause a severe reaction, and the implementation of prevention measures to minimise the risk of exposure to those allergens. It is important to note however, that despite implementing these measures, the possibility of exposure cannot be completely eliminated. Communication between the FDC Service and families is vital in understanding the risks and helping children avoid exposure.

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

IMPLEMENTATION

We will involve all FDC educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The FDC Service will adhere to privacy and confidentiality procedures when dealing with individual health needs, including having families provide written permission to display the child's medical management plan in prominent positions within the FDC residence or approved venue. A copy of all medical management plans will be kept at the FDC Service

principal office. It is imperative that all FDC educators, educator assistants and volunteers 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.

2.18.1 RECOMMENDATION (Must READ)

It is highly recommended that all FDC educators to keep auto injector into their first aid kit to save children's life as it is not necessarily that child have medical condition prior to commencement of his/her enrolment. Anaphylactic reaction can happen at any time.

Children health and safety is paramount for service and their educator and anaphylactic reaction is happened not only from peanuts and nut there could be so many reasons written into the policy and life threatening aswell.

To keep Auto injector does not cost a lot but it can save you from any of the major incident happen into your service.

Educator must ensure to follow guideline provided into the policy to remain comply with nurture policy and procedure. (NUR)

THE APPROVED PROVIDER/COORDINATOR WILL ENSURE:

- that as part of the enrolment process, **all** parents/guardians are asked whether their child has been diagnosed as being at risk of anaphylaxis or has severe allergies and clearly document this information on the child's enrolment record
- if the answer is yes, the parents/guardians are required to provide a medical management plan and ASCIA Action Plan signed by a registered medical practitioner **prior** to their child's commencement at the Service [see section below- *In Family Day Care Services where a child is diagnosed as 'at risk of anaphylaxis*]
- parents/guardians of an enrolled child who is diagnosed with anaphylaxis are provided with a copy of the *Anaphylaxis Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- that all FDC educators, educator assistants and coordinators hold current approved first aid qualifications, and have undertaken current approved anaphylaxis management training and current approved emergency asthma management training
- that all FDC educators, educator assistants and coordinators, whether they have a child diagnosed at risk of anaphylaxis enrolled at their service or not, undertakes training in the administration of the adrenaline auto-injection device and cardio- pulmonary resuscitation every 12 months, recording this in the Educator records

- that all FDC educators, educator assistants and other Educator, are aware of symptoms of an anaphylactic reaction, the child at risk of anaphylaxis, the child's allergies, anaphylaxis action plan and location of EpiPen® / Anapen® kit
- that a copy of this policy is provided and reviewed during each new FDC educator and educator assistant's induction process
- that updated information, resources and support for managing allergies and anaphylaxis are regularly provided to families
- anaphylaxis risk management plans are developed prior to any excursion or incursion consistent with Regulation 101
- ensure that at least one general use adrenaline injector is available at the FDC residence or approved venue in case of an emergency- Regulation 89. First Aid Kits [Where legislation permits] if any of the child enrolled at risk of anaphylaxis (medical condition)

In Family Day Care Services where a child diagnosed at risk of anaphylaxis is enrolled the Co-ordinator will:

- meet with the parents/guardians and FDC educator and begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until a medical management plan and risk minimisation plan is developed in collaboration with the family, medical practitioner, management and the FDC educator
- ensure the medical management plan includes:
 - specific details of the child's diagnosed medical condition
 - supporting documentation (if required)
 - a recent photo of the child
 - triggers for the allergy/anaphylaxis (signs and symptoms)
 - first aid/emergency action that will be required
 - administration of adrenaline autoinjectors
 - ASCIA Action Plan
 - contact details and signature of the registered medical practitioner
 - date the plan should be reviewed
- develop a risk minimisation plan in collaboration with parents/guardian, by assessing the potential for accidental exposure to allergens while the child at risk of anaphylaxis is in the care at the FDC residence or approved venue
- ensure that a child who has been prescribed an adrenaline auto-injection device is **not** permitted to attend the FDC Service without a complete auto-injection device kit (which must contain a copy the child's anaphylaxis medical management plan)

- collaborate with parents/guardians and FDC educator to develop and implement a communication plan and encourage ongoing communication regarding the status of the child's allergies, this policy, and its implementation
- display a medical management plan or (ASCIA) Action Plan for Anaphylaxis 2021 (RED) for each child with a diagnosed risk of anaphylaxis, in key locations at the FDC residence for example, in the children's room, kitchen and / or near the medication cabinet
- display ASCIA First Aid Plan for Anaphylaxis (ORANGE) in key locations of the FDC residence
- ensure if meals are provided for children at the FDC residence, ensure that the FDC educator is trained in managing the provision of meals for a child with allergies, including high levels of care in preventing cross contamination during storage, handling, preparation and serving of food. Training will also be given in planning appropriate menus including identifying written and hidden sources of food allergens on food labels.
- ensure that a notice is displayed prominently in the main entrance of the FDC residence or approved venue, stating that a child diagnosed at risk of anaphylaxis is being cared for or educated and providing details of the allergen/s (regulation 173)
- ensure that all relief FDC educators have completed training in anaphylaxis management including the administration of an adrenaline auto-injection device, awareness of the symptoms of an anaphylactic reaction and awareness of any child at risk of anaphylaxis, the child's allergies, the individual anaphylaxis medical management action plan and the location of the auto-injection device kit
- display an emergency contact card by the telephone
- ensure risk assessments for excursions consider the risk of anaphylaxis
- ensure that whenever the FDC educator takes children outside the residence, a copy of the anaphylaxis medical management action plan with the auto-injection device kit is always taken
- ensure an up-to-date copy of the medical management plan and/or ASCIA action plan is provided every 12 to 18 months or whenever any changes have occurred to the child's diagnosis or treatment
- provide information to the Service community about resources and support for managing allergies and anaphylaxis
- anaphylaxis risk management plans are developed prior to any excursion or incursion consistent with Regulation 101
- ensure that at least one general use adrenaline injector is available at the FDC residence or approved venue Service in case of an emergency- Regulation 89. First Aid Kits

2.18.2 FAMILY DAY CARE EDUCATORS AND EDUCATOR ASSISTANTS WILL:

Educator will make sure to discuss with parents during orientation if their child has any medical condition.(NUR) if yes Educator contact to service coordinator/Supervisor to discuss with parent for further clarification(NUR).

- read and comply with the *Anaphylaxis Management Policy, Medical Conditions Policy* and *Administration of Medication Policy*
- ensure that a complete auto-injection device kit (which must contain a copy the child’s anaphylaxis medical management action plan signed by the child’s registered medical practitioner) is provided by the parent/guardian for the child while at the FDC residence or approved venue Service
- ensure a copy of the child’s anaphylaxis medical management plan is visible and known to the FDC educator assistant and coordinator, visitors, and students at the FDC residence or approved venue Service
- follow the child’s anaphylaxis medical management plan in the event of an allergic reaction, which may progress to anaphylaxis
- practice the administration procedures of the adrenaline auto-injection device using an auto-injection device trainer and ‘anaphylaxis scenarios’ on a regular basis, preferably quarterly
- ensure the child at risk of anaphylaxis only eats food that has been prepared according to the parents’ or guardians’ instructions
- ensure tables and bench tops are washed down effectively before and after eating
- ensure if any incident is happened because of negligence of educator educator is only responsible for issue of any breach/infringment notice / penalties
- ensure all children wash their hands upon arrival at the FDC residence/approved venue and before and after eating
- increase supervision of a child at risk of anaphylaxis on special occasions such as excursions, incursions, parties and family days
- ensure that the auto-injection device kit is:
 - stored in a location that is known to the FDC educator/educator assistant, relief Educator, coordinator and any family members residing in the FDC residence
 - NOT locked in a cupboard
 - easily accessible to adults but inaccessible to children
 - stored in a cool dark place at room temperature
 - NOT refrigerated
 - contains a copy of the child’s medical management plan
- ensure that the auto-injection device kit containing a copy of the anaphylaxis medical management plan for each child at risk of anaphylaxis is carried by the FDC educator accompanying the child when

the child is removed from the FDC residence e.g., on excursions/regular outings that this child attends or during an emergency evacuation

- regularly check and record the adrenaline auto-injection device expiry date. (The manufacturer will only guarantee the effectiveness of the adrenaline auto-injection device to the end of the nominated expiry month).

SCHOOL-AGED CHILDREN WHO CARRY THEIR OWN ADRENALINE AUTOINJECTOR

In some cases, children over preschool age attending the FDC Service as part of a before/after school or vacation care program might carry their own adrenaline auto-injector. Children at risk of anaphylaxis usually only carry their own adrenaline auto-injector once they travel independently to and from school. This often coincides with high school or the latter years of primary school.

To ensure compliance with the National Quality Framework an authorisation for a child over preschool age to self-administer medication is required (Regulation 96).

- Where a child carries their own adrenaline auto-injector it is advisable that the FDC Service requests the child's parent to provide a second adrenaline auto-injector to be kept at the FDC residence/**approved** venue in a secure location, as it should not be relied upon that the auto-injector is always being carried on their person.
- If a child does carry an auto-injector device, its exact location should be easily identifiable by the FDC educator. Where an auto-injector device is carried on their person, a copy of the child's medical management plan must also be carried.

2.18.3 FAMILIES WILL:

- inform the FDC educator and coordinator at the FDC Service, either on enrolment or on diagnosis, of their child's allergies and/or risk of anaphylaxis
- provide the FDC Service with an anaphylaxis medical management plan giving written consent to use the auto-injection device in line with this action plan and signed by the registered medical practitioner
- develop an anaphylaxis risk minimisation plan in collaboration with the Coordinator and FDC educator
- develop a communication plan in collaboration with the Coordinator and FDC educator
- provide the FDC educator with a complete auto-injection device kit each day their child attends the FDC **residence or approved venue**
- maintain a record of the adrenaline auto-injection device expiry date so as to ensure it is replaced prior to expiry

- assist FDC educator and other Educator by offering information and answering any questions regarding their child's allergies
- communicate all relevant information and concerns to FDC educators and Educator, for example, any matter relating to the health of the child
- notify the FDC Service and FDC educator if their child has had a severe allergic reaction while not at the service- either at home or at another location
- comply with the FDC Service's policy that a child who has been prescribed an adrenaline auto-injection device is **not** permitted to attend the FDC Service or its programs without that device
- read and be familiar with this policy
- bring relevant issues to the attention of the FDC educator
- notify the FDC educator of any changes to their child's allergy status and provide a new anaphylaxis action plan in accordance with these changes
- provide an updated action plan every 12-18 months or if changes have been made to the child's diagnosis.

2.18.4 If a child suffers from an anaphylactic reaction the FDC educator will:

- Follow the child's medical management plan/action plan- administer an adrenaline injector
- Call an ambulance immediately by dialling 000
- Commence first aid measures
- Record the time of administration of adrenaline autoinjector
- If after 5 minutes there is no response, a second adrenaline autoinjector should be administered to the child if available
- Ensure the child experiencing anaphylaxis is lying down or sitting with legs out flat and is not upright
- Do not allow the child to stand or walk (even if they appear well)
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the Approved Provider/Coordinator of the FDC Service as soon as practicable
- Notify the regulatory authority within 24 hours

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

- Call an ambulance immediately by dialling 000
- Commence first aid measures
- **Administer an adrenaline autoinjector**

- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian cannot be contacted when practicable
- Notify the Approved Provider/Coordinator of the FDC Service as soon as practicable
- Notify the regulatory authority within 24 hours

2.18.5 REPORTING PROCEDURES

Any anaphylactic incident is considered a serious incident (Regulation 12).

- FDC educator/educator assistant involved in the incident will complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the person in charge of the FDC Service at the time of the incident- the Nominated Supervisor/Coordinator
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- if necessary, a copy of the completed form will be sent to the insurance company
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's file
- the Coordinator/Nominated Supervisor will inform the FDC Service management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours through the [NOA IT System](#) (as per regulations)
- the FDC educator and educator assistant will be debriefed after each anaphylaxis incident and the child's individual anaphylaxis medical management plan and risk minimisation plan, evaluated, including a discussion of the effectiveness of the procedure used
- discussions will be held about the exposure to the allergen and the strategies that need to be implemented and maintained to prevent further exposure.

2.18.6 EDUCATING CHILDREN

Allergy awareness is regarded as an essential part of managing allergies in early childcare services. FDC educators 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*'.
- help children understand the seriousness of allergies and the importance of knowing the signs and symptoms of allergic reactions (e.g., itchy, furry, or scratchy throat, itchy or puffy skin, hot, feeling funny)
- encourage empathy, acceptance, and inclusion of the allergic child
- **implement Food Allergy Smart Education Program- [My Food Allergy Friends](#)**

CONTACT DETAILS FOR RESOURCES AND SUPPORT

[Allergy Aware- A hub for allergy awareness resources](#) A project developing national Best Practice Guidelines and supporting resources for the prevention and management of anaphylaxis in schools and children’s education and care services (October 2021)

[Australasian Society of Clinical Immunology and Allergy \(ASCIA\)](#) provide information on allergies. The ASCIA Action Plans for Anaphylaxis are device-specific and must be completed by a medical practitioner.

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

Current ASCIA Action Plans are the 2021 versions, however previous versions (2020 and 2018) are still valid for use throughout 2021 and 2022. There are two types of ASCIA Action Plans for Anaphylaxis:

- ASCIA Action Plan 2021 (RED) are for adults or children with medically confirmed allergies, who have been prescribed adrenaline autoinjectors (Plans are available for EpiPen® or Anapen®)
- ASCIA Action Plan for Allergic Reactions (GREEN) is for adults or children with drug (medication) allergies who have not been prescribed adrenaline autoinjectors.
- ASCIA First Aid Plan for Anaphylaxis (ORANGE) 2021 EpiPen have replaced the general versions of ASCIA Action Plans for Anaphylaxis (Orange).

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

Allergy & Anaphylaxis Australia also provides a telephone support line for information and support to help manage anaphylaxis: Telephone 1300 728 000.

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

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

[NSW Government- anaphylaxis education- the children’s hospital-](#) video on anaphylaxis and allergy.

ADDITIONAL INFORMATION

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

AUSTRALIAN CAPITAL TERRITORY (ACT)

w.det.act.gov.au/publications_and_policies/policy_a-z (Search for 'anaphylaxis')

NEW SOUTH WALES (NSW)

[Anaphylaxis- NSW Government website- Education](#)

[Anaphylaxis and Allergy- NSW Anaphylaxis Education Program, Sydney Children's Hospitals Network](#)

NORTHERN TERRITORY (NT)

[Anaphylaxis management in schools- Department of Education](#)

QUEENSLAND (QLD)

https://education.qld.gov.au/student/Documents/anaphylaxis_guidelines_for_queensland_state_schools.pdf

[Health Support Needs- Education- Anaphylaxis management](#)

[Queensland Government- Anaphylaxis](#)

TASMANIA (TAS)

<https://documentcentre.education.tas.gov.au/Documents/Specific-Health-Issues-Procedures.pdf>

[Department of Education- Allegies Asthma](#)

VICTORIA (VIC)

www.education.vic.gov.au/childhood/parents/health/Pages/anaphylaxis.aspx (Search for 'anaphylaxis')

[Children with medical conditions attending education and care services](#)

[First aid, anaphylaxis and asthma management](#)

WESTERN AUSTRALIA (WA)

[Managing your child's anaphylaxis at school or child care](#)

[Student Health Care in Public Schools Procedures](#)

SOUTH AUSTRALIA (SA)

[Supporting children and students with anaphylaxis and severe allergies](#)

Source

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines- *Dealing with Medical Conditions*
 ASCIA Action Plans, Treatment Plans, & Checklists for Anaphylaxis and Allergic Reactions:
<https://www.allergy.org.au/hp/ascia-plans-action-and-treatment>
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011).
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 Guide to the National Quality Standard. (2017).
 National Allergy Strategy. (2021). *Best practice guidelines for anaphylaxis prevention and management in schools and children’s education and care (CEC) services (Guidelines)*.
 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.).
 New South Wales Department of Education and Communities. (2014). *Anaphylaxis Guidelines for Early Childhood Education and Care Services*.
 Revised National Quality Standard. (2018).
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text- reference to Family Day Care Service abbreviated to FDC for consistency within policy • hyperlinks checked and repaired as required • hyperlinks edited to the name of the document where possible 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	Additional information re: best practice from National Allergy Strategy- October 2021		
JULY 2021	<p>Please check new version of this policy and adjust as required for your service)</p> <ul style="list-style-type: none"> • rearranged content within policy and deletion of repetitive statements in all sections • consistent wording to align with related Medical Conditions policies (asthma, epilepsy, diabetes) • policy review includes ACECQA policy guidelines/components (June 2021) • links added for suggested education program for children 	JULY 2022	

	<ul style="list-style-type: none"> • ASCIA action plans updated for 2021 • communication plan information added • links to state/territory information checked and edited where required 	
JULY 2020	<p>Additions to content of policy</p> <p>Additional regulations added</p> <p>Additions to emergency first aid requirements</p> <p>rearranged some points under Educators to Nominated Supervisor</p> <p>Storage of autoinjector updated</p> <p>Updated 2020 ASCIA Action Plans</p> <p>All State/Territory contacts checked for currency</p> <p>Additional links for some states added</p>	JULY 2021
JULY 2019	<p>Section added – “School-aged children who carry their own adrenaline autoinjector” to cater for school-aged children in before/after school care & vacation care.</p> <p>Grammar and punctuation edited.</p> <p>Additional information added to points.</p> <p>Sources checked for currency.</p> <p>Contact information updated (email address)</p> <p>Regulation 136 added.</p>	JULY 2020
JULY 2018	New policy draft	JULY 2019

2.19 ECZEMA MANAGEMENT POLICY

Eczema (also known as Atopic Dermatitis or Atopic Eczema) is a chronic inflammatory skin condition causing dry and itchy skin and can affect children and adults. It affects approximately 30% of children and usually starts in the child’s first twelve months of life. For most children, eczema tends to resolve itself by age five (Royal Melbourne Children’s Hospital, 2019).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
90	Medical conditions policy
90(1)(iv)	Development of 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

RELATED POLICIES

Administration of First Aid Policy Hand Washing Policy Incident, Injury, Trauma and Illness Policy	Medical Conditions Policy Supervision Policy
--	---

PURPOSE

We aim to create and maintain a safe and healthy environment for all children enrolled at the FDC Service where all children can participate in as many experiences as their medical condition will safely allow.

SCOPE

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

DUTY OF CARE

Our FDC Service has a legal responsibility to provide:

- e. a safe environment, and
- f. adequate supervision at all times.

Family Day Care educators, including relief educators, must have adequate knowledge of the preventative treatment and treatment for flare ups required for children with eczema.

BACKGROUND

Eczema is a skin condition that is most frequently seen in babies. It presents as an itchy rash that appears dry and scaly. In babies it is generally seen around the face. In toddlers it will generally be seen on the insides of wrists and on the fronts of ankles and knees, and in older children the rash is generally all over the body. However, in any age group it can be seen in other places on the body (The Sydney Children's Hospitals Network, 2019).

Eczema occurs when the body does not produce enough oils and fats that prevent the surface of the skin from losing moisture and preventing irritants from entering. The skin also has microscopic 'gaps' in it, leading to the dry and itchy skin (Martin et al., 2013). Therefore, children (and adults) with eczema must ensure that creams are applied to affected areas to:

- a) prevent further moisture loss, and
- b) prevent irritants from entering the skin.

Eczema is **not** contagious.

Common eczema triggers include (from Martin et al., 2013):

- teething in babies and children
- an illness or cold when the child's body is fighting the illness (the skin is linked to the immune system)
- stress (even babies feel stress if others around them are stressed)
- over-tiredness (children who have eczema often scratch if overtired especially at evening or night-time)

- scratching if the skin is dry (not moisturised) as it becomes itchy and eczema can arise from an ‘itch, scratch, itch’ cycle
- heat (overdressing babies with warm clothes or thick wraps or having heating on too high)
- bathing too often (especially in hot water).

Other irritants can include:

- sand
- grass
- chlorine (or strong bleaches)
- household or hospital grade disinfectants and cleaners
- clothing made from synthetic fibres (allowing the child to overheat), or ‘rough’ fabrics, for example, wool (cotton and loose clothing is best)
- hot showers or baths (short baths or showers using tepid water is recommended)
- fragrances in soaps or washing powders,
- wind (drying out the skin), heat, or cold

Note: Not all children react to all triggers. Generally, food items are not a trigger but can be for some children. Infants or children with allergy to food/s may require supervised diets under an immunology/allergy specialist.

Managing eczema involves regularly applying creams or ointments throughout the day, as allowing the skin to dry out can cause ‘flare ups’ and infections. An infection is generally indicated if there is red, weeping, or crusty skin. The child will require antibiotics to treat any infection. Generally, if there has been a flare up, a topical ointment will be prescribed to apply **underneath** the moisturiser.

IMPLEMENTATION

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

As moisturisers and ointments used to manage eczema can vary greatly, it is imperative that all educators and volunteers at the Service follow a child’s individual *Medical Management Plan* or ASCIA Action Plan for Eczema.

FDC COORDINATORS, NOMINATED SUPERVISOR AND FAMILY DAY CARE EDUCATORS WILL ENSURE:

- upon engagement at the FDC Service all educators will read and be aware of all medical condition policies and procedures, including the *Eczema Management Policy*
- families are provided with information about *Eczema Management Policy* and *Administration of Medication Policy* at time of enrolment
- children with eczema are identified during the enrolment process and FDC educator are informed
- families provide a Medical Management Plan, detailing the treatment required by their child throughout the day (i.e., the name and quantity of the cream to be applied and the frequency of application) prior to enrolment of their child at the FDC Service or if the diagnosis occurs after enrolment, as soon as they are aware of the diagnosis. An ASCIA [Action Plan for Eczema](#) may also be provided
- a communication plan and risk management plan are developed in consultation with parents/guardians, FDC Coordinator and educator
- communication between management, educators, ~~staff~~ and parents/guardians regarding the Service's Eczema Management Policy and strategies are reviewed and discussed regularly to ensure compliance and best practice reflecting latest research
- families of all children with eczema provide creams and soap substitutes for use whilst their child is attending the FDC Service. All creams and soap substitutes must show the expiry date and be clearly labelled with the child's name. If any creams are prescribed by a medical practitioner, it must be in the original container/tube, bearing the original label and instructions with the name of the child clearly displayed and before the expiry date
- FDC educators are informed of individual children's eczema treatment requirements and use only topical ointments and moisturisers that have been provided by the family
- FDC educators adhere to high levels of hygiene when applying creams or ointments to children with eczema – (see *Administration of Medication Policy* and *Handwashing Policy*)
- FDC educators maintain an *Administration of Medication Record* of when creams have been applied or other treatments administered to a child with eczema
- Eczema treatment procedures are consistent with current national recommendations
- FDC educators are able to identify and minimise eczema triggers for children attending the FDC Service where possible
- children with eczema are not discriminated against in any way
- children with eczema can participate in all activities safely and to their full potential

FDC EDUCATORS/ EDUCATOR ASSISTANTS WILL ENSURE:

Educators must ensure to discuss with parents during orientation time if their child has any medical condition. If Yes Please ask parents to call service coordinator/ nominated supervisor for further discussion and clarification (NUR)

- they are aware of the FDC Service's *Eczema Management Policy* and treatments required for each individual child with eczema
- they are able to identify and, where possible, minimise eczema triggers as outlined in the child's Medical Management Plan (ASCIA Action Plan for Eczema).
- children's personal eczema treatments (creams) are taken on excursions or other offsite events, including emergency evacuations and drills
- to apply prescribed eczema creams or treatments in accordance with the child's Medical Management Plan (or ASCIA Action Plan for Eczema) and the FDC Service's *Administration of Medication Policy*, including using the correct amount of moisturiser as informed by families
- to adhere to the highest levels of hygiene when applying creams or ointments. For example, washing hands thoroughly prior to putting gloves on; not using fingers to scoop out creams, but using single-use spatulas (if the cream is not in a pump-action bottle; washing hands after taking gloves off.
- a communication plan is developed in collaboration with parents/guardians of children with eczema in relation to the health and safety of their child, and the supervised management of the child's eczema
- to communicate any concerns to parents/guardians if a child's eczema is limiting his/her ability to participate fully in all activities
- children with eczema are not discriminated against in any way
- that children with eczema can participate in all activities safely and to their full potential, ensuring an inclusive program (note, some children may not be able to participate in sandpit play)
- if a child with eczema needs a bath or shower (for example, due to a toileting accident, the following precautions will be taken:
 - bath or shower water will be tepid – no more than 30°C
 - the child will remain under/in the water for as little time as required
 - soap and shampoo (if required) substitutes will be used: **regular soap will not be used**
 - skin will be pat-dry, not rubbed, with a clean towel (that has been laundered with a fragrance-free washing powder).
 - creams provided by the family will be immediately applied
 - topical ointments (if provided) will be applied **before** applying the moisturising cream.
- any eczema flare ups are treated according to the child's Medical Management Plan and documented, advising parents as soon as practicable.

FAMILIES WILL:

- read and adhere to the FDC Service's *Eczema Management Policy*
- inform FDC Coordinator and FDC educator, either on enrolment or on initial diagnosis, that their child has eczema
- provide a copy of their child's Medical Management Plan or ASCIA Action Plan for Eczema ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- have the *Medical Management Plan* (ASCIA Action Plan for Eczema) reviewed and updated at least annually
- collaborate with management and educators to develop a Communication Plan and Risk Minimisation Plan for their child
- communicate regularly with FDC educator/FDC Coordinator in relation to the ongoing health and wellbeing of their child, and the management of their child's eczema
- ensure all details on their child's enrolment form are completed prior to commencement at the FDC Service
- provide an adequate supply of eczema creams topical ointments (as required) and soap substitutes for their child at all times
- ensure they provide adequate and appropriate spare clothing for their child each day that will not cause a flare up or discomfort (e.g., no woollen fabrics).
- notify FDC educator in writing, of any changes to the information on the Medical Management Plan (ASCIA Action Plan for Eczema), enrolment form, or medication record
- encourage their child to learn about their eczema, and to communicate with FDC educator if they are experiencing discomfort or a flare up.

ONLINE RESOURCES

Australian College of Dermatology <https://www.dermcoll.edu.au/>

Australian Society of Clinical Immunology and Allergy. ASCIA <https://www.allergy.org.au/>

Eczema and school <http://www.eczema.org/eczema-at-school>

Research Projects <https://www.nottingham.ac.uk/research/groups/cebd/projects/1eczema/index.aspx>

The Royal Children's Hospital Melbourne [*Knowing your child's eczema booklet*](#)

SOURCE

Australasian Society of Clinical Immunology and Allergy

Government of Western Australia: Department of Health. (2019). [*Eczema \(atopic dermatitis\)*](#)

Martin, PE, Koplin, JJ, Eckert, JK, Lowe, AJ, Ponsonby, A-, Osborne, NJ, et al 2013, 'The prevalence and socio-demographic risk factors of clinical eczema in infancy: a population-based observational study'.

Clinical & Experimental Allergy, vol. 43, no. 6, pp. 642-651.

Page, S. S., Weston, S., & Loh, R. (2016). Atopic dermatitis in children. *Australian Family Physician*, 45(5),

293-296. Retrieved from <https://www.racgp.org.au/afp/2016/may/atopic-dermatitis-in-children/>
 Perth Children's Hospital (2019). Eczema: <https://pch.health.wa.gov.au/For-health-professionals/Emergency-Department-Guidelines/Eczema>
 Royal Children's Hospital Melbourne. [Eczema management](#)
 The Skin Hospital retrieved from: <https://skinhospital.edu.au/eczema/>
 The Sydney Children's Hospitals Network. [Fact sheet- eczema](#)
 Thompson, D. (2018). [Atopic Eczema Management: It's hard to get consistent information!](#) [Help sheet].
 Australia: Allergy & Anaphylaxis Australia.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> New policy developed for FDC services 		

2.20 ADMINISTRATION OF FIRST AID POLICY

Under the Education and Care Services National Regulations the approved provider must ensure policies and procedures are in place for the administration of first aid (Reg. 168) and take reasonable steps to ensure policies and procedures are followed.

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

NATIONAL QUALITY STANDARD (NQS)

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

2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement-anaphylaxis or asthma emergency
97	Emergency and evacuation procedures
101	Conduct a risk assessment for excursions
102C	Conduct a risk assessment for transporting of children by the education and care service
136 (3)	First Aid Qualifications
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
168 (2)(a)(iv)	The administration of first aid
169	Additional policies and procedures for family day care services
174	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Administration of Medication Policy	Health and Safety Policy
Anaphylaxis Management Policy	Incident, Injury, Trauma and Illness Policy
Asthma Management Policy	Responsible Person Policy
Child Safe Environment Policy	Safe Transportation Policy
Diabetes Management Policy	Sick Child Policy
Enrolment Policy	Sun Safety Policy
Epilepsy Policy	Supervision Policy
Family Communication Policy	Water Safety Policy
	Work Health and Safety Policy

PURPOSE

Our Family Day Care Service has a duty of care to provide and protect the health and safety of children, families, educators, and visitors of the Service. As educators primarily work alone in their approved residence whilst providing care for children, this policy aims to support educators to:

- Preserve life
- Ensure the environment is safe and other people are not in danger of becoming ill or injured
- Ensure that ill or injured persons are stabilised and comforted until medical assistance intervenes
- Relieve pain, if possible
- Monitor ill or injured persons and promote recovery
- Provide immediate and effective first aid to children or adults
- Ensure processes are in place to provide supervision for other children in care whilst first aid is administered

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

SCOPE

This policy applies to the approved provider, coordinator, educators, and educator assistants of the Family Day Care Service.

IMPLEMENTATION

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

The Family Day Care Service, Coordinator or Nominated Supervisor will:

- ensure all Family Day Care educators and educator assistants hold current approved first aid qualifications, have undertaken current approved anaphylaxis management training and current approved emergency asthma management training
- ensure these qualifications meet the requirements of the [Education and Care Services National Regulations](#) and are approved by ACECQA
- provide internal training of the administration of an auto-injection device annually and document training on FDC educator and educator assistant's Educator records (not mandatory)
- implement training and develop procedures to assist educators know the steps of alerting emergency services, administer first aid and provide supervision to other children in their care
- ensure information relating to the administration of first aid resulting from an incident, injury or trauma is recorded on the *Incident, Injury, Trauma and Illness Record* as soon as possible or within 24 hours
- ensure families are notified of any event requiring first aid administration as soon as practicable but no later than 24 hours after the incident, injury or trauma requiring first aid
- ensure FDC educators are offered support and debriefing after a serious incident requiring the administration of first aid
- keep up to date with any changes in procedures for administration of first aid and ensuring that all FDC educators are informed of these changes
- ensure appropriate documentation is being recorded regarding incidents, injury, trauma and illnesses and the administration of first aid
- ensure that each FDC educator has an easily accessible and clearly identified first aid kit in each residence or approved venue
- conduct audits on first aid kits at individual FDC educator's residence /venues
- evaluate risk assessments conducted by FDC educators prior to approving any excursions, regular outings or when providing transport

Family Day Care educators and educator assistants are responsible for:

- safeguarding every reasonable precaution to protect children at the FDC residence/venue from harm and/or hazards that can cause injury
- consider procedures of how they will be able to administer first aid to a child if required whilst they are working on their own in their residence
- discuss possible situations for emergency situations with the Coordinator and Approved Provider
- confidently administering first aid as required to incidents involving children enrolled in their service
- ensuring that all children are adequately supervised while providing first aid and comfort for a child involved in an incident or suffering trauma
- always act in a respectful manner when administering first aid
- consider if an ambulance is required as soon as possible. Follow directions provided by emergency services
- continue to administer first aid until emergency services arrive and take over treatment
- if possible, call for assistance from the educator assistant to assist in supervising other children in care whilst first aid is administered. The educator is expected to ensure other children in care are not placed in any danger whilst first aid is administered to another child or adult
- ensuring they hold:
 - a current ACECQA approved first aid qualification
 - current approved anaphylaxis management training qualifications
 - current approved emergency asthma management training qualifications

(Safe Work Australia recommends first aid qualifications should be renewed every three years)

- refreshing their CPR and administration of an auto-injector device training at least annually (not mandated)

2.20.1 Condition to remain in Service operations

- Educator must renew his/her first aid qualification and CPR before its expire so its important to display them where they can easily check (NUR)
- Educator must renew his/her CPR annually if its not done then they need to complete full first aid course (NUR) because of their negligence.
- If Nurture childcare and education services receives any penalties or infringement notice from any of the department because of educator negligence, educator is fully responsible to pay those penalties on any infringement notice. (NUR)
- ensuring first aid training details are recorded at the Service Principal office and kept up to date
- ensuring there is an induction process for all new educator assistants, and casual and relief educators that includes providing information on the location of first aid kits and specific first aid requirements and individual children's allergies and individual medical management plans

- Ensuring medical management plan should be displayed on the fridge or near to the kitchen area
- ensuring that parents are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at the service and recording details on the *Incident, Injury, Trauma and Illness Record*
- contacting families immediately if a child has had a head injury whilst at the FDC Service
- ensuring a resuscitation flow chart is displayed in a prominent position in the indoor and outdoor environments of the FDC residence/venue
- providing and maintaining an appropriate number of up-to-date, fully equipped first aid kits that meet Australian Standards
- conducting a risk assessment prior to an excursion, regular outing or when providing regular transportation of children to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (NB: risk assessment for a regular outing or regular transportation is required at least annually) [Reg. 102B, 102D (4)]
- ensuring authorisation is gained with the Approved Provider before any excursion, regular outing or transportation of children is made
- providing and maintaining a transportable first aid kit that can be taken to excursions and other activities
- monitoring the contents of all first aid kits and arranging replacement of stock, including when the use-by date has been reached
- disposing of out-of-date materials appropriate
- ensuring first aid kits are recognisable and readily accessible to adults wherever the educator is educating and caring for children as part of a Family Day Care service.

See Procedure in the event of an Incident, Injury, Trauma

Incident, Injury, Trauma and Illness Record must include:

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

2.20.2 Families will:

- sign FDC *Incident, Injury, Trauma and Illness Record* acknowledging they have been made aware of the incident and the first aid that treatment that was given to the child
- provide the required information for the FDC Service's medication record
- provide the service with a medical management plan for their child if required
- provide written consent (via the enrolment record) for FDC educators or educator assistants to administer first aid, seek medical treatment for their child by a registered medical practitioner, hospital or ambulance service and if required, transport the child to hospital
- be contactable, either directly or through emergency contacts listed on the child's enrolment record

2.20.3 First Aid Kit

The approved provider of the Service will ensure that first aid kits are kept up to date and in accordance with National Education and Care Service Regulations at each Family Day Care residence or venue.

All First Aid Kits at the FDC residence or venue must:

- be suitably equipped
- not be locked
- not contain paracetamol
- be suitable for the number children and sufficient for the immediate treatment of injuries at the FDC Service
- be easily accessible to the FDC educator and educator assistant
- be constructed of resistant material, be dustproof and of sufficient size to adequately store the required contents.
- be capable of being sealed and preferably be fitted with a carrying handle as well as have internal compartments
- contain a list of the contents of the kit
- be regularly checked using the First Aid Kit Checklist to ensure the contents are as listed and have not degraded or expired
- have a white cross on a green background with the words 'First Aid' prominently displayed on the outside.
- be easily recognisable.
- be easy to access and if applicable, located where there is a risk of injury occurring
- be available in the FDC educator's vehicle
- be provided on each floor of a multi-level FDC service/venue~(Currently we are not providing approval to multi-level floor area due to absence of required policy)
- be stocked with precautionary items such as sunscreen and water if using outdoors.

- be taken on excursions
- be maintained in proper condition and the contents restocked as required.

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

First Aid Procedure in the event of an Incident, Illness, Injury or Trauma

See Appendix 1 below

First Aid Check/Audit

Our FDC Service will refer to the First Aid Kit-Inventory and Checklist from *Childcare Centre Desktop* (see Appendix 2) or refer to the Checklist in Safe Work Australia’s First Aid in the Workplace Code of Practice as a guide. (Appendix E- Example of contents)

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

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines- *Administration of First Aid Guidelines*
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
 Education and Care Services National Regulations. (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2018). (Amended 2020).
 Revised National Quality Standard. (2018).
 Safe Work Australia First Aid in the Workplace Code of Practice: <https://www.safeworkaustralia.gov.au/law-and-regulation/codes-practice>
 Safe Work Australia Legislative Fact Sheets First Aiders: <https://www.safeworkaustralia.gov.au/first-aid>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE

OCTOBER 2021	<ul style="list-style-type: none"> • Policy reviewed and included suggested guidelines from ACECQA Administration of First Aid Policy (August 2021) • Additional legislative requirements added • Additional related policies 	MAY 2022
MAY 2021	<ul style="list-style-type: none"> • minor edits • annual training for auto injectors highlighted as best practice (not mandatory) 	MAY 2022
SEPTEMBER 2020	<p>Additional links to National Regulations added</p> <p>Support for educators in the event of an injury, accident and first aid is required to be administered</p> <p>Risk assessment for 'regular outings' and transportation added</p> <p>Appendix added for Procedure for Incident Illness Injury or Trauma</p>	MAY 2021
MAY 2020	<p>Additional section for Family Day Care Service, Coordinator</p> <p>Merge of FDC educator and Educator Assistant roles</p> <p>minor formatting edits</p> <p>First Aid Inventory and checklist included as Appendix</p> <p>sources checked for currency</p>	MAY 2021
MAY 2019	<p>Sources checked for currency – removed if obsolete.</p> <p>URLs added.</p> <p>Sources/references alphabetised.</p> <p>Minor formatting for consistency throughout policy.</p> <p>'Related policies' alphabetised.</p>	MAY 2020
MAY 2018	Updated policy to work in collaboration with Safe Work Australia.	MAY 2019
DECEMBER 2017	<p>Updated to meet the National Law and/or National Regulations in respect of a serious incidents and notification purposes.</p> <p>Updated to include revised National Quality Standard</p>	MAY 2018
MAY 2017	Amendments made to comply with Family Day Care requirements	TBA

APPENDIX- 1

2.20.4 PROCEDURE IN THE EVENT OF AN INCIDENT, INJURY, TRAUMA or ILLNESS

If an incident, injury or illness occurs whilst a child is under the care of a FDC educator, the educator will administer First Aid and seek hospital transportation and treatment if required. In the event of a child being subjected to trauma, educators will support children following advice from other professional bodies such as Emerging Minds & BeYou.

Emergency Response Procedures

Follow instructions as per the child's ASCIA Action Plans for children who are known to have asthma or allergies including anaphylaxis

- Administer adrenaline autoinjector or reliever inhaler medication (Ventolin) as instructed
- Contact an ambulance **immediately** for any incident involving anaphylaxis
- Contact an ambulance **immediately** for asthma emergencies if the child cannot breathe normally after following their Action Plan for asthma and receiving reliever inhaler medication or if their breathing become worse.

Head Injuries

All head injuries will be considered as serious and should be assessed by a doctor or the nearest hospital. The child must be closely observed until the parent or guardian collects the child from the educator- or they are transferred to hospital.

- if the child has suffered a head injury and is unconscious, they should not be moved unless there is immediate danger
 - Call for an Ambulance immediately
 - Monitor the airway and breathing until the arrival of an ambulance
 - If breathing stops or they have no pulse, begin CPR immediately

Incident or injury management

The educator will:

- ensure the safety of themselves and others- DRSABCD (Danger, Response, Send for Help, Airway, Breathing, CPR, Defibrillation)
- attend to the child immediately
- if the illness or incident involves asthma or anaphylaxis, refer to the child's Medical Management Plan or Action Plan
- administer First Aid procedures
- assess whether further medical attention is required (hospital or other medical assistance)
- call for help- Contact an ambulance and stay with the child

- contact the parent/s or nominated authorised person on the child’s enrolment form to inform them an ambulance has been called and request them to either:
 - come immediately to educator’s residence or place of incident/injury or
 - meet the ambulance at the hospital
- immediately arrange for assistance (contact approved provider to request assistance) to care for children in care whilst you travel with an injured/ill child in an ambulance
- if unable to provide supervision for attending children, sign injured child into paramedic’s care to be met at the hospital by the parent or authorised nominee or approved provider
- remain with the child until the ambulance arrives
- reassure the child and other children
- ensure any medical conditions/history is readily available (e.g.: Emergency Action Plan for Asthma or Anaphylaxis)
- Action Plans should provide guidance of First Aid responses in an emergency as provided by the child’s doctor and authorised by the child’s parents

Calling an ambulance

Do not hesitate to contact an ambulance if you think emergency services are required.

If a child displays any of the following symptoms or suffers any of the following call 000:

- the child has experienced unconsciousness or an altered state of unconsciousness
- is experiencing difficulty breathing for any reason
- has difficulty breathing and has not responded to reliever inhaler medication (even if they are not diagnosed with Asthma)
- is showing signs of shock
- is experiencing severe bleeding, or is vomiting blood
- has an injury to their head, neck or back
- could have broken bones
- has an extremely high temperature, with or without a rash
- has a temperature above 38°C for an infant under 3 months old

Dial 000 and be prepared to answer the following:

- the address of where the ambulance is required and the closest cross street
- what the problem is
- how many people are injured
- the child/person’s age
- the child/person’s gender

- if the child/person is conscious and
- if the child/person is breathing

2.21 ADMINISTRATION OF MEDICATION POLICY

In supporting the health and wellbeing of children, the use of medications may be required for children at a Family Day Care Service. Any medication must be administered as prescribed by medical practitioners and first aid guidelines to ensure the continuing health, safety and wellbeing for the child. **Under the *Education and Care Services National Law and Regulations*, early childhood services are required to ensure medication records are kept for each child to whom medication is or is to be administered by the service (reg 92).**

2.21.1 Condition for parents (must read)

This policy is connected with all medical policies and will be read as one policy if below condition occurs.

Educator can deny to provide any medicine which is not prescribed by doctors, Medicine do not have any label, any medicine given into the ordinary box or container, any medicine which is not required to give the time is not mentioned on prescriptions, Parents not signing on the medicine administration form, Child is not able to self-administer the medicine but parents are requesting to, Hiding any information about medicine which must be under knowledge of Educator to record, Multivitamins, Educator can't understand the procedure of administration of medication. In all these cases parents can be denied or not any responsibility will be taken if parents are pressuring to educator and educator administer or not administer medicine to child. In all these cases Service provider, Company, Educator or any person who has been recruited or nominated by service will not be responsible and can't make party in any of case related to above conditions and enrolment can be cancelled or denied and all in these cases Service has right to disclose the reason to parents and parents can't take any action against any person due to acceptance of this policy. If any parent is not wanted to accept this policy can't enforce to service to change it in any manner due to child's health and safety is paramount and if parents will do anything which might affect to child's life, then service can't take any responsibility. So please don't hide and given accurate and correct information.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
90	Medical conditions policy
90 (1) (a)	The management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis
90 (2)	The medical conditions policy of the education and care service must set out practices in relation to self-administration of medication by children over preschool age if the service permits that self-administration
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement - anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First Aid qualifications
168	Education and care service must have policies and procedures
170	Policies and procedures are to be followed

RELATED POLICIES

Administration of First Aid Policy	Health and Safety Policy
Arrival and Departure Policy	Incident, Injury, Trauma and Illness Policy
Control of Infectious Disease Policy	Medical Conditions Policy

Child Protection Policy	Privacy and Confidentiality Policy
Code of Conduct Policy	Respect for Children Policy
Diabetes Management Policy	Safe Storage of Hazardous Substances Policy
Enrolment Policy	Sick Children Policy
Epilepsy Policy	Supervision Policy
Family Communication Policy	Work Health and Safety Policy

PURPOSE

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

SCOPE

This policy applies to the approved provider, coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

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

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

Management and the FDC educator will ensure:

- children with specific health care needs or medical conditions have a current medical management plan detailing prescribed medication and dosage by their medical practitioner
- medication is only administered by the FDC educator with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication [Regulation 92(3)(b)]

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

- written consent is requested from families on the enrolment form to administer emergency asthma, anaphylaxis, or other emergency medication or treatment if required
- families are informed of the FDC Service's medical and medication policies
- safe practices are adhered to for the wellbeing of both the child and FDC educators
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication.

A Responsible Person/ FDC Educator/ Educator Assistant will:

- not administer any medication without the written authorisation of a parent or person with authority, except in the case of an emergency, when the written consent on an enrolment form, verbal consent from an authorised person, a registered medical practitioner or medical emergency services will be acceptable if the parents cannot be contacted
- ensure medications are stored in the refrigerator in a labelled and locked medication container with the key kept in a separate location, inaccessible to children. For medications not requiring refrigeration, they will be stored in a labelled and locked medication container with the key kept in a separate location, inaccessible to children
- adrenaline autoinjectors and asthma medication should be kept out of reach of children and stored in a cool dark place at room temperature. They must be readily available when required and not locked in a cupboard. A copy of the child's medical management plan should be stored with the adrenaline autoinjector or asthma medication.
- ensure the FDC educator has approved and current First Aid qualifications in accordance with current legislation and regulations. The FDC educator is responsible for:
 - checking the *Administration of Medication Record* completed by the parent/guardian
 - checking the prescription label for:
 - the child's name
 - the dosage of medication to be administered
 - the method of dosage/administration
 - the use-by date
 - confirming that the correct child is receiving the medication
 - signing and dating the *Administration of Medication Record*
 - returning the medication back to the locked medication container.
- follow hand-washing procedures before and after administering medication

- discuss any concerns or doubts about the safety of administering medications with management to ensure the safety of the child (checking if the child has any allergies to the medication being administered)
- that if there are inconsistencies, medication is not to be administered to the child
- seek further information from parents/guardian, the prescribing doctor or the Public Health Unit before administering medication if required
- ensure that the instructions on the *Administration of Medication Record* are consistent with the doctor's instructions and the prescription label
- invite the family to request an English translation from the medical practitioner for any instructions written in a language other than English
- ensure that the *Administration of Medication Record* is completed and stored correctly including name and signatures of parent/guardian, date and time of administration
- If after several attempts of encouraging the child to take medication, but they still refuse, contact the parent or guardian. Educators cannot use restrictive practices to make a child take medication at any time.
- observe the child post administration of medication to ensure there are no side effects
- respond immediately and contact the parent/guardian for further advice if there are any unusual side effects from the medication
- if a child is not breathing or having difficulty breathing following administration of any medication, the educator will contact emergency services on 000 immediately.

Families will:

- provide management with accurate information about their child's health needs, medical conditions and medication requirements on the enrolment form
- provide the FDC Service with a Medical Management Plan prior to enrolment of their child if required
- develop a Risk Minimisation Plan for their child in collaboration with management and their FDC educator and medical practitioner for long-term medication plans
- notify the FDC educator, verbally when children are taking any short-term medications (at home)
- complete written authorisation for their child over preschool age to self-administer any medication (e.g., asthma medication)
- complete and sign an *Administration of Medication Record* for their child requiring medication whilst they are at the FDC Service
- update (or verify currency of) Medical Management Plan **annually** or as the child's medication needs change

- be requested to sign consent to use creams and lotions should first aid treatment be required (list of items in the first aid kit provided at enrolment)
- keep prescribed medications in original containers with pharmacy labels. Please understand that medication will only be administered as directed by the medical practitioner and only to the child whom the medication has been prescribed for. Expired medications will not be administered.
- adhere to our Service's *Sick Children Policy and Control of Infectious Disease Policy*
- keep children away at home while any symptoms of an illness remain
- keep children at home for 24 hours from commencing antibiotics to ensure they have no side effects to the medication
- NOT leave any medication in children's bags
- give any medication for their child to the FDC educator who will provide the family with an *Administration of Medication Record* to complete
- complete the *Administration of Medication Record* and the FDC educator will sign to acknowledge the receipt of the medication
- provide any herbal/ naturopathic remedies or non-prescription medications (including Paracetamol) with a letter from the doctor detailing the child's name and dosage
- acknowledge they have been provided with a copy of the *Administration of Medication Policy* at time of enrolment.

Self-Administration of Medication

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

- a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication
- medication is stored safely by the FDC educator, who will provide it to the child when required
- supervision is provided by the FDC educator whilst the child is self-administering
- a recording is made in the medication record for the child that the medication has been self-administered
- the *Administration of Medication Record* is signed by the parent upon collection of their child acknowledging the dose and time of administration of medication (eg: Asthma inhaler, Diabetic treatment)

Guidelines for administration of Paracetamol

- families must provide their own Paracetamol for use as directed by a medical practitioner
- Paracetamol will be kept in the locked medication container for emergency purposes should authorised collectors not be contactable

- to safeguard against the incorrect use of Paracetamol and minimise the risk of concealing the fundamental reasons for high temperatures, educators will only administer Paracetamol if it is accompanied by a Doctor's letter stating the reason for administering, the dosage and duration it is to be administered for except for in emergency situations (onset of fever whilst at the FDC Service).
- administration of Paracetamol must follow the procedure for Administration of Medication
- an *Administration of Medication* and/or *Administration of Paracetamol* Record will be completed recording the FDC educator's full name, signature, time and date of administration
- if a child develops a temperature whilst at the FDC Service, the family will be notified immediately and asked to organise collection of the child as soon as possible- within 30 minutes(NUR)
- the family will be encouraged to visit a doctor to find the cause of the temperature. While waiting for the child to be collected, the educator will:
 - remove excess clothing to cool the child down
 - offer fluids to the child
 - encourage the child to rest
 - monitor the child for any additional symptoms
 - maintain supervision of the ill child at all times, while keeping them separated from children who are well.

Medications kept at the FDC Service

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

Emergency Administration of Medication [Reg. 93(5)]

- in the occurrence of an emergency and where the administration of medication must occur, the FDC educator must attempt to receive written authorisation by a parent of the child named in the child's enrolment form who is authorised to consent to the administration of medication (written authorisation may be via a text message or an email)
- If a parent of a child is unreachable, the FDC educator will endeavour to obtain written authorisation from an emergency contact of the child named in the child's enrolment form, who is authorised to

approve the administration of medication (written authorisation may be via a text message or an email)

- If all the child's nominated contacts are non-contactable, the FDC Service must contact a registered medical practitioner or emergency service on 000 for verbal authorisation to administer medication
- In the event of an emergency and where the administration of medication must occur, written notice must be provided to a parent of the child or other emergency contact person listed on the child's enrolment form.
- the educator will complete an *Incident, Injury, Trauma and Illness* record

Emergency Involving Asthma or Anaphylaxis

- for anaphylaxis or asthma emergencies, medication/treatment will be administered to a child without authorisation, following the Asthma or Anaphylaxis Action Plan provided by the parent/guardian. [National Asthma Council (NAC) or ASCIA]
- in the event of a child not known to have asthma or anaphylaxis and appears to be in severe respiratory distress, the emergency plans for first aid must be followed immediately
 - an ambulance must be called immediately
 - place child in a seated upright position
 - give 4 separate puffs of a reliever medication (e.g.: Ventolin) using a spacer if required.
 - repeat every 4 minutes until the ambulance arrives
- in the event of a **child not known to be diagnosed with anaphylaxis and appears to be** an anaphylaxis emergency where any of the following symptoms are present, an EpiPen must be administered
 - difficulty/noisy breathing
 - swelling of the tongue
 - swelling or tightness in throat
 - difficulty talking
 - wheeze or persistent cough
 - persistent dizziness or collapse pale and floppy

(Sydney Children's Hospitals Network – 2020)

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

- Emergency Services 000
- a parent of the child
- the principal office of the Family Day Care Service (leave a message if after hours)
- the regulatory authority within 24 hours (if **an ambulance was called** **urgent medical attention was sought or the child attended hospital**).

The child will be comforted, reassured, and removed to a quiet area under the direct supervision of the FDC educator.

SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
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 Guide to the National Quality Framework. (2017). (Amended 2020).
 National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).
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REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text minor inclusions to reflect National Regulations hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
APRIL 2021	<ul style="list-style-type: none"> review of policy/sources checked for currency additional information included related to observing children post administration of medication/side effects/management reference to Administration of Paracetamol record 	APRIL 2021	
SEPTEMBER 2020	<ul style="list-style-type: none"> edits to include written permission to administer medication by parent/authorised person self-administration of medication requirements informing the principal office of any incident/injury requiring notification 	APRIL 2021	

APRIL 2020	<ul style="list-style-type: none"> • rearrangement of some points for better flow • addition of information • inclusion of Medical Management Plan • additional information re: anaphylaxis or asthma emergency 	APRIL 2021
APRIL 2019	<p>Guidelines for administration of Paracetamol added.</p> <p>Deleted point relating to two educators being present to administer medication.</p> <p>Additional information added to points.</p> <p>Sources/references updated and alphabetised.</p> <p>Information added in reference to Regulation 96 – self-medication</p>	APRIL 2020
APRIL 2018	Policy created to comply with National Regulations and National Quality Standard	APRIL 2019

2.22 ASTHMA MANAGEMENT POLICY

Asthma is a chronic health condition, which is one of the most common reasons for childhood admission to hospital. Correct asthma management will assist to minimise the impact of asthma. Children under the age of six usually do not have the skills or ability to recognise and manage their own asthma effectively. Our Family Day Care (FDC) Service recognises the need to educate its staff, educators, educator assistants and families about asthma and to implement responsible asthma management strategies.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
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	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy	Handwashing Policy
Administration of Medication Policy	Medical Conditions Policy
Enrolment Policy	Privacy and Confidentiality Policy
Family Communication Policy	Supervision Policy
Incident, Injury, Trauma and Illness Policy	

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including asthma management. We aim to create and maintain a safe and healthy environment for all children enrolled at the FDC Service where all children with asthma can fully participate. We ensure all FDC educators, educator assistants, coordinators and staff follow our *Asthma Management Policy* and procedures and children's medical management plans.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

We are committed to be an Asthma Friendly Service as outlined by Asthma Australia. This means:

- the majority of staff have current training in Asthma First Aid and routine Asthma management
- each FDC educator and educator assistant holds a current ACECQA-approved Emergency Asthma Management certificate
- Asthma Emergency Kits (AEKs) are accessible and include in-date reliever medication, and single-use spacers with masks for children under 5
- Asthma First Aid posters are on display and information is available for FDC Educators and parents
- Policies are Asthma Friendly.

Source: Australian Children's Education & Care Quality Authority (acecqa.gov.au)

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

- g. a safe environment free from foreseeable harm and
- h. adequate Supervision for children

All FDC educators, educator assistants, including relief staff, must have adequate knowledge of the signs and symptoms of asthma to ensure the safety and wellbeing of the children. Management will ensure all FDC educators and educator assistants are aware of children’s medical management plans and risk management plans.

BACKGROUND

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

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

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

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

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

Legislation that governs the operation of approved children’s services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. Our FDC Service will ensure that all FDC educators and educator assistants have current approved emergency asthma management training in accordance with the Education and Care Services National Regulations.

It can be difficult to diagnose asthma with certainty in children aged 0–5 years, because:

- episodic respiratory symptoms such as wheezing, and coughing are very common in children, particularly in children under 3 years
- objective lung function testing by spirometry is usually not feasible in this age group
- a high proportion of children who respond to bronchodilator treatment do not go on to have asthma in later childhood (e.g., by primary school age).

ASTHMA AND COVID-19

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

Health practitioners have encouraged parents of children with asthma to:

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

(Asthma Australia, June 2020)

IMPLEMENTATION

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

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

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

Management/Nominated Supervisor/Co-ordinators will ensure:

- that as part of the enrolment process, **all** parents/guardians are asked whether their child has a medical condition and clearly document this information on the child's enrolment record

- if the answer is *yes*, the parents/guardians are required to provide a medical management plan and signed by a registered medical practitioner **prior** to their child's commencement at the **FDC** Service [see section below-*When a child with asthma is enrolled in the FDC Service*]
- parents are provided with a copy of the Service's *Medical Conditions Policy, Asthma Management Policy* and *Administration of Medication Policy* upon enrolment of their child
- written consent is requested from families on the enrolment form to administer emergency asthma medication or treatment if required
- that all FDC educators hold approved and current first aid qualifications, anaphylaxis management training and Emergency Asthma Management training meeting the requirements of the National Law and National Regulations and are approved by ACECQA
- the details of approved Emergency Asthma Management training are included on the staff record
- upon employment/engagement at the Family Day Care Service all staff will read and be aware of all medical condition policies and procedures, maintaining awareness of asthma management strategies
- that medication is administered in accordance with the *Administration of Medication Policy*
- an *Administration of Medication Record* is kept for each child to whom medication is to be administered by the FDC Service
- that in the event of a serious incident such as a severe asthma attack, notification to the regulatory authority is made **within 24 hours of the incident**
- that when medication has been administered to a child in an asthma emergency, the parent/guardian of the child are notified as soon as is practicable **or within 24 hours of the incident**
- children with asthma are not discriminated against in any way
- children with asthma can participate in all activities safely and to their full potential.
- to communicate any concerns with parents/guardians regarding the management of children with asthma at the **FDC** Service
- Asthma Australia's Asthma First Aid posters are displayed in key locations at the FDC Service
- discussions occur regarding authorisation for children to self-administer asthma medication if applicable. Any authorisations for self-administration must be documented in the child's Medical Management Plan and approved by the FDC Service, FDC educator, parents/guardian and the child's medical management team

When a child with asthma is enrolled at the FDC Service, management/coordinator will:

- meet with the parents/guardians to begin the communication process for managing the child's medical condition
- not permit the child to begin education and care until a medical management plan developed in consultation with parents and the child's medical practitioner is provided

- develop and document a risk minimisation plan in collaboration with parents/guardian and the FDC educator [see Risk Minimisation Plan section]
- discuss with the requirements for completing an *Administration of Medication Record* for their child
- discuss any requests for self-administration of medication with families and the FDC educator
- ensure the medical management plan includes:
 - specific details of the child’s diagnosed medical condition
 - supporting documentation (if required)
 - a recent photo of the child
 - triggers for asthma (signs and symptoms)
 - list of usual asthma medicines including doses
 - response for an asthma emergency including medication to be administered
 - contact details and signature of the registered medical practitioner
 - date the plan should be reviewed
- keep a copy of the child’s asthma medical management plan and risk minimisation plan in the enrolment record
- ensure families provide reliever medication and a spacer (including a child’s face mask, if required) whilst their child is attending the FDC residence or **approved** venue
- collaborate with parents/guardians and the FDC educator to develop and implement a communication plan and communicate any concerns with parents/guardians regarding the management of their child’s asthma [see Communication Plan section]
- ensure that whenever the FDC educator takes children out of the FDC residence or **approved** venue, they carry a copy of each child’s individual asthma medical management action plan and required medication
- ensure an *Administration of Medication Record* is kept for each child to whom medication is to be administered by the FDC educator
- ensure families update their child’s asthma medical management/action plan regularly or whenever a change to the child’s management of asthma occurs
- regularly check the expiry date of reliever medication and ensure that spacers and facemasks are cleaned after every use

FDC educators will ensure:

- they are aware of the Family Day Care Service’s *Asthma Management Policy* and asthma first aid procedure (ensuring that they can identify children displaying the symptoms of an asthma attack and locate their personal medication, and Asthma medical management plan)
- to maintain current approved Emergency Asthma Management qualifications

- they are able to identify and, where possible, minimise asthma triggers as outlined in the child's asthma medical management plan and risk minimisation plan
- that the first aid kit, children's personal asthma medication and Asthma medical management plans are taken on excursions or other offsite events, including emergency evacuations and drills
- to administer prescribed asthma medication in accordance with the child's asthma medical management plan and the FDC Service's *Administration of Medication Policy*
- to discuss with parents/guardians the requirements for completing an *Administration of Medication Record* for their child
- ensure any asthma attacks are clearly documented in the *Incident, Injury, Trauma or Illness Record* and advise parents as a matter of priority, when practicable
- communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- that children with asthma are not discriminated against in any way
- that children with asthma can participate in all activities safely and to their full potential, ensuring an inclusive program
- Educator must ensure physical environment of their FDC will remain smoke free at all the time to protect from any harm(NUR).

Families will:

- inform staff, either on enrolment or on initial diagnosis, that their child has asthma
- read the FDC Service's *Asthma Management Policy*
- provide a copy of their child's Asthma medical management/action plan to the FDC Service ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- provide written authorisation to the FDC Service for their child to self-administer medication (if applicable)
- develop a risk minimisation plan in collaboration with the Nominated Supervisor/Responsible Person/Coordinator and FDC educator
- ensure all details on their child's enrolment form and medication record are completed prior to commencement at the FDC Service
- provide an adequate supply of appropriate asthma medication and equipment for their child when they attend the FDC residence or approved venue Service
- provide an updated plan at least annually or whenever medication or management of their child's asthma changes
- communicate regularly with their FDC educator in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma

- encourage their child to learn about their asthma, and to communicate with their FDC educator if they are unwell or experiencing asthma symptoms

If a child suffers from an asthma emergency the FDC educator will:

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

Reporting Procedures

Any incident involving serious illness of a child while the child is being educated and cared for by the FDC Service for which the child attended, or ought reasonably to have attended a hospital e.g., severe asthma attack is considered a serious incident (Regulation 12).

- FDC educator/s involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the Nominated Supervisor/Coordinator of the FDC Service
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- place a copy of the record in the child's file
- the Nominated Supervisor /Coordinator will inform the management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours through the [NQA IT System](#) (as per regulations)
- the FDC educator will be debriefed after each serious incident and the child's individual medical management plan/action plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- discussions about exposure to the allergen/trigger and the strategies that need to be implemented and maintained to prevent further exposure.

Minimisation Plan for a child with diagnosed asthma

The Coordinator and FDC educator together with the parents/guardians of a child with asthma, will discuss and agree on a risk minimisation plan for the emergency management of an asthma attack based on the child's asthma medical management/action plan. This plan will be included as part of, or attached to, the child's asthma medical management/action plan and enrolment record.

The plan will assess and minimise risks relating to the child's diagnosed health care need including any known allergens. Strategies for minimising the risk are developed and implemented.

The risk minimisation plan is to be updated whenever the child's medical management plan is changed or updated.

Common asthma triggers include:

- viral infections- such as colds, flu and respiratory conditions
- cigarette smoke
- physical exercise
- allergens- mould, pollens, pets
- irritants in the environment- dust, pollution, wood/bush fire smoke
- weather- changes in air temperature or thunderstorms
- chemicals and strong smells- perfumes, cleaning products
- stress or high emotions (including laughter or crying)

Betterhealth.vic.gov

Communication Plan

A communication plan will be created in accordance to our *Medical Conditions Policy*. The communication plan will be developed in collaboration with parents/guardians. It will detail the negotiated and documented manner to communicate any changes to the child's medical management plan and risk management plan for the child with relevant staff, educators, and volunteers.

Any changes to a child's medical management plan and risk minimisation plans will be documented in the communication plan.

RESOURCES

[Asthma First Aid A4 Poster](#)

[Asthma Action Plan](#)

[Asthma in under 5s](#)

[KIDS FIRST AID FOR ASTHMA CHART](#)

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

Source

Asthma Australia: <https://asthma.org.au>

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

Early Childhood Australia Code of Ethics. (2016).

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

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

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

<https://www.astmahandbook.org.au/>

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

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).

[Revised National Quality Standard](#). (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text- abbreviation of Family Day Care to FDC throughout policy for consistency • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY 2021	<ul style="list-style-type: none"> • Major changes/rearrangement of policy for consistency with related medical conditions policies (anaphylaxis, diabetes, epilepsy) • deletion of repetitive statements in all sections • new sections added- 'When a child is diagnosed with asthma is enrolled at the FDC Service' and 'Reporting procedures' • Policy review includes ACECQA policy guidelines/components (June 2021) • information regarding self-administration of asthma medication added • additional resources for FDC service added 	JULY 2022	
JULY 2020	<ul style="list-style-type: none"> • minor formatting changes • Additional regulations added • Additional related policies added • Additional resources added • COVID-19 recommendations • Communication Plan information included • sources checked for currency 	JULY 2021	
JULY 2019	<ul style="list-style-type: none"> • Grammar and punctuation edited. • Additional information added to points. • Sources checked for currency. 	JULY 2020	

	<ul style="list-style-type: none"> • New source added to represent referenced work. • Regulation 136 added. • Moved the 'scope' to before information begins. 	
JULY 2018	<ul style="list-style-type: none"> • New policy draft 	JULY 2019

2.23 EXCURSION/INCURSION POLICY

2.24

Under the Education and Care Services National Regulations the approved provider must ensure policies and procedures are in place for managing excursions (Reg. 168) and take reasonable steps to ensure policies and procedures are followed. Excursions/incursions enhance children's learning by providing them the opportunity to participate in curriculum planned activities and experiences to extend on their skills and knowledge in the current interest topic. Our Family Day Care Service recognises that excursions provide opportunities for children to explore the wider community in a small or larger group and extend on the educational program provided offered by our experienced Family Day Care educators.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS

4 (1)	Definition of regular outing
89	First Aid Kits
90	Medical conditions policy
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursion
123A	Family day care co-ordinator to educator ratios- family day care service
124	Number of children who can be educated and cared for-family day care educator
136	First Aid qualifications
161	Authorisation to be kept in enrolment records
168	Policies and Procedures are required
170	Policy and procedures to be followed
171	Policies and procedures to be kept available
Sec. 165	Offence to inadequately supervise children

RELATED POLICIES

Acceptance and refusal of Authorisations Policy	Incident, Incident, Trauma and Illness Policy
Administration of Medication Policy	Interaction with Children, Family and Staff Policy
Administration of First Aid Policy	Medical Conditions Policy
Child Safe Environment Policy	Orientation of New Families Policy
Code of Conduct Policy	Privacy and Confidentiality Policy
Delivery of Children to, and Collection from and Education and Care Service Premises	Respect for Children Policy
Educational Program Policy	Safe Transportation Policy
Emergency Evacuation Policy	Sun Safety Policy
Family Communication Policy	Supervision Policy
	Water Safety Policy

PURPOSE

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

SCOPE

This policy applies to the Approved Provider, Coordinator, Family Day Care educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

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

DEFINITIONS (effective 1 October 2020)

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

- (a) a child or children leave the education and care service premises in the company of an educator and
- (b) the child or children do not leave the school site

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

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

Incursion: means an activity organised by our FDC Service, whereby an outside body is employed or engaged to visit the service to run an educational program and to promote culture and diversity. This could include a visit from a dentist, the Rural Fire Service, an Aboriginal Cultural awareness group, science or reptile show or a musical or drama performance. Some incursions may be offered free of charge whilst others may incur a small participation cost.

CONSIDERATIONS FOR AN EXCURSION

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

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

- time away from the FDC residence/or venue
- availability of toilet and washing facilities at the venue
- access to safe drinking water
- adequate health and hygiene practices
- possible risk to children (identified in risk assessment)
- accessibility for all children
- transportation in FDC educator's car or another vehicle
- cost
- teaching children safety procedures and responsibilities whilst on an excursion
- weather- wet weather arrangements
- Risk Assessment documentation provided by the excursion venue

EXCURSION/INCURSION RISK ASSESSMENT

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

The FDC Service will ensure:

- an *Excursion/Incursion Risk Assessment* and management plan is developed by the FDC educator prior to any excursion or incursion and approved by the Coordinator/Nominated Supervisor [see: *Excursion Risk Management Plan, Regular Outing Risk Management Plan, Incursion Risk Management Plan*]

The FDC Educator will ensure(NUR)

- families are notified about the excursion using an *Excursion Permission* letter and written authorisation must be provide by a parent or other person named in the child's enrolment record
- families have a right to view the risk assessment prior to the excursion/incursion upon request in which the FDC Service must comply with ensuring all information is available
- Educator must ensure to have full insurance not their party insurance for the vehicle which for which they are using for transportation of the children being cared and educated by them (NUR)
- Educator will ensure to check with insurance providers about their family day care business requirement (NUR).

- Educator legal responsibility to hold licences for transporting the children according to WA guidelines/Requirements (NUR).
- Educator is fully responsible to review risk assessment of each and every spot annually and get signature from parents on regular outing permission form and permission for regular transportation annually (NUR).
- Educator must ensure to check UV radiation before taking the child for regular outing (NUR).
- Educator must follow NO HAT/NO PLAY and bring in your curriculum to guide the children to be Sun Smart. IF child forget to bring educator must have arrangement of spare hat / Sunscreen available at FDC(NUR).
- During Enrolment Educator must ensure to take signature from the parents on sunscreen permission form (NUR).
- Educator Must consider children sleep and rest time before planned any activities and planned any regular outings (NUR)
- Children in care all the time being supervised by approved Educator should not be in any of their own child supervision (NUR)
- Educator must ensure to attend Safe Transportation training every two years or recommended by the service earlier than before if any kind of negligence found (NUR).
- Educator must notify to the service before taking the children out for any educational activity like library/park/shopping centre etc. of the FDC premises.
- Educator must ensure to notify service / parents 5 days prior to planned excursion and get permission from parents on excursion permission form and send copy of risk assessment done by the educator with notification (NUR).
- the risk assessment must
 - identify and assess possible risks that the excursion/incursion may pose to the health, safety and wellbeing of any child being taken on the excursion
 - specify how the identified risks will be managed and minimised
 - consider the proposed route and destination for the excursion and
 - identify any water hazards
 - reflect on any risks associated with water-based activities
 - consider the transport to and from the proposed destination for the excursion
 - consider the duration of the transportation
 - consider any requirements for seatbelts or safety restraints under a law for our state/territory jurisdiction
 - the process for entering and exiting the education and care service premises and the pick-up location or destination (as required)

- procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking
- consider the ratio of adults to children involved in the excursion
- consider the risks posed by the excursion/incursion, the FDC educator, educator assistant or other responsible adults required to provide supervision, and whether any adults with specialised skills are required to ensure children’s safety (e.g.: lifesaving skills)
- consider the planned activities
- determine the duration of the excursion
- consider items that should be taken on the excursion (mobile phone, emergency contacts, first aid kit, medical plans, etc.).
- consider strategies to ensure supervision is consistent at all times during the excursion-transitions, toileting, departure and conclusion of the excursion

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

PARENT/FAMILIES AUTHORISATION

The Family Day Care Service/Nominated Supervisor will ensure:

- that a child is not taken outside the FDC residence/venue on an excursion unless written authorisation has been provided
- the authorisation must be given by a parent or other authorised person named in the child’s enrolment record as having authority to authorise transportation of a child
- the authorisation form must state:
 -
 - the reason the child is to be taken outside the premises
 - the reason the child is to be transported (if transportation is included in the excursion)
 - if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outing
 - the date the child is to be taken on the excursion and transported
 - a description of the proposed pick-up location and destination for the excursion
 - the method of transport to be used for the excursion- e.g.: FDC educator’s private vehicle
 - the proposed activities to be undertaken by the child during the excursion
 - the period the child will be away from the FDC residence or venue
 - the period of time during which the child is to be transported
 - the anticipated number of children likely to be attending the excursion

- the anticipated educator to child ratio attending the excursion to the anticipated number of children attending the excursion (as per regulations for FDC services)
- the anticipated number adults who will accompany and supervise the children on the excursion
- any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported
- that a risk assessment has been prepared and is available at the FDC Service
- that written policies and procedures for transporting children are available at the Service
- if the excursion is a regular outing, the authorisation is only required to be obtained once in a 12-month period
- authorisations must be kept securely in the child's enrolment records

STAFFING ARRANGEMENTS

The Family Day Care Service and FDC educator will ensure that:

- educator to child ratios is no less than the prescribed ratios as per National Regulations
- additional staff are engaged to provide care and support to children with additional needs
- consideration for adequate supervision may include:
 - the number, age and ability of children
 - the number and physical positioning of educators
 - each child's current activity
 - risks related to the mode of transport (for example: walking)
 - visibility and accessibility
 - the experience and skill of each educator
- FDC educators are aware of their responsibility to provide supervision to other responsible adults or volunteers assisting on the excursion
- FDC educators are aware the procedures to follow in the event of an emergency
- FDC educator must hold current approved first aid qualification, current approved emergency asthma management and current approved anaphylaxis management training

PARENT AND VOLUNTEER PARTICIPATION

The Family Day Care Service will ensure parents and volunteers:

- are encouraged to participate in excursions where possible
- cannot be counted as part of the educator to child ratio
- cannot be left alone with a child/children and must be supervised by the FDC educator at all times

- are briefed prior to participating on an excursion about the risk assessment, emergency procedures, supervision, photograph policy for privacy and confidentiality and use of mobile phone
- are aware that smoking is not permitted
- are aware of need to wear appropriate clothing and footwear.

ITEMS TO TAKE ON AN EXCURSION

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

- a suitably equipped first aid kit
- fully charged and operating mobile phone
- emergency contact information details for all children participating on the excursion
- medication for children requiring medical and relevant medical management plans
- items required for excursion circumstances- such as sunscreen, hats, other equipment
- child's attendance record

TRANSPORTATION FOR EXCURSION

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

The *means of transport* may mean:

○ **Walking**

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

FDC educators will actively supervise children at all times

FDC educators will ensure all children and adults obey road rules

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

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

○ **Bus**

the Family Day Care Service or FDC educator must ensure that the seating capacity as displayed on the compliance registration is not exceeded. All children must sit on seats, preferably with, or close to

an adult. Any requirements for seat belts or safety restraints under law must be followed depending on the vehicle used. If the bus has seat belts, they must be worn at all times. If the bus has seat belts, they must be worn at all times.

○ **Train**

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

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

○ **Car**

FDC educators and FDC educator assistants must only transport the number of children that can be safely transported in the car/vehicle. The motor vehicle that is used to transport children on an excursion must be fitted with child restraints and/or seatbelts that are appropriate for the age and weight of each child, that conform to the Australian Standards, and are professionally installed or checked by an authorised restraint fitter.

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

All children must be fastened in the vehicle according to National Child Restraint Laws for Vehicles (below). The FDC educator and FDC educator assistant who transport children should hold a current Australian driver's licence. The process for entering and exiting the Service premises safely must be considered at all times.

NATIONAL CHILD RESTRAINT LAWS FOR VEHICLES

- children up to the age of six months must be secured in an approved rearward facing restraint.
- children aged from six months old but under four years old must be secured in either a rear or forward-facing approved child restraint with an inbuilt harness
- children under four years old cannot travel in the front seat of a vehicle with two or more rows.
- children aged from four years old but under seven years old must be secured in a forward-facing approved child restraint with an inbuilt harness or an approved booster seat
- children aged from four years old but under seven years old cannot travel in the front seat of a vehicle with two or more rows, unless all other back seats are occupied by children younger than seven years in an approved child restraint or booster seat

- children aged from seven years old but under 16 years old who are too small to be restrained by a seatbelt properly adjusted and fastened are strongly recommended to use an approved booster seat
- children in booster seats must be restrained by a suitable lap and sash type approved seatbelt that is properly adjusted and fastened, or by a suitable approved child safety harness that is properly adjusted and fastened.

If the child is too small for the child restraint specified for their age, they should be kept in their current-sized child restraint until it is safe for them to move to the next level.

If the child is too large for the child restraint specified for their age, they may move to the next level of child restraint.

Source: NSW Government Centre for Road Safety, 2017.

INSURANCE

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

CHECKING FOR CHILDREN'S SAFETY

The FDC educator and educator assistant will ensure:

- children's attendance records are taken on excursions
- all children are accounted for when embarking/disembarking the car/vehicle or bus
- children's names are marked off as they enter and leave the vehicle including time and date
- a thorough check is made of the vehicle to ensure no child is left in the vehicle (a second person should repeat this check for safety)
- the vehicle is parked to avoid other vehicles, driveways or car parks
- the vehicle is parked as close as possible to the FDC residence or visiting venue
- children only disembark the vehicle when it is safe to do so
- where possible, educators hold children's hands to supervise them walking into the FDC residence/venue
- head counts are conducted at least every 30 minutes whilst on the excursion
- bathrooms and toilets are checked for any potential hazard before children enter, and children are escorted to the bathrooms and supervised

LOST CHILD DURING AN EXCURSION

In the event of a child being unaccounted for during an excursion, the FDC educator will immediately:

- inform another educator and provide supervision for groups
- conduct a head count
- ask children/parent helpers/other educators if they have seen the missing child
- search the premises
- check organised meeting points (use mobile phone to contact other educators)
- alert the venue management and request that an announcement is made
- if the child is still unaccounted for after checking as above, the educator will contact the Police on 000 and report the incident
- contact the nominated supervisor at the principal office to contact parents/guardian
- educators will reassure other children and provide supervision
- the Approved Provider must make a notification to the Regulatory Authority within 24 hours of a serious incident

SOURCE

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

Australian Children’s Education & Care Quality Authority (ACECQA). 2021. Policy and Procedure Guidelines. *Excursion Guidelines*.

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

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Guide to the National Quality Framework. (2018). (Amended 2020).

Kidsafe Victoria *Road Safety* <https://www.kidsafevic.com.au/road-safety/>

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Victoria State Government Education and Training *Early Childhood Professionals*

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY/JUNE 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATION	<ul style="list-style-type: none"> • Policy reviewed and suggestions from ACECQA <i>Excursions Policy Guidelines</i> (June 2021) added 		

	<ul style="list-style-type: none"> • Policy name change to included Incursion • Additional legislative requirements added • Additional related policies • Definition of incursion added • Sources checked for currency 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
MAY 2021	<ul style="list-style-type: none"> • Policy reviewed for currency • additional inclusion for checking for children’s safety • ensuring adequate supervision added • lost child procedure added Links checked and additional resource added	MAY 2022
AUGUST 2020	amendments to policy to reflect new regulations for risk assessments for excursions and written authorisations for parents (effective 1 October 2020) new definition added for ‘regular outing’	MAY 2021
MAY 2020	additional regulations added additional sections added: considerations/staffing arrangements /items to take on an excursion/parent and volunteer information /walking sources edited and checked for currency minor editing and formatting	MAY 2021
MAY 2019	Additional information added to points. Points added (Highlighted). Section added and referenced: National Child Restraint Laws for Vehicles Sources/references corrected, updated, and alphabetised. ‘Related policies’ alphabetised.	MAY 2020
MAY 2018	Minor changes made to include ‘Incursions’ as the same process of risk assessment would apply.	MAY 2019
DECEMBER 2017	Updated to comply with changes to National Quality Standard	MAY 2018
MAY 2017	Modifications made to adhere to Family Day Care Service	TBA

2.25 NAPPY CHANGE AND TOILETING POLICY

Our Family Day Care Service aims to ensure Family Day Care educators meet the needs of children by providing a clean, safe, and hygienic place for nappy changes and toileting in their residence or venue. We believe that nappy-changing and toileting rituals provided in a caring and responsive manner are valuable opportunities to promote children’s learning, meet individual needs, and to develop strong relationships with children.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	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 Educator are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
106	Laundry and hygiene facilities

109	Toilet and hygiene facilities
115	Premises designed to facilitate supervision
116	Assessments of family day care residences and approved family day care venues
155	Interactions with children
156	Relationships in groups

RELATED POLICIES

Control of Infectious Diseases Policy	Hand Washing Policy
Family Communication Policy	Health and Safety Policy
Interactions with Children, Families and Educator Policy	Supervision Policy

PURPOSE

We aim to ensure best practice guidelines are adhered to for nappy changing and toileting, ensuring that bathrooms used by children and nappy change areas are maintained in a hygienic state in order to eliminate or reduce the spread of infectious disease. Our FDC Service will also ensure that the nappy change and toileting routines implemented are used as an opportunity for one-on-one positive interactions between the FDC educator and child.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Nappy changes and toileting routines are incorporated into the FDC educator's routine, both at designated times and throughout the day to meet children's individual needs. Educators will communicate with parents to develop continuity between their FDC service and home in regard to their child's nappy change and toileting practices. FDC educators will develop a toileting plan in consultation with parents to develop a consistent approach to toilet training. Educators/educator assistants must be responsive to special requirements related to culture, religion, or privacy.

Toileting and nappy changing will be carried out at frequent intervals throughout the day. Children who are in nappies will have each nappy change recorded in the Nappy Change Register by the FDC Educator. This is available for parents to sight. The FDC Educator will monitor the progress of a child's toilet training and provide information to parents of how many times the child actually sat on the toilet or managed to use the toilet in a day.

Having their needs met quickly and in a caring responsive way builds children's sense of trust and security. It is also important to remember that the way that educators react to soiled or wet nappies, toileting needs, and toileting accidents give children powerful messages about themselves and their bodies.

Nappy changing and toileting routines are an excellent opportunity for educators/educator assistants to:

- conduct one-to-one interactions with babies, toddlers, and children, giving them undivided attention
- build trusting and caring relationships with babies, toddlers, and children
- interact with babies and toddlers using verbal and non-verbal communication and respond to children's communication
- participate in age-appropriate activities with children, such as singing, saying rhymes
- build children's understanding of what is happening by inviting them to the bathroom and supporting their ability to predict what will happen next in the routine
- help children begin to develop and extend their self-help skills, which includes handwashing and dressing, and encouraging children to identify the feeling of accomplishment and pride that come with this
- educators/educator assistants will carry out nappy changing; however, at times if a student is required to carry out this as part of their practical requirements, they will be under the constant supervision of the educator.

Appropriate hygiene practices must be maintained, and procedures followed to minimise any risk of infection at all times. Educators/educator assistants will continuously role-model and promote healthy hygiene practices and hand washing procedures, encouraging and supporting the children to follow these practices.

THE FAMILY DAY CARE SERVICE WILL:

- implement policies, procedures, and training for FDC educators to ensure nappy change procedures support children's safety, protection, relationships, and learning
- conduct annual assessments of the Family Day Care residence/venue
- consider the suitability of nappy change arrangements for children attending, or likely to attend the service who wear nappies

- ensure FDC educators display handwashing posters in bathrooms and near nappy change area
- provide information to families at time of enrolment about:
 - use of disposable nappies
 - procedures if their child develops or presents with nappy rash
 - Administration of Medication authorisation for application of products to treat nappy rash including prescription treatments or over the counter creams
 - requests to provide adequate supplies of clothes for children who are toilet training
 - the importance of ongoing and open communication between educators and families about nappy changing and toilet training with their child

THE FDC EDUCATOR and/or EDUCATOR ASSISTANT WILL:

- provide an adequate and appropriate hygienic facility for nappy changing
- ensure the nappy change facility is designed and located in a way that prevents unsupervised access by children
- ensure that the nappy change facility is designed and maintained in a way that facilitates supervision of children at all times, having regard to the need to maintain the rights and dignity of the children using the facilities
- discuss children’s individual needs with families to ensure practices are reflective of their home environment and are culturally sensitive
- develop systems to ensure that soiled clothing and soiled nappies are disposed of or stored in a location that children cannot access
- ensure that adult and children’s hand washing facilities are located within the nappy change area and procedures are displayed visually and in community languages in appropriate areas
- ensure handwashing posters are displayed in bathrooms and nappy change areas
- ensure nappies are checked regularly throughout the day to ensure children are not susceptible to nappy rash and discomfort. A system to record this routine will be maintained for reporting purposes.
- provide information to families regarding children’s nappy changes
- ensure nappy bins have a ‘hands-free’ lid
- ensure nappy bins are located out of children’s reach, preferably in a child-proof cupboard
- ensure nappy bins are emptied once during the day and at the end of each day, or more regularly as required
- ensure nappy change procedures remain compliant and current (see Appendix 1: Nappy changing procedure below)
- always follow the FDC service’s requirements for nappy changing and toileting and communicating with families

- utilise nappy change times to interact with children, toddlers, and babies on an individual basis. The nappy change time will allow the educator to converse, sing, play, and generally interact with the child. This time is a particularly good time for supporting language skills
- organise the nappy change area to promote positive interactions and promote positive learning experiences. For example, place pictures or mobiles to stimulate children’s interactions and to encourage learning and language development
- ensure physical contact and direct supervision with babies and toddlers throughout the nappy change experience
- ensure no child is left alone on a nappy change mat or bench
- keep nappy change area fully stocked with all required materials at all times to ensure efficiency and the health and safety of each child
- encourage mobile children to walk to the nappy change area
- assist the mobile baby or toddler to walk up the steps onto the nappy change bench to minimise lifting by educators and to promote children’s agency. Where a child is not walking, educators will follow manual handling practices to lift and carry the baby to the nappy change mat.
- only apply nappy cream to a child if authorisation is provided in an Administration of Medication form, signed by the parent/guardian.
- FDC educators must ensure to change nappy change mat if the mat is not in good condition/rip/tear from any of the corner to remain comply with national quality area 2 children health and safety and service policy and procedure (NUR).
- FDC educator must ensure that if they noticed any of kind of rash/ scratch/unusual mark during first nappy change in the morning please straightway text to the parents to avoid any issue risen by the parents (NUR)
- FDC educator will show nappy change facility to the parents during orientation before their child/ren enrolment (NUR)

TOILET TRAINING

Toileting occurs at any time of the day and is specific to individual needs. The FDC educator will communicate with parents/guardians to develop consistency between home and the service in regard to their child’s toileting habits. FDC educators must be aware of and consider any special requirements related to culture, religion, or privacy needs.

Decisions about when to begin toilet training will be made by families or may occur through shared decision making between families and the FDC educator. This decision is based on mutual respect and open communication, which is crucial for a successful outcome. Families may have strong views and

preferences about when and how their child learns to use the toilet, which may come from their cultural background or individual preferences which must be respected by educators/educator assistants. The priority of the individual child's wellbeing is paramount, and the decision to begin assisting the child to learn to use the toilet should be based on signs of readiness from the child and discussion with families.

Early signs of readiness may start to appear when children are around two years old, but generally appear closer to the child's third birthday. However, generally boys will show signs of readiness later than girls.

These signs may include:

- showing interest in the toilet, including having an interest in others using the toilet
- indicating a need to go to the toilet either before, or while they are passing urine or faeces
- staying dryer for longer periods of time
- beginning to dislike wearing a nappy and perhaps trying to pull it off when it's wet or soiled
- indicating a desire to sit on the toilet

It is important to keep the process subdued and not place unnecessary attention and pressure on the child to perform. Acknowledging children's successes, no matter how infrequent or small is vital for their self-esteem and confidence. Families and educators can expect accidents, which should be treated respectfully, without fuss, and in a supportive manner.

Educators and families will communicate with each other regarding how the toilet learning is progressing, both in care and at home. This will support children to become more familiar and comfortable with the toilet training process. Children will be given the opportunity to complete the toileting procedure, such as toileting, flushing the toilet, and washing and drying their hands, but will always be supervised and assisted if required.

During this milestone, children should be empowered and encouraged to be successful. Toilet training varies for individual children. As educators we can take advantage of the child being in a group and the many opportunities that provides for learning from each other. Educators and families need to remember that comparing children is inappropriate as there will always be individual differences and variables.

EDUCATORS WILL:

- request parents to supply a clean change of clothing for children who are toilet training
- assist the child to use the toilet
- assist the child to get dressed (and if required, change into dry clothes)

- encourage children, especially girls, to wipe front to back to reduce introducing bowel bacteria to the urinary tract
- encourage children to flush the toilet
- encourage and assist children to wash and dry their hands thoroughly as per *Handwashing Policy*

If the child has soiled or wet their clothes:

- place soiled clothes in a plastic bag or alternative and keep these in a designated area for parents to take home- rinse any wet and/or soiled clothes
- wash their own hands after helping children use the toilet
- wear disposable gloves, paper towel, disposable cloths, detergent and bleach if necessary when dealing with spills- such as urine, faeces or vomit

SOURCE

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

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Revised National Quality Standard. (2018).

The NSW Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Review of policy as part of annual cycle process • Minor edits in formatting • Sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JANUARY 2021	<ul style="list-style-type: none"> • additional related policies • additional information added to FDC service section re: parent communication • administration of medication forms required for application of nappy rash cream 	JANUARY 2022	

	<ul style="list-style-type: none"> • additional section for educators related to toilet training • inclusion of 'draft' Nappy change procedure as Appendix 1 	
JANUARY 2020	<ul style="list-style-type: none"> • Additional regulations and responsibilities added • Rewording of some content • Additional information added where relevant • Sources/references corrected and updated 	JANUARY 2021
JANUARY 2019	<ul style="list-style-type: none"> • Rearranged the order of points for better flow • Sources/references corrected, updated, and alphabetised. • Unnecessary/unrelated references deleted. 	JANUARY 2020
AUGUST 2018	New Policy Created for Family Day Care Service to support best practice	JANUARY 2019

Appendix 1 Nappy changing procedure

Preparation

29. Before changing a child's nappy, make sure you have everything you need within reach eg: disposable gloves, nappies, wipes, paper towel
30. Wash your hands with soap and water and dry thoroughly with paper towel
31. Place paper towel/sheet on nappy change mat
32. Put on disposable gloves on both hands

Changing

33. Lie child down on the change table
34. Always keep a hand on the child to prevent falling
35. Remove child's nappy and any other clothing with urine/faeces. (The child may urinate, so have a spare cloth handy).
36. Use the front of the nappy to wipe off any faeces
37. Use the tabs of the nappy to fold the nappy together in order to stop leakage and put in a hands-free lidded bin
38. Place any soiled clothes (including a cloth nappy) in a plastic bag
39. Using wipes, clean the child's bottom and genital area
40. Hold child's legs up with your fingers between the ankles and gently lift the child's bottom, wiping front to back
41. Remove the paper towel/mat and put in a hands-free lidded bin

42. Remove your gloves turning them inside out and dispose in the bin (Do not let your skin touch the outer contaminated gloves)
43. If nappy cream is required due to nappy rash, place on a new glove (check *Administration of Medication* form for authorisation)
44. Administer child's nappy cream using your gloved finger to apply generously
45. Dispose of glove
46. Open a clean nappy, with fastening tabs towards the top. Lift child's ankles and slip the nappy beneath their bottom
47. Fold the front flap up, tuck it firmly around baby's waist and secure each tab. Ensure not to make the nappy too tight.
48. Dress the child
49. Remove child from the change table
50. Wash your hands and the child's hands
51. Encourage the child to go and play with the other children

Cleaning

52. After each nappy change, clean the change table with detergent and warm water, rubbing with paper towel or a cloth, then rinse and dry
53. Dispose of paper towel
54. Wash and dry your hands thoroughly with soap and water
55. At the end of each day, thoroughly wash the nappy change mat and nappy change area with soap and water. Allow the change mat to dry, preferably in the sun.
56. Disinfect area with bleach solution in the event of spills (urine/faeces/vomit). Additional hygiene measures must be implemented to reduce spread of diseases such as gastroenteritis

IMPORTANT: Never leave a child unattended on a change table

2.26 INCIDENT, INJURY, TRAUMA & ILLNESS POLICY

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

We acknowledge that in Family Day Care Services, illness and disease can spread easily from one child to another, even when implementing the recommended hygiene and infection control practices. Our FDC Service aims to minimise illnesses by adhering to all recommended guidelines from relevant government authorities regarding the prevention of infectious diseases and adhere to exclusion periods recommended by public health units.

When groups of children play together and are in new surroundings accidents causing injuries and illnesses may occur. Our FDC Service is committed to effectively manage our physical environment to allow children to experience challenging situations whilst preventing serious injuries.

In the event of an incident, illness, injury or trauma, educators will implement the guidelines set out in this policy to adhere to National Law and Regulations and management will inform the regulatory authority as required.

Educator must complete incident/injury/trauma form even if incident happened at home and educator being notified or educator noticed just as an informative template and get signature from parents (NUR).

Educator needs to check with parents when, where and how its happened under parents care and document it properly and discuss with service coordinator/nominated supervisor and keep it in record(NUR).

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS

Sec.165	Offence to inadequately supervise children
Sec. 174(2)(a)	Prescribed information to be notified to Regulatory Authority
Sec.176(2)(a)	Time to notify certain information to Regulatory Authority
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
95	Procedure for administration of medication
97	Emergency and evacuation procedures
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
117	Glass
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
169	Additional policies and procedures-family day care service
170	Policies and procedures to be followed
171	Policies and procedures to be kept available

177	Prescribed enrolment and other documents to be kept by approved provider
183	Storage of records and other documents

RELATED POLICIES

Administration of First Aid Policy	Family Communication Policy
Administration of Medication Policy	Handwashing Policy
Anaphylaxis Management Policy	Health and Safety Policy
Asthma Management Policy	Immunisation Policy
Child Safe Environment Policy	Medical Conditions Policy
Control of Infectious Disease Policy	Privacy and Confidentiality Policy
COVID-19 Management Policy	Record Keeping and Retention Policy
Diabetes Management Policy	Road Safety Policy
Enrolment Policy	Safe Transportation Policy
Epilepsy Policy	Sick Children Policy
	Work, Health and Safety Policy

PURPOSE

The Family Day Care Service has a duty of care to respond to and manage illnesses, accidents, incidents, and trauma that may occur at the Service to ensure the safety and wellbeing of children, FDC educators, educator assistants, coordinators and visitors. This policy will guide educators to manage illness and prevent injury and the spread of infectious diseases and provide guidance of the required action to be taken in the event of an incident, injury, trauma or illness occurring when a child is educated and cared for.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Our Service requires FDC educators to implement risk management planning to identify any possible risks and hazards in their learning environments and practices. Where possible, FDC educators have eliminated or minimised these risks as is reasonably practicable by implementing risk management strategies and providing adequate supervision to ensure children are protected from harm or hazards. FDC educators will follow this policy and procedures to minimise the impact of incidents and injury to children.

In the event of a serious injury or accident, an ambulance will be called immediately, and the FDC educator will follow any instructions provided by emergency services. FDC educators will ensure parents are contacted as soon as practicable and the principal office of our service will also be contacted.

Our FDC Service will ensure we review and evaluate our policies and procedures and ensure that educators' physiological wellbeing is supported following any serious incident, injury or trauma.

The Approved Provider or Nominated Supervisor must be contactable by the FDC educator at all times education and care is provided.

Coronavirus (COVID-19)

We are committed to minimise the spread of infectious diseases such as coronavirus (COVID-19) by implementing recommendations provided by the [Australian Government- Department of Health and Safe Work Australia](#).

Our FDC Service ensures FDC educators implement procedures as stated in the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) developed by the Australian Government National Health and Medical Research Council as part of our day-to-day operation of the Service.

We are guided by explicit decisions regarding exclusion periods and notification of any infectious disease by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction under the Public Health Act.

Identifying signs and symptoms of illness

Family Day Care educators are not doctors and are unable to diagnose an illness or infectious disease. To ensure the symptoms are not infectious and to minimise the spread of an infection, medical advice is required to ensure a safe and healthy environment.

Recommendations from the [Australian Health Protection Principal Committee and Department of Health](#) will be adhered to minimise risk where reasonably practicable.

During a pandemic, such as COVID-19, risk mitigation measures may be implemented within each FDC service to manage the spread of the virus. These measures may include but are not limited to the following:

- adhering to Public Health Orders for mandated vaccination requirements for FDC educators, educator assistants and other staff
- mandatory COVID-19 vaccinations for all adults (18 and over) residing at the FDC residence (NSW)
- exclusion of children and visitors (symptoms may include fever, coughing, sore throat, fatigue or shortness of breath)
- notifying vulnerable people of the risks of the virus/illness including:
 - people with underlying medical needs
 - children with diagnosed asthma or compromised immune systems
 - Aboriginal and Torres Strait Islander people over the age of 50 with chronic medical conditions
- restrict the number of visitors entering FDC residences/venues
- requesting parents to drop off and collect children from designated points outside the FDC residence and not enter the home
- enhanced personal hygiene for FDC educators, children and parents (including frequent handwashing)
- full adherence to the NHMRC childcare cleaning guidelines and cleaning and disinfecting high touch surfaces at least twice daily, washing and laundering play items and toys
- avoid any situation when children are required to queue- using the bathroom for handwashing or toileting, waiting their turn to use a piece of equipment etc.
- ensuring cots, mats, cushions, highchairs are positioned at least 1 metre apart
- cancelling excursions to local parks, playgroups, public playgrounds and incursions during a pandemic
- recommending influenza vaccination for children, FDC educators and parents

Children who appear unwell at the FDC Service will be closely monitored and if any symptoms described below are noticed, or the child is not well enough to participate in normal activities, parents or an emergency contact person will be contacted to collect the child as soon as possible. A child who is displaying symptoms of a contagious illness (vomiting, diarrhoea) will be moved away from the rest of the group, where possible and supervised until he/she is collected by a parent or emergency contact person.

Symptoms indicating illness may include:

- behaviour that is unusual for the individual child
- high temperature or fevers

- loose bowels
- faeces that are grey, pale or contains blood
- vomiting
- discharge from the eye or ear
- skin that displays rashes, blisters, spots, crusty or weeping sores
- loss of appetite
- dark urine
- headaches
- stiff muscles or joint pain
- pain
- a stiff neck or sensitivity to light
- continuous scratching of scalp or skin
- difficulty in swallowing or complaining of a sore throat
- persistent, prolonged or severe coughing
- difficulty breathing

As per our Sick Children Policy we reserve the right to refuse a child into care if they:

- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature/fever, or vomiting in the last 24 hours
- have had diarrhoea in the last 48 hours
- have been given medication for a temperature prior to arriving at the FDC service
- have started a course of anti-biotics in the last 24 hours or
- have a contagious or infectious disease
- have been in close contact with someone who has a positive confirmed case of COVID-19

HIGH TEMPERATURES OR FEVERS

Children get fevers or temperatures for all kinds of reasons. Most fevers and the illnesses that cause them last only a few days. However sometimes a fever will last much longer and might be the sign of an underlying chronic or long-term illness or disease. Recognised authorities suggest a child's normal temperature will range between 36.0°C and 37.0°C, but this will often depend on the age of the child and the time of day.

Any child with a high fever or temperature reaching 38°C or higher will not be permitted to attend the FDC Service until 24 hours after the temperature/fever has subsided.

When a child develops a high temperature or fever at the FDC Service

- FDC educators will closely monitor the child focusing on how the child looks and behaves and be alert to the possibility of vomiting, coughing or convulsions
- For infants under 3 months old, parents will be notified immediately for any fever over 38°C for immediate medical assistance. If a parent is uncontactable, emergency contacts will be contacted. If family members are unable to be contacted and emergency medical assistance is required the FDC educator will follow the *Administration of First Aid Policy* and contact emergency services where required. If the parent cannot take the child to a GP immediately, permission will be required for the FDC educator to arrange for medical assistance
- FDC educators will notify parents when a child registers a temperature of 38°C or higher and requested to collect their child from care
- The child will need to be collected from the FDC service and will not be permitted back for a further 24 hours
- FDC educators will complete an *Incident, Injury, Trauma and Illness* record and note down any other symptoms that may have developed along with the temperature (for example, a rash, vomiting, etc.).
- Parents must sign and date this record and verify the information stated upon collection of their child
- A copy of this record must be provided to the Coordinator and Approved Provider(NUR)
- In the event of any child requiring ambulance transportation and medical intervention, a serious incident will be reported to the regulatory authority (Reg. 12) on behalf of the educator by the Approved Provider.

Methods to reduce a child's temperature or fever

- Encourage the child to drink plenty of water (small sips), unless there are reasons why the child is only allowed limited fluids
- Remove excessive clothing (shoes, socks, jumpers, pants etc.) FDC educators will be mindful of cultural beliefs.
- If requested by a parent or emergency contact person and written parental permission to administer paracetamol or ibuprofen has been provided and recorded in the child's enrolment form, the FDC educator or educator assistant may administer paracetamol or ibuprofen (Panadol or Nurofen) in an attempt to bring the temperature down. However, a parent or emergency contact person must still collect the child as soon as possible
- Before giving any medication to children, the medical history of the child must be checked for possible allergies
- The child's temperature, time, medication, dosage, and the educator's name will be recorded in the *Incident, Injury, Trauma and Illness Record*. Parents will be required to sign the *Administration of Medication Form* for the administration of Panadol or Nurofen when collecting the child.

DEALING WITH COLDS/FLU (RUNNY NOSE)

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

~~or be assessed/tested for COVID-19. If a child, educator, coordinator or any other visitor is tested for COVID-19, they are required to self isolate until they receive notification from the Public Health Unit of their test results.~~

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.

The FDC educator has the right to send children home if they appear unwell due to a cold or general illness. Children can become distressed and lethargic when unwell. Discharge coming from a child's nose and coughing can lead to germs spreading to other children, educators, toys, and equipment. Each individual case will be assessed prior to sending the child home.

DIARRHOEA AND VOMITING (GASTROENTERITIS)

Gastroenteritis (or 'gastro') is a general term for an illness of the digestive system. Typical symptoms include abdominal cramps, diarrhoea, and vomiting. In many cases, it does not need treatment, and

symptoms disappear in a few days. However, gastroenteritis can cause dehydration because of the large amount of fluid lost through vomiting and diarrhoea. Therefore, if a child does not receive enough fluids, he/she may require fluids intravenously.

If a child has diarrhoea and/or vomiting whilst at the FDC residence or venue, the educator will notify parents or an emergency contact to collect the child immediately. In the event of an outbreak of viral gastroenteritis, the FDC educator must inform their coordinator/nominated supervisor and they will contact the local public health unit **on 1300 066 055**.

Public Health Unit- Local state and territory health departments

The FDC educator and coordinator must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2-day period. (NSW Government- Health 2019)

Children that have had diarrhoea and/or vomiting will be asked to stay away from the FDC for **48 hours** after symptoms have ceased to reduce infection transmission as symptoms can reappear after 24 hours in many instances.

An *Incident, Injury, Trauma and Illness* record must be completed as per regulations. Notifications for serious illnesses must be lodged with the Regulatory Authority and Public Health Unit.

Infectious causes of gastroenteritis include:

- Viruses such as rotavirus, adenoviruses and norovirus.
- Bacteria such as Campylobacter, Salmonella and Shigella.
- Bacterial toxins such as staphylococcal toxins.
- Parasites such as Giardia and Cryptosporidium.

Non-infectious causes of gastroenteritis include:

- Medication such as antibiotics
- Chemical exposure such as zinc poisoning
- Introducing solid foods to a young child
- Anxiety or emotional stress

The exact cause of infectious diarrhoea can only be diagnosed by laboratory tests of faecal specimens. In mild, uncomplicated cases of diarrhoea, doctors do not routinely conduct faecal testing.

Children with diarrhoea who also vomit or refuse extra fluids should see a doctor. In severe cases, hospitalisation may be needed. The parent and doctor will need to know the details of the child's illness while the child was at the FDC residence receiving education and care.

Children, educators and any adults/visitors with diarrhoea and/or vomiting will be excluded until the diarrhoea and/or vomiting has stopped for at least **48 hours**.

Please note: If there is a gastroenteritis outbreak at the FDC service, children displaying the symptoms will be excluded until the diarrhoea and/or vomiting has stopped **and the family are able to get a medical clearance from their doctor**.

PREVENTING THE SPREAD OF ILLNESS

To reduce the transmission of infectious illness, our FDC Service will ensure FDC educators implement effective hygiene and infection control routines and procedures as per the *Australian Health Protection Principal Committee* guidelines.

If a child is unwell or displaying symptoms of a cold or flu virus, parents are requested to keep the child away from the FDC Service. Infectious illnesses can be spread quickly from one person to another usually through respiratory droplets or from a child or person touching their own mouth or nose and then touching an object or surface.

Prevention strategies

Practising effective hygiene helps to minimise the risk of cross infection within our FDC Service.

Signs and posters remind parents and visitors of the risks of infectious diseases, including COVID-19 and the measures necessary to stop the spread.

The FDC educator and/or educator assistant, model good hygiene practices and remind children to cough or sneeze into their elbow or use a disposable tissue and wash their hands with soap and water for at least 20 seconds after touching their mouth, eyes or nose.

Handwashing techniques are practised by the FDC educator, educator assistant and children routinely using soap and water before and after eating and when using the toilet and drying hands thoroughly with paper towel.

After wiping a child's nose with a tissue, the educator will dispose the tissue in a plastic-lined bin and wash their hands thoroughly with soap and water and dry using paper towel. (See *Handwashing Policy*).

All surfaces including bedding (pillows, mat, cushion) used by a child who is unwell, will be cleaned with soap and water and then disinfected.

Parents, families and visitors are requested to wash their hands upon arrival and departure or use an alcohol-based hand sanitizer. (Note: alcohol-based sanitizers must be kept out of reach of children and used only with adult supervision.)

PARENT/FAMILY NOTIFICATION- COVID-19

COVID-19

The Public Health Unit (PHU) will notify the Approved Provider of the Service in the event of a positive COVID-19 diagnosis of any child, educator, parent or visitor and conduct contact tracing.

Contact management for COVID-19 has changed due to the Omicron variant and testing and isolation in ECEC settings is no longer mandatory (although recommended).

Any person who tests positive to COVID-19 is required to notify the Service if they have been onsite 48 hours prior to symptom onset. The person who tests positive is required to self-isolate for at least 7 days.

The Approved Provider or nominated supervisor will submit a notification through the National Quality Agenda IT System (NQAITS) as soon as they are aware that a child, parent, contract worker or visitor has been onsite during their infectious period.

When a child or staff member tests positive for COVID-19 the Nominated Supervisor/responsible person will notify the Service community via letter (email/letter). The dates of attendance and the affected age group/room/program will be included. Families and staff will be required to monitor for symptoms and if symptomatic test using a RAT. If positive, they will be required to self-isolate for 7 days. Notification of a positive case is required to the Service.

Other Infectious Illness- (gastroenteritis, whooping cough etc.)

Parents will be notified of any outbreak of an infectious illness (e.g.: Gastroenteritis) within the FDC residence or venue verbally, via our notice board, online app or email to assist in reducing the spread of the illness.

Exclusion periods for illness and infectious diseases are provided to parents and families and included in our Family Handbook and *Sick Children Policy*.

INJURY, INCIDENT OR TRAUMA

In the event of any child, educator, volunteer or contractor having an accident at the FDC service, residence or venue, the FDC educator will:

- attend to the person immediately and administer first aid (see Procedures below)
- call for an ambulance immediately in the event of a serious injury or incident

- contact parents as soon as possible to notify them of the injury or incident and request them to collect their child from the service
- advise parents if an ambulance has been called
- if the parent is unable to be contacted, the educator will contact an emergency person as listed on the enrolment record
- contact the approved provider for support and assistance
- ensure supervision is provided to other children in care at the residence
- provide details for notification to the Regulatory Authority to the Approved Provider if the incident or injury is a notifiable incident
- complete an *Incident, Injury, Trauma and Illness record* and ensure parents have verified the information, signed and dated the record
- keep a copy of all records on file at the FDC residence
- provide any further documentation provide by the paramedics to the principal office
- ensure parents are notified as soon as practicable but no later than 24 hours after the occurrence (Regulation 86)
- ensure notification is submitted to the Regulatory Authority as required

The Nominated Supervisor or Coordinator may be requested to assist with contacting parents or emergency contacts if the educator is administering first aid and cannot leave the child to make any phone calls

If the incident occurs outside normal office hours, an after-hours emergency phone number must be used and/or a message left at the main switchboard of the FDC Service principal office.

The Approved Provider must have up to date emergency phone numbers for all children enrolled in the Service.

[The Approved Provider will provide guidance to FDC educators about the reporting requirements needed to be completed in the event of an incident, illness, injury or trauma as per the regulations and the requirements to notify parents and obtain their signature on the report.](#)

[The Approved Provider is responsible for monitoring, maintaining and storing all legislative and required records confidentially and securely until the child is 25 years of age- as per regulations.](#)

[Following any serious incident, injury or trauma, the Approved Provider and Coordinator will review and evaluate policies and procedures with educators to ensure these were followed and to make any necessary adjustments.](#)

[Opportunities will be provided for the FDC educator to de-brief about any incident or injury, seek professional assistance such as counselling.](#)

Definition of serious incident

Regulations require the Approved Provider or Nominated Supervisor to notify Regulatory Authorities **within 24 hours of any serious incident at the FDC Service** through the [NQA IT System](#).

- a) The death of a child:
 - (i) while being educated and cared for by an Education and Care Service or
 - (ii) following an incident while being educated and cared for by an Education and Care Service.
- (b) Any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Education and Care Service, which:
 - (i) a reasonable person would consider required urgent medical attention from a registered medical practitioner or
 - (ii) for which the child attended, or ought reasonably to have attended, a hospital. For example: whooping cough, broken limb and anaphylaxis reaction
- (c) Any incident or emergency where the attendance of emergency services at the Education and Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)
- (d) Any circumstance where a child being educated and cared for by an Education and Care Service
 - (i) Appears to be missing or cannot be accounted for or
 - (ii) Appears to have been taken or removed from the Education and Care Service premises in a manner that contravenes these regulations or
 - (iii) Is mistakenly locked in or locked out of the Education and Care Service premises or any part of the premises.

A serious incident should be documented in an *Incident, Injury, Trauma and Illness* record as soon as possible and within 24 hours of the incident, with any evidence attached.

Missing or unaccounted for child

At all times, reasonable precautions and adequate supervision is provided to ensure children are protected from harm or hazards. However, if a child appears to be missing or unaccounted for, removed from the FDC residence or venue premises that breaches the National Regulations or is mistakenly locked in or locked out of any part of the service, a serious incident notification must be made to the Regulatory Authority.

A child may only leave the Family Day Care Service in the care of a parent, an authorised nominee named in the child's enrolment record or a person authorised by a parent or authorised nominee or because the child requires medical, hospital or ambulance care or other emergency.

Family Day Care educators ensure that

- the attendance record is regularly cross-checked to ensure all children signed into the FDC service are accounted for
- children are supervised at all times
- visitors to the service are not left alone with children at any time
- a headcount of children is conducted as the visitor leaves the residence

Should an incident occur where a child is missing from the Family Day Care service, the educator will:

- attempt to locate the child immediately by conducting a thorough search of the residence and premise (checking any areas that a child could be locked into by accident)
- cross check the attendance record to ensure the child hasn't been collected by an authorised person and signed out by another person – e.g.: educator assistant or coordinator
- if the child is not located within a 10-minute period, the educator will notify emergency services and notify the parent/s or guardian and the Approved Provider of the Family Day Care Service
- continue to search for the missing child until emergency services arrive whilst providing supervision for other children in care
- provide information to Police such as: child's name, age, appearance, (provide a photograph), details of where the child was last sighted.

The Approved Provider is responsible for notifying the Regulatory Authority of a serious incident within 24 hours of the incident occurring.

Incident, Injury, Trauma and Illness record

An *Incident, Injury, Trauma and Illness* record contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for at the service. The record will include:

- name and age of the child
- circumstances leading to the incident, injury, illness
- time and date the incident occurred, the injury was received, or the child was subjected to trauma
- details of any illness which becomes apparent while the child is being cared for including any symptoms, time and date of the onset of the illness
- details of the action taken by the educator including any medication administered, first aid provided or medical professionals contacted
- details of any person who witnessed the incident, injury or trauma
- names of any person the educator notified or attempted to notify, and the time and date of this

- signature of the person making the entry, and the time and date the record was made

Family Day Care educators are required to complete documentation of any incident, injury or trauma that occurs when a child is being educated and cared for by the service. This includes recording incidences of biting, scratching, dental or mouth injury. Due to Confidentiality and Privacy laws, only the name of the child injured will be recorded on the Incident, Injury, Trauma or Illness Record. Any other child/ren involved in the incident will not have their names recorded. If other children are injured or hurt, separate records will be completed for each child involved in the incident. Parents/Authorised Nominee must acknowledge the details contained in the record, sign and date the record on arrival to collect their child.

Head Injuries

All head injuries will be considered as serious and should be assessed by a doctor or the nearest hospital. In the event of a head injury, the FDC educator will assess the child, administer any urgent First Aid and either contact the child's parents/guardian to request the child to be collected from the service, or if the child is unconscious or the head injury is causing excessive bleeding, immediately call for an ambulance. The FDC educator must contact the principal office of the Family Day Care service at the time of the incident and also after the child has been collected or transferred to hospital.

An *Incident, Injury, Trauma and Illness* record must be completed and signed by the parent. The approved provider will notify the regulatory authority on behalf of the Family Day Care educator.

(See Head Injury Guide and Procedure)

Trauma

Trauma is defined as the impact of an event or a series of events during which a child feels helpless and pushed beyond their ability to cope. There are a range of different events that might be traumatic to a child, including accidents, injuries, serious illness, natural disasters (bush fires), assault, and threats of violence, domestic violence, neglect or abuse and war or terrorist attacks. Parental or cultural trauma can also have a traumatising effect on children. This definition firmly places trauma into a developmental context:

"Trauma changes the way children understand their world, the people in it and where they belong"

(Australian Childhood Foundation, 2010).

COVID-19 has led to higher amounts of traumatic experiences and adversity in households leading many educators to look at trauma-informed practices to help support children.

Trauma can disrupt the relationships a child has with their parents, educators and staff who care for them. It can transform children's language skills, physical and social development and the ability to manage their emotions and behaviour.

Behavioural response in babies and toddlers who have experienced trauma may include:

- Avoidance of eye contact
- Loss of physical skills such as rolling over, sitting, crawling, and walking
- Fear of going to sleep, especially when alone
- Nightmares
- Loss of appetite
- Making very few sounds
- Increased crying and general distress
- Unusual aggression
- Constantly on the move with no quiet times
- Sensitivity to noises.

Behavioural responses for pre-school aged children who have experiences trauma may include:

- new or increased clingy behaviour such as constantly following a parent, carer around
- anxiety when separated from parents or carers
- new problems with skills like sleeping, eating, going to the toilet and paying attention
- shutting down and withdrawing from everyday experiences
- difficulties enjoying activities
- being jumpier or easily frightened
- physical complaints with no known cause such as stomach pains and headaches
- blaming themselves and thinking the trauma was their fault.

Children who have experienced traumatic events often need help to adjust to the way they are feeling. When parents, educators and staff take the time to listen, talk, and play they may find children begin to say or show how they are feeling. Providing children with time and space lets them know you are available and care about them.

It is important for educators to be patient when dealing with a child who has experienced a traumatic event. It may take time to understand how to respond to a child's needs and new behaviours before parents, educators and staff are able to work out the best ways to support a child. It is imperative to realise that a child's behaviour may be a response to the traumatic event rather than just 'naughty' or 'difficult' behaviour.

Educators can assist children dealing with trauma by implementing trauma-informed practice including:

- getting children to identify their emotions
- debriefing with children after any incident, illness or trauma to support their understandings of the events
- providing opportunities for children to voice their feelings, ask questions and talk
- supporting children to regulate their emotions and build positive relationships
- observing the behaviours and expressed feelings of a child and documenting responses that were most helpful in these situations
- creating a 'relaxation' space with familiar and comforting toys and objects children can use when they are having a difficult time
- having quiet time such as reading a story about feelings together
- trying different types of play that focus on expressing feelings (e.g., drawing, playing with play dough, dress-ups and physical games such as trampolines)
- helping children understand their feelings by using reflecting statements (e.g., 'you look sad/angry right now, I wonder if you need some help?').

There are a number of ways for parents, educators to reduce their own stress and maintain awareness, so they continue to be effective when offering support to children who have experienced traumatic events.

Strategies to assist families and educators to cope with children's stress or trauma may include:

- taking time to calm yourself when you have a strong emotional response. This may mean walking away from a situation for a few minutes or handing over to another educator or staff member if possible.
- planning ahead with a range of possibilities in case difficult situations occur.
- remembering to find ways to look after yourself, even if it is hard to find time or you feel other things are more important. Taking time out helps adults be more available to children when they need support.
- using supports available to you within your relationships (e.g., family, friends, colleagues).
- identifying a supportive person to talk to about your experiences. This might be your family doctor or another health professional.
- accessing support resources- BeYou, Emerging Minds, Kids Help Line

Living or working with traumatised children can be demanding so it is important to be aware of your own responses and seek support from management when required.

An *Incident, Injury, Trauma and Illness record* must be completed detailing the trauma the child was subjected to, the time and date and circumstances as per Regulation 87.

THE APPROVED PROVIDER AND FDC EDUCATORS WILL ENSURE:

- FDC policies and procedures are adhered to at all times
- each child's enrolment records include authorisations by a parent or person named in the record for the approved provider, nominated supervisor or educator to seek medical treatment for the child from a registered medical practitioner, hospital or ambulance service and if required, transportation by an ambulance service
- accurate attendance records are kept at all times
- parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, incident, injury or trauma occurring at a family day care residence or whilst in the care of an educator
- parents are advised to keep their child at home until they are feeling well, and they have not had any symptoms for at least 24-48 hours
- an *Incident, Injury, Trauma and Illness record* is completed accurately and in a timely manner as soon after the event as possible (within 24 hours)
- FDC educators and educator assistants hold current First aid qualifications, emergency anaphylaxis and asthma management training
- first aid kits are suitably equipped and checked on **a monthly basis** (see *First Aid Kit Checklist*).
- first aid kits are easily accessible when children are present at the FDC residence and during excursions
- CPR charts are displayed in a prominent position in the indoor and outdoor environment
- adults or children who are ill are excluded for the appropriate period
- FDC educators or educator assistants who have diarrhoea, or an infectious disease do not prepare food for others
- cold food is kept cold (below 5 °C) and hot food, hot (above 60°C) to discourage the growth of bacteria
- if the incident, situation or event presents imminent or severe risk to the health, safety and wellbeing of any person present at the FDC service or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident
- parents are notified of any infectious diseases circulating the FDC service within 24 hours of detection
- children are excluded from the FDC service if the educator feels the child is too unwell to attend or is a risk to other children.
- educators, coordinators, visitors and children always practice appropriate hand hygiene and cough and sneezing etiquette

- appropriate cleaning practices are followed
- toys and equipment are cleaned and disinfected on a regular basis which is recorded in the toy cleaning register or immediately if a child who is unwell has mouthed or used these toys or resources
- additional cleaning will be implemented during any outbreak of an infectious illness or virus
- all illnesses are documented in the FDC *Incident, Injury, Trauma and Illness Record*
- support, advice and tools will be provided to assist educators manage their mental health following any traumatic event/experience.

FAMILIES WILL:

- provide authorisation in the child's enrolment record for the approved provider, nominated supervisor or educator to seek medical treatment from a medical practitioner, hospital or ambulance service and if required, transportation by ambulance service
- provide up to date medical and contact information in case of an emergency
- provide emergency contact details and ensure details are kept up to date
- provide the FDC Service with all relevant medical information, including Medicare and private health insurance
- provide a copy of their child's Medical Management Plans, Action Plans and update annually or whenever medication/medical needs change
- adhere to recommended periods of exclusion if their child has a virus or infectious illness
- complete documentation as requested by the FDC Educator and/or approved provider- *Incident, Injury, Trauma and Illness record* and acknowledge that they were made aware of the incident
- inform the FDC Service if their child has an infectious disease or illness
- provide evidence as required from doctors or specialists that the child is fit to return to care if required
- provide written consent for the FDC educator to administer first aid and call an ambulance if required (as per enrolment record).

RESOURCES

[beyou Bushfire resource](#)

[Gastro Pack NSW Health](#)

[Emerging Minds Community Trauma Toolkit](#)

[Fever in children- \(health direct.gov.au\)](#)

Staying Healthy: Preventing infectious diseases in early childhood education and care services

[Recommended exclusion periods- Poster](#)

[Stopping the spread of childhood infections \(NSW Health\)](#)

[Minimum periods for exclusion from childcare services \(Victoria\)](#)

SOURCE

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- Health Direct <https://www.healthdirect.gov.au/>
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- NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>
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- Raising Children Network: <https://raisingchildren.net.au/guides/a-z-health-reference/fever>
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REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> updated information re: COVID-19 updated Parent/Family notification for positive COVID-19 broken links repaired in sources 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA Incident, Injury, Trauma and Illness (June 2021) Additional legislative requirements added Additional related policies 		MARCH 2022
MARCH 2021	<ul style="list-style-type: none"> minor edits to policy currency of links/sources checked additional Gastro resource 		MARCH 2022

SEPTEMBER 2020	<ul style="list-style-type: none"> • modifications to align with temperature recommendations from Department of Health (37.5°C) • inclusion of table from Victoria Health to guide temperature testing • Risk management strategies to be implemented by FDC educators • Additional section- Incident, Injury, Trauma and Illness records, Missing or Unaccounted for child, Head Injuries • Procedures for FDC educators to follow in event of incident, injury, illness or trauma • additions to <i>Families will</i> section 	MARCH 2021
JUNE 2020	<ul style="list-style-type: none"> • inclusion of COVID-19 risk mitigation strategies • information about COVID-19 included in policy • Public Health Unit information added • additional information related to COVID-19 symptoms added to 'dealing with cold and flu' section • references included to Sick Children and Hand Washing Policy • additional resources and sources added 	MARCH 2021
MARCH 2020	<ul style="list-style-type: none"> • Preventing the spread of illness section added • additional information about fevers and temperatures added • section regarding sponging children to reduce fever deleted (Sydney Children's Hospital recommendation) • additional information for trauma added • sources checked for currency/additional sources added 	MARCH 2021
MARCH 2019	<ul style="list-style-type: none"> • Points in this section re-worded and order of points re-organised for better flow. • Correct references sourced and added to 'sources' • Additional information added to points. • Sources checked for currency. • Sources/references corrected, updated, and alphabetised. 	MARCH 2020
MAY 2019	<ul style="list-style-type: none"> • Exclusion period for gastroenteritis has been changed to assist in minimising the spread of infection 	MARCH 2019
MARCH 2018	<ul style="list-style-type: none"> • Minor, non-critical changes made to the policy in respect of a child's exclusion depending on the illness. Plus some grammatical improvements 	MARCH 2019

DECEMBER 2017	<ul style="list-style-type: none"> Updated the references to comply with the revised National Quality Standards 	MARCH 2018
MAY 2017	<ul style="list-style-type: none"> Modifications made to adhere to Family Day Care Service 	TBA

2.26.1 PROCEDURE IN THE EVENT OF AN INCIDENT, ILLNESS, INJURY OR TRAUMA

If an incident or injury occurs whilst a child is under the care of a FDC educator, the educator will administer First Aid and seek hospital transportation and treatment if required. In the event of a child being subjected to trauma, educators will support children following advice from other professional bodies such as Emerging Minds & BeYou.

Emergency Response Procedures

Follow instructions as per the child's ASCIA Action Plans for children who are known to have asthma or allergies including anaphylaxis

- Administer adrenaline autoinjector or reliever inhaler medication (Ventolin) as instructed
- Contact an ambulance **immediately** for any incident involving anaphylaxis
- Contact an ambulance **immediately** for asthma emergencies if the child cannot breathe normally after following their Action Plan for asthma and receiving reliever inhaler medication or if their breathing become worse.

2.26.2 Head Injuries

All head injuries will be considered as serious and should be assessed by a doctor or the nearest hospital. The child must be closely observed until the parent or guardian collects the child from the educator- or they are transferred to hospital.

- if the child has suffered a head injury and is unconscious, they should not be moved unless there is immediate danger
 - Call for an Ambulance immediately
 - Monitor the airway and breathing until the arrival of an ambulance

- If breathing stops or they have no pulse, begin CPR immediately

2.26.3 Incident or injury management

The educator will:

- ensure the safety of themselves and others- DRSABCD (Danger, Response, Send for Help, Airway, Breathing, CPR, Defibrillation)
- attend to the child immediately
- if the illness or incident involves asthma or anaphylaxis, refer to the child's Medical Management Plan or Action Plan
- administer First Aid procedures
- assess whether further medical attention is required (hospital or other medical assistance)
- call for help- Contact an ambulance and stay with the child
- contact the parent/s or nominated authorised person on the child's enrolment form to inform them an ambulance has been called and request them to either:
 - come immediately to educator's residence or place of incident/injury or
 - meet the ambulance at the hospital
- immediately arrange for assistance (contact approved provider to request assistance) to care for children in care whilst you travel with an injured/ill child in an ambulance
- if unable to provide supervision for attending children, sign injured child into paramedic's care to be met at the hospital by the parent or authorised nominee or approved provider
- remain with the child until the ambulance arrives
- reassure the child and other children
- ensure any medical conditions/history is readily available (eg: Emergency Action Plan for Asthma or Anaphylaxis)
- Action Plans should provide guidance of First Aid responses in an emergency as provided by the child's doctor and authorised by the child's parents

Calling an ambulance

Do not hesitate to contact an ambulance if you think emergency services are required.

If a child displays any of the following symptoms or suffers any of the following call 000:

- the child has experienced unconsciousness or an altered state of unconsciousness
- is experiencing difficulty breathing for any reason

- has difficulty breathing and has not responded to reliever inhaler medication (even if they are not diagnosed with Asthma)
- is showing signs of shock
- is experiencing severe bleeding, or is vomiting blood
- has an injury to their head, neck or back
- could have broken bones
- has an extremely high temperature, with or without a rash
- has a temperature above 38°C for an infant under 3 months old

Dial 000 and be prepared to answer the following:

- the address of where the ambulance is required and the closest cross street
- what the problem is
- how many people are injured
- the child/person's age
- the child/person's gender
- if the child/person is conscious and
- if the child/person is breathing

2.27 SICK CHILDREN POLICY

Children come into contact with many other children and adults in the Family Day Care environment increasing their exposure to others who may be sick or carrying an infectious illness. The National Quality Standard requires early childhood education and care services, including Family Day Care Services, to implement specific strategies to minimise the spread of infectious illness and maintain a healthy environment for all children, educators and families. We acknowledge the difficulty of keeping children at home or away from childcare when they are sick and the pressures this causes for parents, however our Service aims to minimise the transmission of infectious diseases by adhering to regulations and policies protecting the health of all children, staff, families and visitors.

Parents must disclose the sickness and cause of sickness of the child. They will not hide the actual cause of sickness and will provide medication in the original container with child name/D.O. B Prescribed on the bottle (NUR)

If parent hide the actual cause of the sickness the enrolment may be terminated on the same day (NUR)

Educator must have to take up -to -date immunisation record from the parents and request parents to always provide IHS of their children once due vaccination is done to keep up-to-date record and prevent spread of any infectious disease (NUR).

National Quality Standard (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
90	Medical conditions policy
92	Medication record
93	Administration of medication
96	Self-administration of medication
168	Education and care service must have policies and procedures
175(2)(c)	Prescribed information to be notified to Regulatory Authority- any circumstance arising at the service that poses a risk to the health, safety or wellbeing of a child or children attending the service

RELATED POLICIES

Administration of First Aid Policy	Handwashing Policy
Administration of Medication Policy	Immunisation Policy
Control of Infectious Diseases	Incident, Injury, Trauma and Illness Policy
Coronavirus COVID-19 Management Policy	Medical Conditions Policy
Enrolment Policy	Pregnancy in Early Childhood Policy

PURPOSE

We aim to maintain the health and wellbeing of all children, staff and their families, ensuring a healthy environment and minimising cross contamination and the spread of infectious illnesses by implementing best practice and high standards of personal hygiene within all our approved Family Day Care residences and/or venues.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Our FDC Service has adopted the *Staying healthy: Preventing infectious diseases in early childhood education and care services*) publication recommendations, developed by the Australian Government National Health and Medical Research Council to guide our practices to help limit the spread of illness and disease. We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the Family Day Care Service and at home.

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

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

- Control of Infectious Diseases Policy
- Immunisation Policy
- Incident, Injury, Trauma and Illness Policy
- Medical Conditions Policy and
- Handwashing Policy

Staying Healthy: Preventing infectious diseases in early childhood education and care services (2013) explains how infections are spread as 'The Chain of Infection'.

There are three steps in the chain:

- The germ has a source
- The germ spreads from the source
- The germ infects another person

The chain of infection can be broken at any stage to help prevent and control the spread of diseases

The germ has a source

Germs can be picked up directly from an infected person or from the environment. It is important to understand that an infected person may not show any signs or symptoms of illness.

The germ spreads from the source

Germs can spread in several ways, including through the air by droplets, through contact with faeces and then contact with mouths, through direct contact with skin, and through contact with other body secretions (such as urine, saliva, discharges or blood).

Some germs can spread directly from person to person; others can spread from the infected person to the environment. Many germs can survive on hands, and on objects such as toys, door handles and bench tops. The length of time a germ can survive on a surface (including the skin) depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing hands and surfaces regularly with detergent and water is a very effective way of removing germs and preventing them spreading through the environment.

(Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*. 5th Edition, 2013 p: 7)

The germ infects another person

When the germ has reached the next person, it may enter the body through the mouth, respiratory tract, eyes, genitals, or broken or abraded skin. Whether a person becomes ill after the germ has entered the body depends on both the germ and the person's immunity. Illness can be prevented at this stage by stopping the germ from entering the body (for example, by making sure that all toys that children put in their mouths are clean, by washing children's hands, by covering wounds), and by prior immunisation against the germ.

MINIMISING THE SPREAD OF INFECTIONS AND DISEASES IN EARLY EDUCATION AND CARE SERVICES

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can contribute to negative attitudes in the workplace which can cause stress on families. Families may also experience guilt when they send their child to care who is not well.

However, it is imperative that families maintain a focus not only on the well-being of their own child but also upon the well-being of other children and our FDC educators engaged by the [enter name of Family Day Care Service]

To protect the health of children and educators it is important that children and educators/educator assistants who are ill are kept away from the Family Day Care Service for the recommended period.

At times, an outbreak of a new or 'novel' virus or infection, such as COVID-19, may require exclusion from the FDC Service that is not specified in general exclusion periods for common infectious illnesses. Information, education and recommendations regarding any 'novel' virus will be provided by the Australian Government Department of Health and/or local public health unit.
(see **Excluding Children from the Service** section)

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

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

Our FDC educators are not medical practitioners and are not able to diagnose whether a child has an infectious illness. However, if an infectious illness is suspected, our FDC educators may ask the family to collect their child from care as soon as possible or return when they are well enough to participate in the programmed activities and experiences.

Management and FDC educators *may* request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to Family Day Care. **Please note it**

is not always possible to obtain a doctor's certificate or clearance for suspected cases of an illness. The decision to approve a child's return is up to the Approved Provider/Nominated supervisor

To help minimise the spread of illness and infectious diseases our FDC Service requests FDC educators to implement rigorous hygiene and infection control procedures and cleaning routines including:

- mandatory vaccinations for COVID-19 for all educators, staff and household members over the age of 18 [check your state/territory for mandated vaccination requirements]
- effective hand washing hygiene
- cough and sneeze etiquette
- appropriate use of protective gloves
- exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- effective cleaning of the environment, toys and resources (including bedding)
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the FDC Service, approved residence or venue
- physical distancing (when recommended by Australian Health Protection Principal Committee [AHPPC] and/or Safe Work Australia)
- wearing of masks when mandated by Public Health Order
- maximising ventilation to increase air flow in learning spaces.

CHILDREN ARRIVING AT THE FAMILY DAY CARE SERVICE WHO ARE UNWELL

FDC educators will not accept a child into their residence or approved venue if they:

- have a contagious illness or infectious disease
- are a household contact (close contact) of a person with COVID-19
- have been in close contact with someone who has a positive confirmed case of COVID-19
- have a temperature above 37.5°C when assessed prior to entry to the service (effective during a pandemic or outbreak of an infectious disease)
- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature, vomiting in the last 24 hours
- have had diarrhoea in the last 48 hours
- have started a course of anti-biotics in the last 24 hours
- have been given medication for a temperature prior to arriving at the FDC Service (eg: Panadol)
- full child health assessment would be done by the parents before dropping the child off to the day-care. Child can't attend the day-care if parents gave Panadol to control the temperature prior to arriving at the FDC (NUR).

CHILDREN WHO BECOME ILL AT THE FAMILY DAY CARE SERVICE

Children may become unwell throughout the day, in which case will respond to children's individual symptoms of illness and provide immediate comfort and care.

- FDC educators will closely monitor and document the child's symptoms on the *Incident, Injury, Trauma and Illness Record*
- Children who are unwell at the FDC Service residence or venue will be able to rest in a supervised area away from other children (where available) until parents or the emergency contact person is able to collect them
- A child who has passed runny stools/vomited whilst at the Family Day Care Service will be sent home and may only return once a certificate from a General Practitioner has been produced
- FDC educators will take the child's temperature. If the child's temperature is 38°C or higher, the FDC educator will contact the child's parents/guardian/emergency contacts as soon as possible to have the child collected (within 30 minutes).
- For infants under three months old with a temperature/fever over 38°C parents will be immediately notified and requested to seek medical assistance. If the parent cannot take the child to a GP immediately, permission will be required for the FDC Service to seek medical assistance urgently.
- FDC educators will monitor the child closely and be alerted to vomiting, coughing or convulsions
- FDC educators will check that written parental permission to administer paracetamol or ibuprofen has been provided during enrolment and filed in the child's individual record
- FDC educators will check the medical history of the child to ensure there are no allergies before administering Panadol or Nurofen
- Accurate records will be kept of the child's temperature, time taken, medication administered, dosage, FDC educator's full name and name of FDC educator assistant who witnessed the administration of medication (if relevant)
- FDC educators will attempt to lower the child's temperature by:
 - removing excessive clothing (shoes, socks, jumpers etc).
 - encouraging the child to take small sips of water
- FDC educators will continue to document any progressing symptoms
- FDC educators will complete the *Incident, Injury, Trauma or Illness Record* ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact
- FDC educators will thoroughly clean and disinfect any toys, resources or equipment that may be contaminated by a sick child.

Common colds and flu

The common cold (viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in childcare, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature.

In circumstances where a child appears to have cold or flu symptoms, management will determine if the child is well enough to continue at the Family Day Care Service or if the child requires parental care. **As cold and flu symptoms are very similar to COVID-19, children with these symptoms may be required to obtain a RAT or PCR test.**

Our Family Day Care Service aims to support the family's need for childcare however, families should understand that a child who is unwell will need one-on-one attention which places additional pressure on the FDC educator and the needs of other children.

Children who are generally healthy, will recover from a common cold in a few days. Keeping a child home and away from childcare, helps to prevent the spread of germs.

Influenza is a highly contagious illness and can spread to others for 24 hours before symptoms start. To prevent the spread of influenza our service encourages staff and children to be vaccinated once a year.

Reporting Outbreaks to the Public Health Unit

Management is required to notify the local [Public Health Unit](#) (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the Family Day Care Service is suffering from one of the following vaccine preventable diseases or outbreak of gastroenteritis.

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

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak such as coronavirus- COVID-19.

Excluding children from the Family Day Care Service

When a child has been diagnosed with an illness or infectious disease, the Family Day Care Service will refer to *Staying healthy: Preventing infectious diseases in early childhood education and care services* to establish the recommended exclusion period.

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

[Minimum periods for exclusion from childcare services \(Victoria\)](#)

[Minimum periods of exclusion may be different in each state or territory. Check your own jurisdiction and include a link for parents to access.]

- When an infectious disease has been diagnosed, will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and the exclusion period to be displayed at the approved residence or venue. (This information can be obtained from *Staying healthy: Preventing infectious diseases in early childhood education and care*.)
- If a vaccine preventable disease occurs at a FDC residence or venue, children who have not been fully immunised will be excluded from care.
- Management will check all children's Immunisation records and alert parents as required.
- A medical clearance from the child's General Practitioner stating that the child is cleared to return to the childcare setting will also be required before the child returns to care.
- Children that have had diarrhoea and vomiting will be asked to stay away from the Family Day Care Service for 48 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances.
- Children who test positive to COVID-19 are required to self-isolate for at least 7 days and not return to the FDC service until they receive a negative RAT or PCR test. [some state/territories will require evidence of the negative RAT or PCR result to return to the service.]
- have a suspected case of COVID-19 and meet the criteria for testing (fever, cough, sore throat, shortness of breath) are required to contact their GP or COVID-19 testing clinic. Exclusion periods will apply if they have a confirmed case.
- Children who have COVID-19 symptoms (fever, cough, sore throat, shortness of breath) are requested to self-test using a rapid antigen test RAT. Exclusion periods will apply if they have a confirmed case.

Notifying families and Emergency Contact

- It is a requirement of [enter name of Family Day Care Service] that all emergency contacts can pick up an ill child within a 30-minute timeframe.
- In the event that the ill child is not collected in a timely manner or should parents refuse to collect the child a warning letter will be sent to the families outlining the Family Day Care Service policies and requirements. The letter of warning will specify that if there is a future breach of this nature, the child's position may be terminated.

MANAGEMENT AND FDC EDUCATORS WILL ENSURE

- effective hygiene policies and procedures are adhered to at all times to prevent the spread of illnesses
- they promote effective hand hygiene and cough etiquette
- effective environmental cleaning policies and procedures are adhered to all times
- all families are provided access to relevant policies upon enrolment which will be explained by management including: *Control of Infectious Diseases Policy, Sick Children Policy, Incident, Injury, Trauma and Illness Policy, Handwashing Policy and Medical Conditions Policy.*
- families are provided with relevant information from a trusted source about preventing the spread of illnesses
- that any child who registers a temperature of 38°C or above is collected from the Family Day Care Service and excluded for 24 hours since the last elevated temperature or until the FDC Service receives a doctor's clearance letter stating that the child is cleared of any infection and able to return to childcare
- a child who has not been immunised will be excluded from the FDC Service if an infectious disease is reported within the service community and that child is deemed to be in danger of contracting the illness. Please refer to our *Control of Infectious Diseases Policy*
- families of a child with complex and chronic medical conditions will be notified in the event of an outbreak of an illness or infectious disease that could compromise their health
- families are notified to pick up their child if they have vomited or had diarrhoea whilst at an approved FDC residence or venue.

THE APPROVED PROVIDER OR NOMINATED SUPERVISOR WILL ENSURE

- notification is made to the Regulatory Authorities within 24 hours of any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Education and Care Service, which:

(i) a reasonable person would consider required urgent medical attention from a registered medical practitioner or

(ii) for which the child attended, or ought reasonably to have attended, a hospital. For example: whooping cough, broken limb and anaphylaxis reaction

- any incident or emergency where the attendance of emergency services at the Education and Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)
- Parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring.
- notification is made to the Regulatory Authority through NQAITS within 7 days of any confirmed cases of COVID-19 [Check your state/territory requirements for notification of COVID-19]
- notification is made to the Public Health Unit on 1800 020 080 of any confirmed cases of COVID-19

PARENT/FAMILY RESPONSIBILITY

In order to prevent the spread of disease, families are required to monitor their child's health and not allow them to attend the FDC Service if they have an infectious illness or display symptoms of an illness.

Families are asked to obtain a RAT test if their child is symptomatic for COVID-19.

For children who have ongoing medical needs such as asthma or anaphylaxis, parents should regularly review their child's health care action plans to ensure the FDC educator is able to manage their individual needs as required.

Families should implement effective hygiene routines at home such as regular handwashing and sneeze and cough routines (use of tissues, covering their mouth with coughing, sneezing into a tissue or elbow).

Families should notify the FDC Service/ FDC educator if their child has been unwell in the past 24 hours or someone in the family is/has been sick. This is particularly critical during a pandemic such as COVID-19.

Signs of illness in young children may include:

- runny, green nasal discharge
- high temperature
- diarrhoea
- red, swollen or discharging eyes (bacterial conjunctivitis)
- vomiting
- rashes (red/purple)

- irritability, unusually tired or lethargic
- drowsiness
- poor circulation
- poor feeding
- poor urine output
- a stiff neck or sensitivity to light
- pain
- mouth sores that cause drooling
- impetigo

Parents should seek medical attention should your child (or other family members) develop symptoms such as:

- high fever
- uncontrolled coughing or breathing difficulties

Families are required to keep up to date with their child's immunisation, providing a copy of the updated AIR Immunisation History Statement to management at **[enter name of Family Day Care Service]** following each immunisation on the National Immunisation Schedule.

RETURNING TO CARE AFTER SURGERY

Children who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate and safe to return to childcare.

A medical clearance statement will be required to ensure the child is fit and able to return to the FDC Service and participate in daily activities.

Posters/Resources

Posters for Temperature Screening

~~Poster for service entrance (pdf – 42.94kb)~~

~~Poster for staff (pdf – 79.86kb)~~

~~Poster for families (pdf – 54.42kb)~~

NSW Health. COVID-19 symptoms and testing. (reference re: fever and temperature)

<https://www.health.nsw.gov.au/Infectious/covid-19/Pages/posters-and-print.aspx#symptoms>

[NSW Health Gastro Pack NSW Health](#)

Queensland Government Time Out Brochure [Why do I need to keep my child at home?](#)

SOURCE

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 National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.
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 The Sydney Children’s Hospitals network (2020). <https://www.schn.health.nsw.gov.au/fact-sheets/fever>
[Safe Work Australia](#)
[Victoria Department of Education and Training \(2020\)](#).
<https://www.coronavirus.vic.gov.au/early-childhood-education-and-care>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Policy reviewed as per annual review cycle • Reference to temperature checks for COVID-19 removed • Exclusion of household close contacts COVID-19 added • Notification of COVID-19 to regulatory authority amended • Request for families to undertake RAT self-test if child is symptomatic for COVID-19 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
MARCH 2021	<ul style="list-style-type: none"> • policy revised as part of 2021 review schedule • additional regulations added • additional resources added • terminology to reflect FDC educators at approved residence/venue added 	MARCH 2022	

	<ul style="list-style-type: none"> sources checked- minor edits 	
JULY 2020	<ul style="list-style-type: none"> temperature range to indicate fever changed to 37.5° Celsius or above for screening temperature screening guidance added to align with COVID-19 recommendations (Victoria DET) <p>inclusion of posters for display in services re: temperature checks</p>	JUNE 2021
MAY 2020	<p>Minor changes to include strategies for a COVID-19-safe environment</p> <p>adjustments to requesting families to produce a medical certificate each time their child has symptoms of an illness (due to COVID-19 infection prevention strategies, this is not always possible to contact GPs for clearance)</p> <p>influenza vaccination recommendations</p> <p>children with complex and/or chronic medical conditions are notified in the event of illness in the service</p>	JUNE 2021
MARCH 2020	<p>Changed position of colds and flu section</p> <p>Additions to infectious diseases/illnesses</p> <p>Additions for reporting outbreaks to Public Health</p> <p>Deletion of use of sponging to reduce fever (Sydney Children’s Hospital recommendation)</p> <p>Additional section for Approved Provider notification</p> <p>Exclusion period recommendation resources added</p> <p>Inclusion of Department of Health information</p> <p>Additional information for parents and families</p>	JUNE 2021

JUNE 2019	<p>Some sentences reworded/refined.</p> <p>Additional information added to points.</p> <p>Sources checked for currency.</p> <p>Sources/references corrected, updated, and alphabetised.</p> <p>Related policies alphabetised.</p> <p>Policies added to 'Related Policies'</p> <p>Points added (Highlighted).</p> <p>Minor formatting (line spacing & paragraph spacing) for consistency throughout policy.</p>	JUNE 2020
SEPTEMBER 2018	New policy created to comply with Regulations and Health and Safety Requirements	JUNE 2019

2.28 TOBACCO, DRUG AND ALCOHOL-FREE POLICY

Our Family Day Care Service is committed to creating and maintaining environments that promote the safety of all children, educators and visitors in our principal office, FDC residences and approved venues. We believe in maintaining a healthy, safe and productive workplace environment that reduces risks and hazards associated with the use of drugs 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: EDUCATORING ARRANGEMENTS		
4.2	Professionalism	Management, educators and Educator 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	Educator 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
190	Infringement offences

RELATED POLICIES

Child Protection Policy	Interactions with Children, Family and Educator Policy
Child Safe Environment Policy	Privacy and Confidentiality Policy
Dealing with Complaints Policy (Educator)	Work Health and Safety Policy
Grievance Policy (Educator)	

PURPOSE

We aim to provide tobacco, 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.

Research provides evidence that exposure to tobacco smoke poses major health risks to both children and adults. Babies and young children are especially vulnerable to the poisons of second-hand smoke because their bodies are developing. Effects of passive smoking include Sudden unexpected death in infancy (SUDI) asthma, infections and conditions include croup, bronchitis and the increased likelihood of childhood asthma. (*Red Nose, 2020*).

Working in line with the *Code of Conduct Policy* and *Work Health and Safety Policy* our FDC Service aims to provide a policy regarding a tobacco, drug and alcohol-free environment with clear guidelines to ensure environments are safe for all children, educators and visitors. This policy sets out expectations for all employees, engaged educators, volunteers and visitors regarding what is and what is not acceptable behaviour and practice in relation to alcohol and drug use and provides procedures which outline how to deal with impaired people, employees, volunteers and visitors, at the FDC service residence or venue.

SCOPE

This policy applies to the educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

The Education and Care Services National regulations state the Approved Provider must ensure the environment is free from the use of tobacco, illicit drugs and alcohol and ensure that **an employee or volunteer educators, employees, or volunteers** at the FDC service **are is** 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 Educator, educators, volunteers and students will abide by this policy at all times.

Educators must ensure that their physical indoor /outdoor environment should be free from any cigarette bud if any of these found during spot check / announced visit warning letter would be issued against that educator (NUR).

Educator household members are not allowed to smoke during operation hours if any kind of smell can be felled during spot check or monthly visit warning letter would be issued against that educator (NUR)

Strict action needs to be taken if Service receive any complaint against that educator (NUR).

Educator must need to comply with N.L/ N.R /Nurture Policy and Procedure to comply with approval (NUR).

Definitions

Alcohol

- Alcohol is the most commonly used depressant drug. It affects both mental and motor function. Examples include beer, wine, spirits.

Under the Influence

- Includes a person who has taken drugs or alcohol that interferes with sound judgement and acceptable behaviour that may impair mental and physical ability to perform their duties safely.

Drugs

- **Illegal Drugs:** drugs such as cannabis, amphetamines, ecstasy, cocaine and heroin, are illegal. They are not subject to quality or price controls and the amount of active ingredient varies. A person using illegal drugs can never be sure of how strong the drug is, or what is actually in it.
- **Prescription Drugs:** Prescribed and over the counter medications can also be misused for the purposes of intoxication. Employees taking medication should find out how it may affect them by consulting their doctor and advising the Nominated Supervisor or Responsible Person if the prescribed medication will affect their mental and physical ability to perform their duties safely.
- **Illicit Drugs:** Illicit drugs include-illegal drugs, prescription medicines that have been obtained illegally or are not being used for medicinal purposes and other substances that are being used inappropriately — for example, sniffing glue or inhaling paint thinner

Use of tobacco, drugs and alcohol

- Our FDC Service supports the [Smoke Free Environment Act 2000](#). The company and its employees, engaged educators and volunteers, will follow all conditions outlined in this act.
- Our FDC Service is bound by the Education and Care Services National Regulations. Alcohol, drugs, or other substance abuse by employees can have serious adverse effects on their own health and the safety of others. As such whilst providing education and care to children, educators, coordinators and volunteers must not:
 - consume illegal drugs or alcohol
 - be under the influence of illegal drugs or alcohol
 - use or possess illegal drugs at any workplace
 - drive a vehicle, having consumed alcohol or suffering from the effects of illegal substances.
- Smoking or vaping is NOT permitted in or on the surrounding areas of the FDC residence or venue when care is taking place. (The smoking ban extends to an area of up to **5m** around the land the service is approved to provide education and care).
- Educators must ensure that children being educated and cared for as part of the FDC service 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.

- It is expected that if educators do smoke, the odour of tobacco smoke will not be detected on their clothing or hands and any items children may contact, is residue free (cigarette butts, ash, matches etc are disposed of or stored away from children at all times).
- Consideration should be given to ventilation and hygiene within the residence or venue to ensure tobacco smoke is not detected.
- The safe storage of any items related to smoking or vaping must be strictly adhered to in the FDC residence or venue (ashtrays, lighters, matches, cigarettes etc.)

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.

Respect for People and the Service

- Management, educators, coordinators and volunteers understand that *workplace health and safety is everyone's responsibility*
- Management, educators, coordinators and volunteers have a responsibility to take reasonable care for the health and safety of themselves and others at the workplace to enable compliance with the work health and safety legislation outlined in the *Work Health and Safety Policy*
- 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.
- Management, educators, coordinators and volunteers are committed to the Service philosophy and values, inclusive of best practice in early childhood education and building positive partnership with children, families and Educator.

Expectations of the Approved Provider, Coordinator/Nominated Supervisor

Management is expected to:

- keep educators informed about essential information and any relevant changes and make all documents readily accessible to them
- take appropriate action if a breach of the *Tobacco, Drug and Alcohol-Free Policy* occurs
- advise new employees and volunteers to the service of the *Tobacco, Drug and Alcohol- Free Policy* during the induction process. Visitors will be advised of this policy through signage such as
 - 'No Smoking' signs clearly visible at the front entry of the FDC service

- signage reminding families and visitors that they should not enter the premises if they under the influence of prohibited drugs or alcohol

Reasonable belief or suspicion

If a Coordinator/Nominated Supervisor suspects a FDC educator or educator assistant to be affected by drugs or alcohol, they must inform the Approved Provider immediately. FDC educators will report any concerns they may have about inappropriate actions of any other educator or educator assistant that involves the use of drugs or alcohol to management. Any incidents or reports are to be documented confidentially including action taken which followed the incident or report.

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 Educator 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

Workplace health and safety (WHS) Legislation

Each state specifies Work Health and Safety Acts and Regulations which involves the management of risks to the health and safety of everyone in the workplace. This includes ensuring children, visitors and educators are provided with a tobacco, drug and alcohol-free environment.

NSW: Work Health and Safety Act 2011 and Work Health and Safety Regulation 2017

VIC: Occupational Health and Safety Act 2004 and Occupational Health and Safety Regulations 2017

WA: Work Health and Safety Act 2020 and Work Health and Safety regulations (under development)

SA: Work Health and Safety Act 2012 and Work Health and Safety Regulations 2012

NT: Work Health and Safety (National Uniform Legislation) Act 2011 and Work Health and Safety (National Uniform Legislation) Regulations 2011

QLD: Work Health and Safety Act 2011 and Work Health and Safety Regulation 2011

ACT: Work Health and Safety Act 2011 Act and Work Health and Safety Regulation 2011

TAS: Work Health and Safety Act 2012 and Work Health and Safety Regulations 2012

SOURCE

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 Regulations](#). (2011).

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

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

NSW Government. SafeWork NSW. [Alcohol and other drugs](#)

NSW Government. Work Cover NSW. (2006) [Alcohol and other drugs in the workplace, Guide to developing a workplace alcohol and other drugs policy](#)

Ombudsman Act 2001 (Cth).

Privacy and Personal Information Protection Act 1998 (Cth).

Queensland Government. Workplace Health and Safety Queensland. [Framework for alcohol and drug management in the workplace](#)

[Smoke-free Environment Act 2000](#).

Tasmanian Government. WorkSafe Tasmania. [Alcohol and drugs](#)

Victoria State Government. Work Safe Victoria. [Guide for developing a workplace alcohol and other drugs policy](#)

Work Health and Safety Act 2011 (Cth).

Workplace Relations Act 1996 (Cth).

Work Place Law. [Drug and alcohol testing in the workplace](#).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023

JUNE 2022 MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
JUNE 2021	Draft policy developed	JUNE 2022

2.29 WORK HEALTH AND SAFETY POLICY

Everyone has a right to be safe at work. Our Family Day Care Service is committed to supporting educators create and maintain a safe and healthy environment for educator assistants, coordinators, children, families and visitors. We ensure that FDC educators and staff within our organization, are aware of and meet their legal and ethical responsibilities as clearly documented in current National Regulations and Work Health and Safety laws.

Our *Work, Health and Safety Policy*, procedures and practices ensure that management fulfils its responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees and contractors; employees and contractors meet their health and safety obligations and are safe in their workplace; and the work environment supports quality early education and care.

NATIONAL QUALITY STANDARD (NQS)

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

2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
82	Tobacco, drug and alcohol-free environment
83	Staff members and family day care educators must not be affected by alcohol or drugs
116	Assessments of family day care residences and approved family day care venues
117	Glass
168	Policies and procedures are required in relation to health and safety
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of First Aid Policy	
Administration of Medication Policy	
Anaphylaxis Management Policy	
Animals and Pet Policy	
Assessment of Family Day care educators, family day care educator assistants and persons residing at family day care residences	
Asthma Management Policy	
Arrival and Departure Policy	
Bush Fire Policy	
Child Protection Policy	
Child Safe Environment Policy	
Control of Infectious Disease Policy	
Coronavirus COVID-19 Management Policy	
Cyber Safety Policy	
Delivery of children to, and Collection from Education and Care Service Premises	
Dental Health Policy	
Diabetes Management Policy	
Emergency Evacuation Policy	
Epilepsy Policy	
Excursion Policy	
Furniture and Equipment Policy	
	Hand Washing Policy
	Health and Safety Policy
	Incident, Illness, Accident and Trauma Policy
	Immunisation Policy
	Lockdown Policy
	Medical Conditions Policy
	Nappy Change and Toileting Policy
	Nutrition and Food Safety Policy
	Physical Environment Policy
	Pregnancy in Early Childhood Policy
	Road Safety Policy
	Safe Storage of Hazardous Substances Policy
	Sick Children Policy
	Sleep and Rest Policy
	Staffing Arrangements Policy
	Supervision Policy
	Sun Safety Policy
	Tobacco, Drug and Alcohol Free Policy
	Water Safety Policy

PURPOSE

Our Family Day Care Service aims to protect the health, safety and welfare of children, families, FDC educators, educator assistants and visitors adhering to moral and legal obligations outlined in Work Health and Safety (WHS) laws. We go beyond compliance with all relevant legislation and work towards best practice to ensure a safe work environment within our principal office and also within each approved FDC residence or venue. Our Family Day Care Service is committed to continuous improvement in all areas of workplace health, safety and wellbeing.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

We believe that the provision of a safe working and learning environment for children, families, educators/educator assistants and visitors is an integral and essential responsibility during the Family Day Care Service operation.

Work Health and Safety regulations require the Approved Provider to eliminate risks in the workplace or if that is not reasonably practicable, minimise the risks so far as is reasonably practicable.

Our FDC Service has a duty to consult with educators, visitors and families about work health and safety requirements and develop comprehensive policies and procedures to manage risks and hazards appropriately and effectively.

All employees and educators contracted to our Family Day Care Service, have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others.

Legislation

Each state and territory government have its own Work Health and Safety (WHS) laws and a regulator to enforce them. In WA we are legislated by **[Work Health and Safety Act 2020 and Work Health](NUR)** and regulated by **[WorkSafe WA](NUR)**

THE APPROVED PROVIDER AND MANAGEMENT ARE COMMITTED TO:

- providing all employees and contractors with a safe and healthy work and learning environment so far as reasonably practicable
- ensuring the health and safety of children in attendance at the FDC Service so far as reasonably practicable
- ensuring the FDC residence or venue is tobacco, alcohol and drug free
- ensuring the health and safety of visitors, including contract workers and volunteers, whilst at the Service so far as reasonably practicable
- providing and maintaining an environment free of risks or hazards to health and safety so far as reasonably practicable
- ensuring the provision of adequate facilities to protect all persons from risks to their health and safety including access to toilets, provision of hand hygiene resources (soap and water, alcohol-based hand sanitiser, paper towel) and Personal Protection Equipment (disposable gloves, masks, glasses)

- implementing a proactive process of risk management facilitating continuous improvement
- ongoing consultation, collaboration and communication with all staff throughout the risk assessment process
- implementing a strategic approach to health and safety by using measurable objectives to monitor performance
- meaningful consultation with employees regarding work, health and safety issues
- providing an effective and accessible safety management procedure for all employees to guide safe working and learning throughout the workplace
- ensuring Safety Data Sheets (SDS) are provided for all hazardous chemicals used at the Service
- supporting and promoting the health and wellbeing of all educators and employees
- promoting dignity and respect within our Family Day Care Service and taking action to prevent and respond to bullying in the workplace
- providing return to work programs to facilitate safe and sustainable return to work for employees
- providing staff with appropriate information, training, and guidance to facilitate a safe and productive work and learning environment
- notifying the regulatory authority within 24 hours of any incident, situation or event that has occurred and presented imminent or severe risk to the health, safety and/or wellbeing of any person present at the FDC Service or if an ambulance was called in response to the incident/situation (not as a precaution)
- investigating and managing any incident or accident to prevent further reoccurrence
- providing a program of continuous improvement through engaging with industry and new technology and reviewing and updating policies and procedures
- implementing safety management systems / procedures
- keep up to date about current health risks and implement risk minimisation measures to reduce the risk of transmission of viruses such as coronavirus (COVID-19)
- maintain accurate records of all WHS issues and maintenance

FDC EDUCATORS AND EDUCATOR ASSISTANTS MUST ENSURE:

- the health and safety of children, families and visitors of the Service is paramount
- policies and procedures are being followed and adhered to at all times
- that they observe, implement and fulfil the responsibilities under the current Work Health and Safety Act and National Regulations
- they participate in the review of WHS policies
- they take practical steps and responsibility for their own health and safety and of others affected by their actions at work

- work, health, and safety audits are conducted frequently to ensure the FDC residence/venue is maintaining a safe environment for children, families, staff and visitors
- appropriate resources and processes are in place to identify hazards, eliminate or minimise risks and achieve work health and safety compliance
- they know the location of fire extinguishers, blankets or other safety devices and know how to use them
- identified risks are assessed and controlled
- that any potential and actual hazards in the workplace are reported to the Health and Safety Representative (HSR) of the FDC Service [or enter who educators report potential hazards to within the FDC scheme]
- management is notified of any incidents and accidents in the workplace as soon as practicable so notification can be made to the Regulatory Authority within required time frames
- workplace incidents are reported and investigated to ascertain the circumstances of the incident or accident and appropriate action is taken to prevent further incidents from occurring
- correct record keeping procedures for incidents and accidents in the WHS Reporting folder are followed
- compliance with any reasonable instruction or lawful direction, including wearing personal protective equipment (PPE) as required
- areas identified for improvement are included in the Quality Improvement Plan (QIP)
- they participate in training and consultation with the support of management
- they follow the correct manual handling procedures
- that work areas are safe, and they will help reduce accidents to themselves and others
- all safety checklists are implemented as required on a regular basis
- children's equipment is regularly checked for safety
- that children are supervised at all times
- all dangerous chemicals are stored appropriately
- children are kept out of kitchen areas
- all power points have safety plugs
- no hot drinks are around children
- gates are closed and locked after entry/exit
- all spills are cleaned up immediately (to prevent slipping), following the correct cleaning procedure
- To comply with Education and care national regulation 2012 the glazed area must be glazed with Safety Glass / treated with the product that prevents glass from shattering if broken (NUR).
- reports and/or concerns about work health and safety are reviewed and responded to
- current work health and safety knowledge is maintained

FAMILIES AND VISITORS WILL:

- take reasonable care of their own health and safety whilst visiting the FDC Service
- report any health and safety issues to the FDC educator and/or management
- participate in consultation in WHS issues affecting them
- take reasonable care to ensure they don't affect the health and safety of other people (e.g: Health Declaration for infectious diseases)
- comply to FDC Service policies and procedures in relation to WHS including actions to reduce the risk of transmission of infectious diseases or illnesses such as physical distancing (if recommended by Australian Government Department of Health) personal hygiene practices and exclusion if children and visitors if unwell
- comply to Service policies related to the use of tobacco, alcohol and drugs at all times.
- Visitors Must need to sign in/ sign out for the safety of the children (NUR)

DUTY OF CARE

A duty of care is the legal obligation to provide reasonable care while performing any acts or making any omissions that could foreseeably harm others.

The duty encompasses a wide range of matters, including (but not limited to):

- provision of adequate supervision
- ensuring grounds, premises and equipment are safe for children's use
- implementing strategies to prevent bullying and
- providing medical assistance (if competent to do so) or seeking assistance from a medically trained person to aid a child who is injured or becomes ill at the FDC Service.

The Approved Provider and Nominated Supervisor will ensure all practical steps are taken to ensure the health and safety of all FDC educators, staff, children, their families, and any other people impacted by the FDC Service operations. This includes ascertaining and eliminating or minimising all realistically foreseeable hazards and providing suitable training and instruction for FDC educators and other employees to ensure health and safety. FDC educators, staff, and volunteers will also take reasonable care for their own health and safety, ensuring their conduct does not adversely affect the health and safety of other people. FDC educators, families, volunteers and visitors are notified that smoking on or within our FDC residence and venue, including car parks, is strictly prohibited. A FDC educator must not consume alcohol or be affected by alcohol or drugs (including prescription medication) so as to impair the educator's capacity to supervise or provide education and care to children.

2.29.1 HAZARD IDENTIFICATION

A hazard is a source of potential harm or a situation that could cause or lead to harm to people or property. Workplace hazards can be physical, chemical, biological, mechanical or psychological.

Potential Hazard	What does this include?	Example	Potential accident
Physical	Floors, stairs, steps, ladders, fire, falling objects, slippery surfaces, manual handling (lifting, pulling, pushing), noise, heat and cold, radiation, poor lighting, ventilation, glass	Children’s beds placed in an open area, wet bathroom floors, lifting children for nappy changes.	Trips, slips and falls, Manual handling injury (soft tissue/back injury)
Mechanical and/or Electrical	Electricity, machinery, equipment, washers and dryers, kitchen appliances, motor vehicles.	Lint accumulation in dryers can be a combustion hazard. Frayed power cords or unplugged power points are an electrical hazard.	Fire, electric shock, electrocution
Chemical	Includes substances such as acids or poisons, cleaning agents, dusts and fumes.	Cleaning chemicals, Medication	Fire, explosion, poisoning
Biological	Includes bacteria, viruses, mould, mildew, insects, vermin and animals.	Sick staff or children attending the Service, Contaminated food, mice infestation.	Cross-infection, food poisoning.
Psychological	Workplace stressors.	Bullying, children’s needs exceed skill or confidence of educators, insufficient management support.	High stress levels (staff and children), compromised care practices, failure to be inclusive.

Reference: Work Health and Safety in Education and Care Services PSC National Alliance (2012).

2.29.2 RISK MANAGEMENT

Risk Management is part of our FDC Service's commitment to Work Health and Safety (WHS) to ensure that clear processes are in place for the identification of hazards, assessment of risks and implementation of control measures so far as reasonably practicable. Risk management plans include risk identification and risk assessment. The Approved Provider will conduct an assessment (including a risk assessment) of each residence and approved FDC venue at least annually. Plans are reviewed regularly to ensure that they are effective in controlling risks.

Our FDC Service will comply with WHS legislation and ensure all staff and visitors are aware of the potential hazards and risks and are provided with the necessary information and strategies to undertake to help keep them safe and healthy.

Risk Management is a systematic and methodical examination of potential risks and hazards within our working and learning environment. The process of risk assessment assist to:

- identify hazards
- assess who or what might be harmed and how
- evaluate the risks and deciding on appropriate control measures
- record findings
- review the effectiveness of exiting control measures regularly and update when necessary assessments regularly
- consult and communicate with all stakeholders- staff, families, visitors and community members.

Assessments of FDC residence or venue will consider:

- the suitability of the residence or venue according to the number, ages and abilities of children attending, or likely to attend
- suitability of nappy change arrangements
- existence of any water hazards, water features or swimming pool at or near the residence or venue
- the risk posed by any animals at the residence or venue
- the use of glass within the residence or venue as per regulation 117

Risk assessments are routinely conducted for emergencies including evacuation, lockdown, excursions and management of natural disasters such as bush fire, flood, cyclone and earthquake. (*see relevant policies for specific risk assessments*)

Additionally, risk assessments can be undertaken when presented with a hazard such as the potential health risk associated with exposure to coronavirus- COVID-19 and implement control measures to manage those risks.

2.29.3 HAZARD REDUCTION

FDC educators have a responsibility to take a risk management approach to all activities and plan for the safety of themselves and children. This may include:

- always working with safety in mind
- being aware of any hazards and report them immediately
- keeping hallways and doors completely clear as an object could become a hazard in an emergency evacuation situation
- using resources appropriately
- opening doors slowly
- not standing on furniture (chairs or tables)
- walking, not running within the FDC residence (particularly up and down stairs)
- adhering to sun protection guidelines
- ensuring personal safety by wearing PPE, implementing hand hygiene procedures
- following behaviour guidance plans to ensure personal safety and that of other children

2.29.4 HAZARDOUS MATERIALS

We strive to minimise the health and safety risks associated with the handling and storage of hazardous materials. Our FDC Service requires educators to adopt a risk management strategy that enables practices that minimise the risk of harm, injury, or illness caused by any hazardous material.

As far as is reasonably practical, our FDC Service and educators will:

- use the least hazardous chemical, product, or equipment for the task without jeopardising hygiene
- ensure that FDC educators, staff, contractors, students, and visitors are protected from both short- and long-term health effects of hazardous substances and processes
- ensure all FDC educators, staff, contractors, visitors, and students have access to Safety Data Sheets (SDS) and adequate training on the safe use and storage of all hazardous substances prior to any exposure to those substances.
- ensure that non-toxic plants are planted in FDC residences and venues, and regular garden and grounds maintenance will be undertaken.

2.29.5 CLEANING

FDC educators and educator assistants must:

- adhere to the cleaning schedules and procedures including hand washing, use of gloves, colour coded mops/cloths

- follow manufacturer's directions for cleaning products and chemicals (see Safety Data Sheets- SDS)
- ensure a register of all hazardous chemicals, substances and equipment is used at the FDC residence or venue. The register should include where they are stored, their use, any risks, first aid instructions and the current SDS.
- chemicals are never mixed together
- chemicals and cleaning products are stored in original containers provided by the manufacturer
- all items are clearly labelled
- wash hands immediately if any chemical is spilled
- in the event of a chemical spill, isolate the area from children and clean as soon as practicable
- wash hands thoroughly after using any chemical or disinfectant
- ensure containers are disposed of correctly following local council guidelines and not reused under any circumstances
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhalation, skin or eye exposure has occurred.
- **Poisons Information Line 13 11 26 or call an ambulance on 000**
- ensure emergency, medical and first aid procedures are carried out

2.29.6 SLIPS TRIPS AND FALLS

Children must be adequately supervised at all times. Identifying potential hazards such as sustaining an injury from play equipment or slipping on a wet surface should be considered through the risk assessment process. Establishing appropriate control measures for FDC educators and children, assist in managing the possible risk.

FDC educators and educator assistants should:

- wear covered shoes with slip resistant soles and heels
- be alert for any object that could be a trip hazard
- pick up any objects sticking up from the floor or ground, so as not to cause injury
- ensure warning signs alerting others of wet and slippery floors are used
- immediately clean any spills to avoid slips and falls
- notify the Coordinator/Nominated Supervisor if a slip or fall is witnessed, whether it is a work colleague or visitor

- ensure the appropriate paperwork is completed (including notification to the Regulatory Authority if required).

2.29.7 ELECTRICAL EQUIPMENT TESTING

FDC Services must ensure that electrical equipment is tested by a qualified person on a regular basis which is recorded with a tag attached to the equipment tested. This must be kept until the equipment is next tested or disposed of and must specify:

- name of the tester
- date and outcome of the testing
- re-test date

Records will be maintained including details of electrical equipment tested, tag number, location, test date, pass/fail and when electrical equipment is due to be re-tested (**the recommendations are for all equipment to be tested annually**).

2.29.8 MAINTENANCE OF FIRE EQUIPMENT

All fire equipment at our Service will be maintained as per the Australian Workplace Safety Standards. External agencies will be employed to conduct the maintenance of the fire equipment. Fire extinguishers will be inspected every six months.

2.29.9 BACK CARE AND MANUAL HANDLING

Our FDC Service refers to the [Safe Work Australia / Manual Handling](#) as part of our commitment to ensure a best practice approach. We are required to undertake Workplace Health and Safety Training that will continue to be updated to ensure safety.

FDC educators/educator assistants are at risk of work-related ergonomic injuries, particularly back injuries, through carrying children, bending, reaching and not using adult sized furniture.

Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.

Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee. Manual handling injuries also include overuse injuries or, because of falling during manual handling, bruising or laceration.

RECOMMENDATIONS:

- Due to the physical demands of working with children, it is sensible to do warm-up exercises for three to five minutes before starting work particularly through the winter period as muscles and tendons are more likely to be damaged when cold. Simple exercises to warm and stretch all the major muscle groups will help prevent injury.
- To help prevent injuries, there are legal requirements for manual handling in the workplace.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR WILL:

Will conduct Risk assessment of FDC annually under reg116 to check thoroughly all the areas being used to educate and cared for children are maintained well on the basis of which the approval was done (NUR)

- provide FDC educators and staff with annual training in Manual Handling and Back Care
- make sure that equipment and containers are designed and maintained to be, as far as workable, safe and without risk to health and safety when manually handled
- make sure that the work practices involving manual handling and the work environment are designed to be, as far as workable, consistent with safe manual handling activities
- identify, assess and control all risks associated with manual handling in each workplace
- clearly mark any equipment which requires more than one person to lift or move it.

2.29.10 PREVENTING MANUAL HANDLING INJURIES

- Eliminate or reduce the amount of manual handling
- Reduce the amount of bending, forward reaching, and twisting, in all tasks
- Reduce worker fatigue
- Keep all equipment in good working order
- Keep the workplace environment safe

TO HELP PREVENT MANUAL HANDLING INJURIES

- Kneel rather than bend down
- Sit down with the children rather than bend over
- Sit in an appropriately sized chair or on the floor
- Carry children only when necessary
- The correct way to carry a child is with one arm under the child's buttocks and the other arm supporting the child's back. At the same time, hold the child facing you, as close to your body as possible
- *Adults should try to avoid carrying a child on their hip because this can strain the back*

- When lifting awkward loads, be careful to lift with a balanced and comfortable posture
- Minimise the need to reach above shoulder level
- If necessary, use a step ladder
- Avoid extended reaching forward
- For example, leaning into low equipment boxes
- Share the load if the equipment is heavy, long or awkward
- To lift a child out of a cot, it is vital to put the side down of the cot first, lean against the cot and raise the child as close as possible to your body. Do not stretch over and lift.
- When sliding, pulling or pushing equipment that is not easy to move, e.g. trestles or gym mats, ask for help and organise a team lift
- Remember these needs when buying furniture and equipment or upgrading facilities
- Use equipment and furniture that can be moved around as safely and easily as possible
- To complete lengthy writing tasks, e.g., program planning, sit at an appropriate adult sized chair at an adult sized table
- Larger children to climb up steps/ladder provided to change table.

AVOID TWISTING WHEN LIFTING

Many injuries result from twisting while lifting. To avoid this:

- move equipment when children are not around
- rearrange storage so that it is easier and safer to replace and remove items
- lift only within the limits of your strength
- use beds and equipment that are easy to move
- make sure you can see where you are going when carrying equipment or children
- be especially careful when lifting a child with special needs.

AVOID ACCIDENTS WITH CAREFUL 'HOUSEKEEPING'

'Good housekeeping' means fewer accidents. Check that:

- the floors and other walking surfaces are uncluttered, even and non-slip
- the workplace is tidy
- there is adequate space to perform each task
- equipment is maintained regularly
- lighting is adequate.

HOW TO LIFT SAFELY

1. Place your feet in a stride position

2. Keep your breastbone as elevated as possible
3. Bend your knees
4. Brace your stomach muscles
5. Hold the object close to your centre of gravity, i.e. around your navel
6. Move your feet not your spine
7. Prepare to move in a forward-facing direction
8. Ask for help when it is not possible to lift on your own

HOW TO ASSESS THE CORRECT STORAGE AND SHELVING HEIGHT

Correct storage and shelving height are important to prevent slips, falls and strains.

- The best height range for handling loads is around waist level
- The acceptable height for lifting is any point between the individual's knuckle and shoulder
- Seldom-used objects can be stored at the shoulder-to-raised arm height (use ladders to avoid stretching)
- Avoid storing objects at a level between an individual's knuckles and the floor
- Mechanical aids such as ladders and trolleys should be used where possible to avoid lifting

RISKY PLAY/ ADVENTUROUS PLAY

FDC educators/educator assistants will provide an environment that encourages children to effectively learn in play which involves supporting them to take risks. No play space is risk free. It is important for children's development to become adventurous and participate in opportunities to explore and test their own capabilities, manage risk, and to grow as capable, resourceful, and resilient people.

FDC educators will assess the risks to children's safety and develop guidelines to encourage children to test their abilities within a safe environment.

When we find children exploring risky play, educators will supervise and assist when appropriate.

Educator must follow the guideline given by Coordinator/Nominated Supervisor for safe environment during initial visit before approval (NUR)

Approval will be given once educator maintain indoor and outdoor environment given by Nominated Supervisor (NUR)

Educator must ensure to remove and replace the stuff if it is not safe for the children and been told by coordinator during visit (Nur) and photos needs to send to the service with in given time frame by the coordinator (NUR)

Educator responsibility to take signature from visitors for the safety of the children being educated and cared for (NUR).

Educator must ensure not to change any of the facility provided to the children according to their requirement which was shown before approval, As approval is given after conducting risk assessment for the particular area for Health and safety of the children by the Nominated Supervisor (NUR)

FURTHER RESOURCES

Child Care Centre Desktop: *Work Health and Safety Manual*

ACT: WorkSafe ACT provides information for work health and safety

<https://www.worksafe.act.gov.au>

Northern Territory: NTWorkSafe assists businesses and workers understand their obligations under work health and safety. <https://worksafe.nt.gov.au/home>

NSW: SafeWork NSW administers the Work Health and Safety legislation, and has several codes of practice on specific work safety issues which are available online at <https://www.safework.nsw.gov.au/>

Queensland: Workplace Health and Safety Queensland oversees the Queensland Work Health and Safety Act 2011 <https://www.worksafe.qld.gov.au/>

South Australia: SafeWork SA provides work health and safety services across South Australia

<https://www.safework.sa.gov.au/>

Tasmania: WorkSafe Tasmania is the state's health and safety regulator:

<https://worksafe.tas.gov.au/home>

Victoria: WorkSafe Victoria is the state's health and safety regulator see:

<https://www.worksafe.vic.gov.au/early-childhood-education-and-care-safety-basics>

Western Australia: WorkSafe Western Australia regulates and promotes occupational safety and health regulations in the workplace <https://www.commerce.wa.gov.au/worksafe>

For further information see: <https://www.safeworkaustralia.gov.au/>

SOURCE

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

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
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2.30 CHILD PROTECTION POLICY (WA)

The Family Day Care (FDC) Service is committed to providing a child safe environment where children’s safety and wellbeing is supported and children feel respected, valued and encouraged to reach their full potential. Our FDC Service embeds the National Principles for Child Safe Organisations and promotes a culture of safety and wellbeing to minimise the risk of child abuse or harm to children whilst promoting children’s sense of security and belonging. We will ensure all management, educators and volunteers understand the meaning, importance and benefits of providing a child safe environment and critically, understand their obligations and requirements as Mandatory Reporters.

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

Our FDC Service believes that:

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

NATIONAL QUALITY STANDARD (NQS)

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

2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and Educator are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW	
84	Awareness of child protection law
155	Interactions with children
168	Education and care service must have policies and procedures
175	Prescribed information to be notified to Regulatory Authority
176	Time to notify certain information to Regulatory Authority
S162 (A)	Persons in day-to-day charge and nominated supervisors to have child protection training

RELATED POLICIES

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

All Family Day care (FDC) educators, educator assistants, coordinators and other Educator are committed to identifying possible risk and significant risk of harm to children and young people at FDC residences and/or approved venues. We comprehend our duty of care responsibilities to protect children from all types of abuse and neglect and will adhere to our moral and legislative obligations at all times.

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

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors (including contractors) of the Family Day Care Service.

2.30.1 What is child abuse?

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

There are different forms of child abuse: physical abuse, sexual abuse, emotional abuse, psychological abuse and child neglect.

2.30.2 INDICATORS OF ABUSE

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

General indicators of abuse and neglect may include:

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

2.30.3 PHYSICAL ABUSE

Physical abuse occurs when a child is severely and/or persistently hurt or injured by an adult or a child's caregiver. It may also be the result of putting a child at risk of being injured. Some examples are:

- hitting, shaking, punching
- burning and scolding
- excessive physical punishment or discipline
- attempted suffocation
- shaking a baby.

Possible signs of Physical Abuse

- broken bones or unexplained bruises, burns, welts
- the child is unable to explain an injury, or the explanation is vague
- dehydration or poisoning
- the child is unusually frightened of a parent or caregiver
- arms and legs are covered by clothing in warm weather
- when parents delay getting medical assistance for their child's injury
- brain damage through shaking or hitting.

2.30.4 SEXUAL ABUSE

Sexual abuse occurs when a child is exposed to, or involved in, sexual activity that is inappropriate to the child's age and developmental level. It includes circumstances where the child has less power than another person involved, is exploited or where the child has been bribed, threatened, or coerced. It also includes situations where there is a significant difference between the developmental or maturity level of the child and another person involved.

Some examples are:

- letting a child watch or read pornography
- allowing a child to watch sexual acts
- fondling the child's genitals
- having oral sex with a child
- vaginal or anal penetration
- using the internet to find a child for sexual exploitation.

Possible signs of sexual abuse when a child:

- acts in a sexualised way that is inappropriate to his/her age
- creates stories, poems or artwork about abuse
- has pain, bleeding or swelling in his/her genital area
- starts doing things they have grown out of such as crying a lot, bed wetting or soiling, clinging to caregiver
- has nightmares or sudden unexplained fears.

2.30.5 EMOTIONAL ABUSE

Emotional abuse occurs when an adult harms a child's development by repeatedly treating and speaking to a child in ways that damage the child's ability to feel and express their feelings. Some examples are:

- constantly putting a child down

- humiliating or shaming a child
- not showing love, support or guidance
- continually ignoring or rejecting the child
- exposing the child to family and domestic violence
- threatening abuse or bullying a child
- threats to harm loved ones, property or pets.

Possible signs of emotional abuse include when a child:

- is very shy, fearful or afraid of doing something wrong
- displays extremes of behaviour for example from being very aggressive to very passive
- is not able to feel joy or happiness
- is often anxious or distressed
- feels worthless about life and themselves
- has delayed emotional development.

2.30.6 PSYCHOLOGICAL ABUSE

Psychological abuse is repeatedly treating and speaking to a child in ways that damage the child's perceptions, memory, self-esteem, moral development and intelligence. Some examples are:

- constantly belittling, shaming and humiliating a child
- calling the child names to minimise their self-worth
- threatening a child
- keeping a child isolated from other people or friends
- constantly ignoring a child
- encouraging a child to act inappropriately.

Possible signs of psychological abuse include when a child:

- feels worthless, unloved, unwanted
- feels dumb
- has difficulties remembering or recognising information
- has difficulties paying attention
- has difficulty knowing what actions are right or wrong
- is highly anxious.

NEGLECT

Neglect is when children do not receive adequate food or shelter, medical treatment, supervision, care or nurturance to such an extent that their development is damaged, or they are injured. Neglect may be acute, episodic or chronic. Some examples are:

- leaving a child alone without appropriate supervision
- not ensuring the child attends school, or not enrolling the child at school
- infection because of poor hygiene or lack of medication
- not giving a child affection or emotional support
- not getting medical help when required.

Signs of neglect in children include:

- untreated sores, severe nappy rash
- bad body odour, matted hair, dirty skin
- being involved in serious accidents
- being hungry and stealing food
- often being tired, late for school or not attending school
- feeling bad about themselves
- when a baby does not meet physical and development milestones without there being underlying medical reasons.

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

DEFINITIONS

Mandatory reporting is the legislative requirement for selected classes of people to report suspected child abuse and neglect to government authorities. In Western Australia (WA), mandatory reporting is regulated by the *Children and Community Services Act 2004*.

Mandatory reporters

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

- Doctors
- nurses and midwives
- teachers
- boarding supervisors
- police officers

2.31 WORKING WITH CHILDREN CHECK

People working or volunteering with children in Western Australia and the Christmas and Cocos (Keeling) Islands must, by law, have a Working with Children Check under the *Working with Children (Criminal Record Checking) Act 2004 (the WWC Act)*. The Working with Children (WWC) Screening Unit provides checks of workers and volunteers to organisations, contributing to creating safe environments for children and other vulnerable people.

A Working with Children Check is an assessment of whether a person poses an unacceptable risk to children. As part of the process, the WWC Screening Unit will look at criminal history, child protection information and other information.

Working with Children Checks are valid for three years. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked. If new information about a person means they pose a risk to children's safety, that person's check will be re-assessed and, if necessary, they will be prohibited from working with children. The WWC Screening Unit will inform both the person affected and any organisations they're linked to about the change in status.

Organisations need to be registered with the WWC Screening Unit to validate employees Working with Children Checks. Organisations are to advise the WWC Screening Unit through the Register Card Holders [online form](#) when a new employee, volunteer or student who already have a WWC Card from a previous employer begin working for the service. Working with Children Checks must be validated BEFORE the employee begins working with children.

IMPLEMENTATION

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

THE FAMILY DAY CARE SERVICE WILL ENSURE:

any Responsible Person in day-to-day charge of the Family Day Care service has successfully completed the child protection training.

all educators', Educator, and volunteers' Working with Children Checks are validated unless the person meets the criteria for exemption from a WWCC

all employees and volunteers are:

- provided with a copy of the current *Child Protection and Child Safe Environment Policies* as part of the induction process at the FDC Service
- aware of their mandatory reporting obligations and responsibilities to report all concerns about a child suffering abuse or neglect to the Department of Communities - Child Protection and Family Support's Mandatory Reporting Service on 1800 708 704. A written report must also be lodged using the Department's secure Mandatory Reporting Web System (MRWeb)
- aware of indicators showing a child may be at risk of harm or significant risk of harm
- all FDC educators and relevant personnel have successfully completed a course in child protection.
- training and development in child protection are provided for all FDC educators, Educator and volunteers on an annual basis
- FDC educators are provided with a reporting procedure and professional standards to safeguard children and protect the integrity of educators, Educator and volunteers
- FDC educators are provided with training and ongoing supervision to ensure they understand that child safety is everyone's responsibility, and they adhere to the Child Safe Standards
- access is provided to all FDC educators and Educator regarding relevant legislations, regulations, standards, and other resources to help educators, Educator, and volunteers meet their obligations
- records of abuse or suspected abuse are kept in line with our *Privacy and Confidentiality Policy* to notify the regulatory authority through the NQA-ITS (within 7 days) of any incident where it is reasonably believed that physical and/or sexual abuse of a child has occurred or is occurring while the child is being educated and cared for by the FDC Service
- to notify the regulatory authority through the NQA-ITS (within 7 days) of any allegation that sexual or physical abuse of a child has occurred or is occurring while the child is being educated and cared for by the FDC Service.

FDC EDUCATORS/EDUCATOR ASSISTANTS WILL:

- contact the police on 000 if there is an immediate danger to a child and intervene if it is safe to do so
- be able to recognise indicators of abuse
- respect what a child discloses, taking it seriously and following up on their concerns through the appropriate channels
- comprehend their obligations as mandatory reporters and their requirement to report all concerns about a child suffering abuse or neglect to the Department of Communities - Child Protection and Family Support's Mandatory Reporting Service on 1800 708 704. A written report must also be lodged using the Department's secure [Mandatory Reporting Web System \(MRWeb\)](#)
- refer families to appropriate agencies where there are concerns about the parents' ability to care for the child safely, including the protecting them from harm. These services may be located

through the services provided by the not-for-profit community sector and funded by the

Department of Communities. Family consent will be sought before making referrals.

- promote the welfare, safety, and wellbeing of children at the FDC Service
- allow children to be part of decision-making processes where appropriate
- prepare accurate records recording exactly what happened, conversations that took place and what was observed to pass on to the relevant authorities to assist with any investigation
- understand that allegations of abuse or suspected abuse against them are treated in the same way as allegations of abuse against other people
- NOT investigate suspicion of abuse or neglect but collect only enough information to substantiate concerns and pass on to the Child Protection Helpline or appropriate authority.
- Educator must ensure that he/she is only authorised person to involve with children not the extended family members (NUR).
- Educator is only responsible/not service if anything happen because of negligence of nurture policy and procedure(NUR)

DOCUMENTING A SUSPICION OF HARM

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

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

[see: Child Protection Notification- Observation Record]

DOCUMENTING A DISCLOSURE

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

WHEN RECEIVING A DISCLOSURE OF HARM, THE FDC EDUCATOR/NOMINATED SUPERVISOR/COORDINATOR WILL:

- give the child or young person their full attention
- remain calm and not display expressions of panic or shock
- reassure the child or young person it is right to tell
- listen to the child and allow the child to take his/her time
- accept the child or young person will disclose only what is comfortable and recognise the bravery/strength of the child for talking about something that is difficult
- let the child or young person use his or her own words
- don't make promises that can't be kept. For example, never promise that you will not tell anyone else
- tell the child/person they have done the right thing in revealing the information but that they'll need to tell someone who can help keep the child safe and stop the abuse
- honestly tell the child or young person what you plan to do next
- only ask enough questions to confirm the need to report the matter because probing questions could cause distress, confusion and interfere with any later enquiries
- not attempt to conduct their own investigation or mediate an outcome between the parties involved
- do not confront the perpetrator
- document as soon as possible so the details are accurately captured including:
 - time, date and place of the disclosure
 - 'word for word' what happened and what was said, including anything they (the Educator member/educator) said and any actions that have been taken
 - date of report and signature.

MAKING A REPORT

If you believe a child is in immediate danger, contact the Police by calling 000.

Once a mandatory reporter forms a belief, on reasonable grounds, that child sexual abuse has occurred or is occurring; they must make a report to the Department of Communities - Child Protection and Family Support's [Mandatory Reporting Service](#).

When making a report to the Department, have the following information available:

- details about the child/young person and family
- the reasons you are concerned

- the immediate risk to the child
- whether or not the child or family has support
- what may need to happen to make the child safe
- your contact details, so that the officer can call you to obtain further information if required or to provide feedback.

Failure to make a report can result in a fine of up to \$6,000. A person can be prosecuted within three (3) years after failing to make a report. After that, any action will be at the Attorney General's discretion.

CONFIDENTIALITY

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

Protection for reporters

All reporters are protected against retribution for making or proposing to make a report under amendments to the *Children and Community Services Act 2004* effective 26 August 2020. The identity of the reporter is protected by law from being disclosed, except in certain exceptional circumstances.

Provided the report is made in good faith:

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

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

Sharing of Information

The Western Australian Government recognises that for agencies and services working with children and families there will be times when it is necessary to share information to protect their safety and wellbeing. The Children and Community Services Act 2004 (CCS Act) is the legislative basis for child protection responses in Western Australia. It enables information sharing between agencies to protect the wellbeing of children. The Department for Child Protection and Family Support provides a [guide](#) on information sharing for government and non-government agencies.

There may be situations where educators are required to share information about a child without consent. The circumstances when this may apply include:

- a child may be placed at further risk or harm
 - the child poses a risk to themselves or is a risk to others

- reasonable efforts to obtain consent have failed
- you are unable to contact the parent/s
- there may or would be a risk to your safety if consent was sought
- it is clear from previous contact that consent would not be given.

As a guide, you may wish to share information that relates to:

- any known events or history of the child suffering harm
- the impact of a parent's mental illness, substance misuse, disability or history of family and domestic violence on his/her ability to care for their child
- protecting a child and/or adult exposed to FDV
- a person in the household who may pose a risk to the child
- any periods in which the child has been cared for by other people
- any significant issues relating to the child's siblings
- the child's physical health, including any treatment needs
- any psychological and emotional difficulties the child may have
- the child's education, including any special educational needs
- any positive feedback about a child or family you are working with
- any disabilities the child may have, including any care requirements • any known allergies and dietary requirements of the child
- any information that assists an assessment of the safety of a person subjected to FDV, which may include information about a perpetrator and their participation in counselling and treatment programs.

BREACH OF CHILD PROTECTION POLICY

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

- does something that a reasonable person in that person's position would not do in a particular situation
- fails to do something that a reasonable person in that person's position would do in the circumstances or
- acts or fails to act in a way that causes harm to someone the person owes a duty of care.
- Educator must ensure to attend child protection training whenever recommended by the service, if deny to do so , disciplinary action will take including suspension / termination / penalties(NUR).

MANAGING A BREACH IN CHILD PROTECTION POLICY

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

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

OUTCOME OF A BREACH IN CHILD PROTECTION POLICY

Depending on the nature of the breach outcomes may include:

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

EDUCATING CHILDREN ABOUT PROTECTIVE BEHAVIOUR

Our program will educate children

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

RESOURCES FOR INDICATORS OF ABUSE AND NEGLECT

Government of Western Australia. Department of Education-Communities. Child Protection. Concerns

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

CHILD SAFE ORGANISATIONS- <https://childsafe.humanrights.gov.au>

SOURCE

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

Australian Government Department of Education, Skills and Employment. (2009). *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

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Government of Western Australia. Department of Communities, Child Protection and Family Support. (2019). [About mandatory reporting legislation](#)

Government of Western Australia. [Working with Children Check](#)

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

Guide to the National Quality Standard. (2020).

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

Working with Children (Criminal Record Checking) Act 2004

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
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POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy link to Western Australian Education and Care Services National Regulations added in 'Sources' minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
SEPTEMBER 2021	New policy drafted for FDC services located in Western Australia	AUGUST 2022	

2.32 DIABETES MANAGEMENT POLICY

Diabetes in children can be a diagnosis that has a significant impact on families and children. It is imperative that the Family Day Care (FDC) educator and educator assistant at the Family Day Care (FDC) Service understand the responsibilities of diabetes management to reduce the risk of emergency situations and long-term complications. Most younger children will require additional support from the FDC educator/educator assistant to manage their diabetes whilst in attendance however, older school aged children may be working towards independence and learning to self-monitor blood glucose and insulin injecting.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and 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
96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

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

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including diabetes. Our Family Day Care (FDC) Service is committed to providing a safe and healthy environment that is inclusive for all children, educators/educator assistants, visitors and family members. The aim of this policy is to minimise the risk of a diabetic medical emergency occurring for any child whilst at our FDC Service by supporting young people with diabetes, working in partnership with families and health professionals, and following the child's medical management plan.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

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

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

Our FDC Service will ensure all educators, educator assistants and coordinators, including relief Educator, have adequate training and knowledge about diabetes and know what to do in an emergency to ensure the health and safety of children (especially regarding hypoglycaemia and safety in sport).

DESCRIPTION

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

IMPLEMENTATION

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

A copy of all our *Medical Conditions Policy* and *Diabetes Management Policy* will be provided to all FDC educators/educator assistants, volunteers, and families of the FDC Service. It is important that communication is open between families and educators so that management of diabetes is effective.

Children diagnosed with diabetes will not be enrolled into the FDC Service until the child's medical management plan is completed and signed by their medical practitioner or diabetes medical team, and the relevant FDC educator/educator assistants have been trained on how to manage the individual child's diabetes. A risk minimisation and communication plan must be developed with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

It is imperative that all educators/educator assistants, coordinators and volunteers at the FDC 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/Coordinator will ensure that:

- before the child's enrolment commences, the family will meet with the FDC Service and FDC educator to begin the communication process for managing the child's medical condition in adherence with the registered medical practitioner or health professional's instructions
- parents/guardians of an enrolled child who is diagnosed with diabetes are provided with a copy of the *Diabetes Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- each child with type-1 diabetes has a current individual diabetes medical management plan prepared by the child's diabetes medical specialist team, at or prior to enrolment
- discussions occur regarding authorisation for children to carry diabetes equipment with them and the self-administration of Blood Glucose testing and insulin injecting. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the FDC Service, FDC educator, parents/guardian and the child's medical management team.
- a child's diabetes medical management plan is signed by a registered Medical Practitioner or Paediatrician and inserted into the enrolment record for each child. This will include all information on how to manage the child's diabetes on a day-to-day basis as well as the emergency management of the child's medical condition. Information may include:
 - blood glucose testing- BG meter
 - insulin administration
 - food, carbohydrate counting
 - how to store insulin correctly
 - how the insulin is delivered to the child- as an injection or via an insulin pump/
Continuous Glucose Monitoring CGM

- oral medicine the child may be prescribed
 - managing diabetes during physical activities and excursions
 - permission for the child to self-administer blood glucose testing and insulin injecting
- a risk minimisation plan will be developed in collaboration with parents/guardian and the FDC educator and cover the child's known triggers and where relevant other common triggers which may lead to a diabetic emergency
- a Communication Plan is developed for the FDC educator and parents/guardians encouraging ongoing communication regarding the management of the child's medical condition, the current status of the child's medical condition, and this policy and its implementation within the service prior to the child starting at the FDC Service
- all educators and educator assistants, including volunteers, are provided with a copy of the *Diabetes Management Policy* and the *Medical Conditions Policy* which are reviewed annually
- a copy of this policy is provided and reviewed during each new educator's induction process
- all FDC educators/educator assistants have completed first aid training approved by the Education and Care Services National Regulations at least every 3 years and that this is recorded, with a copy of each Educator members' certificate held on the FDC Service's premises
- all FDC educators/educator assistants who have children with diabetes enrolled are trained to identify the symptoms of a diabetic emergency and are aware of the location of the diabetic medical management plan, required insulin/food as well as the risk minimisation plan
- when a child diagnosed with diabetes is enrolled, Educator and the FDC educator and educator assistant will be provided with regular professional training on the management of diabetes and, where appropriate, emergency management of diabetes
- the FDC educator/educator assistant is appropriately trained to perform finger-prick blood glucose or urinalysis monitoring and is aware of the action to be taken if these are abnormal
- individual child's medical management/action Plan will be displayed at the FDC residence **and/or approved venue** and copies kept at the FDC Service
- consideration is given as to how and where insulin is stored and the safety of sharps disposal
- the family supplies all necessary glucose monitoring and management equipment, and any prescribed medications prior to the child's enrolment
- FDC educators/educator assistants accompanying children outside the FDC Service to attend excursions, or any other event carries the appropriate monitoring equipment, any prescribed medication, a copy of the diabetes medical management plan for children diagnosed with diabetes
- the programs delivered at the FDC Service are inclusive of children diagnosed with diabetes and that children with diabetes can participate in activities safely and to their full potential
- updated information, resources and support is regularly given to families for managing childhood diabetes

- meals, snacks and drinks that are appropriate for the child and are in accordance with the child's diabetes medical management plan are available at the FDC Service at all times
- eating times are flexible and children are provided with enough time to eat
- Diabetes Australia are contacted for further information to assist educators to gain and maintain a comprehensive understanding about managing and treating diabetes
- applications for additional funding opportunities are made if required to support the child and FDC educators.

Educators/Educator Assistants will:

Educator will check with the parents if their child have any medical condition during orientation time(NUR).

- read and comply with the *Diabetes Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- know which children are diagnosed with diabetes, and the location of their monitoring equipment, diabetes medical management plans and any prescribed medications
- perform finger-prick blood glucose or urinalysis monitoring as required and will act by following the child's diabetes management plan if these are abnormal
- communicate with parents/guardians regarding the management of their child's medical condition as per their communication plan
- ensure that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the FDC Service
- follow the strategies developed for the management of diabetes
- ensure a copy of the child's diabetes medical management plan is visible and known to FDC educators/educator assistants
- take all personal medical management plans, monitoring equipment, medication records and any prescribed medication on excursions and other events outside the FDC residence/approved venue
- recognise the symptoms of a diabetic emergency and treat appropriately by following the diabetes medical management plan
- administer prescribed medication if needed according to the medical management plan in accordance with the FDC Service's *Administration of Medication Policy*
- identify and where possible minimise possible triggers as outlined in the child's diabetes medical management plan and risk minimisation plan
- increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties and family days, as well as during periods of high-energy activities

- maintain a record of the expiry date of the prescribed medication relating to the medical condition to ensure it is replaced prior to expiry
- ensure the location is known of glucose foods or sweetened drinks to treat hypoglycaemia (low blood glucose), e.g., glucose tablets, glucose jellybeans, etc.

Families will ensure they provide the Family Day Care Service with:

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

DIABETIC EMERGENCY

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

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

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

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

SIGNS and SYMPTOMS

HYPOGLYCAEMIA- (HYPO)

If a child is wearing a CGM device, it will sound an alert when they are below their target range.

Symptoms can vary between each young person.

If caused by low blood sugar, the child may:

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

HYPERGLYCAEMIA –(HYPER)

If caused by high blood sugar, the child may:

- feel excessively thirsty
- have a frequent need to urinate
- feeling tired or lethargic
- feel sick
- be irritable
- complain of blurred vision
- lack concentration
- have hot dry skin, a rapid pulse, drowsiness

- have the smell of acetone (like nail polish remover) on the breath
- become unconsciousness

If a child suffers from a diabetic emergency the Family Day Care educator will:

- Follow the child's Diabetic medical management/action plan
- If the child does not respond to steps within the diabetic medical management plan, immediately dial 000 for an ambulance
- Continue first aid measures and follow instructions provided by emergency services
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Inform the Approved Provider as soon as practicable
- The Approved Provider will notify the regulatory authority within 24 hours

REPORTING PROCEDURES

Any incident involving serious illness of a child which requires urgent medical attention or hospitalisation is regarded as a serious incident. The following is required:

- the FDC educator involved in the situation will complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the coordinator/nominated supervisor ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's file
- the Nominated Supervisor will inform management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours as per regulations
- opportunities for debriefing after each incident with the FDC educator and coordinator will be provided. The child's individual medical management plan and risk minimisation plan will be evaluated, including a discussion of the effectiveness of the procedure used.

For more information, contact the following organisations:

Diabetes Australia

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

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

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

State and Territory specific information

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

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

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

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

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

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

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

Source

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

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

Early Childhood Australia Code of Ethics. (2016).

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Guide to the National Quality Standard. (2020)

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

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

Revised National Quality Standard. (2018).

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

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none">• policy maintenance - no major changes to policy• minor formatting edits within text- Family Day Care Service abbreviated to FDC Service for consistency throughout policy• hyperlinks checked and repaired as required		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JULY 2021	<ul style="list-style-type: none">• Policy review includes ACECQA policy guidelines/components (June 2021)• rearranged some content within policy for better flow	JULY 2022	

	<ul style="list-style-type: none"> • additional section added: reporting procedures • sources checked for currency 	
JULY 2020	<ul style="list-style-type: none"> • additional related policies added • information regarding Risk Minimisation and Communication Plan added • Emergency Action Plan term used throughout policy • inclusions for the Medical Management Plan for diabetes • information regarding self-administration of medication • further information on diabetic emergency added • deleted repeated information • checked sources and links for currency • minor formatting editing 	JULY 2021
JULY 2019	<ul style="list-style-type: none"> • Grammar and punctuation edited. • Additional information added to points. • References checked & corrected re diabetes info. • 'For more information...' section – references updated/corrected. • New references added for each state. • Sources checked for currency. • Regulation 136 added. 	JULY 2020
JULY 2018	<ul style="list-style-type: none"> • New policy draft 	JULY 2019

2.33 BUSHFIRE POLICY- WESTERN AUSTRALIA

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

Emergency management arrangements for fire safety differ within each state and territory and are determined by the State Emergency Services or combined emergency service agencies. This policy reflects information related to Family Day Care Services located in Western Australia.

The National Law requires early childhood education services to ensure that every reasonable precaution is taken to protect children from any harm or hazard likely to cause injury, including bush fires. Regulations 97 and 168 (2) of the Education and Care Services National Regulations require that every early childhood education and care service in Australia, including family day care services, has an emergency and evacuation policy and procedure which includes:

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

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

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

12	Meaning of serious incident
51	Conditions on service approval (safety, health and wellbeing of children)
89	First Aid Kits
93	Administration of medication
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
168(2)(e)	Policies and procedures are required in relation to: Emergency and evacuation

RELATED POLICIES

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

We aim to ensure every reasonable precaution is taken to protect children and educators from harm and hazards likely to cause injury, including potential injury from bushfires. The potential for extreme fire conditions varies greatly throughout Australia, both in frequency and severity. Each state and territory have varying mandatory regulations for implementing policies and procedures for being safe in areas where bushfires occur. Our FDC Service will adhere to the regulations outlined by the Department of Communities, Education and Care Unit (ECRU) and be familiar with relevant legislation and other special requirements such as building regulations, traffic restrictions or emergency announcements that may apply to the area our Family Day Care services are operating.

SCOPE

This policy applies to the Approved Provider, nominated supervisor, coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

It is vital for the FDC Service to be informed and prepared for bush fire conditions and respond appropriately during periods of high fire danger or local bush fire activity. This policy and related procedure are to be implemented should a bush fire threaten any of our Family Day Care residences or approved venues. During peak bush fire season, educators will monitor fire ratings through relevant authorities on a daily or hourly basis and communicate with the approved provider and other stakeholders as required. We are aware of our Fire Danger Rating and ensure all educators have appropriate fire safety equipment installed and maintained in their residence at all times. Our Emergency Management Plan ensures all educators are trained to use fire safety equipment and through regular training, understand their unique evacuation procedures in case of an emergency at their residence or venue.

DEFINITIONS

The Australian climate is frequently hot, dry, and susceptible to drought. The widely varied fire seasons are reflected in the continent's different weather patterns. For northern WA areas, the danger period is June to October. For Southern WA areas, the peak risk usually occurs in October to April.

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

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

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

Our Family Day Care Service will:

- ensure the Emergency Management Plan (EMP) is updated regularly inclusive of Emergency and Evacuation policies and procedures and copies of these are available for inspection at the FDC residence or venue at all times that the service is educating and caring for children (see Appendix 2 for further information about inclusions)
- consult with relevant authorities for guidance and advice on the management of bushfire risk and emergencies
- communicate with the educator, educator assistant, coordinator and families about bush fire preparation information and provisions
- discuss bush fire response procedures at meetings with FDC educators, Coordinators and responsible persons including decisions to pre-emptively close services on a day forecast as an extreme fire rating
- contact the local council *or* check Map of Bushfire Prone Areas to determine if the Service is located in a bush fire prone area <https://www.dfes.wa.gov.au/site/bushfire/bushfireproneareas.html>
- keep a list of FDC educators operating in bushfire at risk prone areas and have emergency contact details available at all times

- ensure a current emergency and evacuation floor plan and instructions for what to do in an emergency are clearly displayed near each exit of the FDC residence and/or approved FDC venue
- ensure FDC educators in residences and or venues, clearly understand how emergencies will be managed in collaboration with the Approved Provider to reduce any associated risks and maintain children's safety
- ensure emergency drills, including a bush fire drill and shelter-in-place on site, are practiced at least every 3 months by the FDC educator and children being educated on that day
- ensure a record is kept of each emergency evacuation drill practiced and a copy kept at the principal office
- ensure each FDC premises and FDC educators are prepared for bush fire conditions and prepared to respond quickly and appropriately during high fire danger periods
- ensure all fire safety equipment is installed and maintained regularly- (fire extinguishers, fire panels, smoke detectors, long hoses with nozzles, buckets etc. See: Appendix 1: Fire and Safety Equipment).
- identify circumstances when the decision is made for one or more FDC residences or approved FDC venues to not operate
- contact families to organise alternative care if a service needs to close due to potential fire risk
- ensure local emergency services have current contact details, including mobile number for emergency contact after hours for each FDC educator/residence
- ensure a clear and effective communication procedure during an emergency is implemented
- organise and communicate with off-site evacuation sites about emergency arrangements
- ensure the Fire Danger Rating (FDR) is checked daily through Australian Government Bureau of Meteorology <http://www.bom.gov.au/?ref=hdr> or Emergency WA <https://www.emergency.wa.gov.au/#firedangerratings>
- ensure FDC educators regularly clean gutters at their residence/venue so they are free from dry leaves and other debris
- ensure FDC educators keep emergency exits clear and accessible at all times
- ensure FDC educators keep accurate records of attendance of children, visitors and volunteers each day
- ensure educators keep a current list of emergency contact numbers near the phone and in the contacts of their mobile phone
- monitor the bush fire situation when the rating is above **High** through internet or radio
- be prepared for closures of FDC services on days when **Catastrophic Fire Danger Rating (FDR)** is issued
- notify the Regulatory Authority in the event of any closures or damage to premises within 24 hours or as soon as possible via the NQA ITS or email if there is no access to phones.

Families Day Care Educators and Educator Assistants will:

- conduct a risk assessment to prepare emergency evacuation procedures for bush fires considering:
 - prevention measures the FDC educator will take prior and during the bush fire period
 - procedures to be taken when there is a bush fire in the local district including onsite (shelter-in-place) and offsite evacuation procedures
 - response measures the FDC educator will take if confronted with a bush fire hazard or emergency
 - identified evacuation assembly areas and evacuation routes (it is recommended that the plan contains two external (off-site) evacuation assembly areas if practical to do so)
 - emergency communication arrangements in case of power outages- designated landline, Emergency Positioning Indicator Radio Beacon (EPIRB), satellite phone, designated mobile phone
 - whether assistance will be required to evacuate children at the residence or venue (including non-ambulant children and infants, consideration for multi-story homes)
 - when evacuating children, if the weather is hot, do the children need footwear?
 - what to do with sleeping children, babies or children with additional needs during the evacuation?
 - what mechanisms are in place to ensure the transfer of real-time information, such as weather forecasts, bush fire activity, site closures and emergency operations
 - how parents will know where to locate their child if evacuated
 - procedures to ensure children are only released to persons authorised to collect them
 - mechanisms to ensure visitors, other residents in home and contractors are aware of the service's emergency response procedures
 - location of flammable substances/materials (gas storage bottles and fixed tanks)- ensure these are secured and controlled
- examine the grounds of their residence/venue during daily indoor and outdoor safety checks to ensure flammable and/or combustible materials (e.g., dead leaves and bark, chemicals) have been removed
- ensure trees are trimmed to 2m from the FDC residence (best practice recommendation)
- ensure they are familiar with the daily Fire Danger Rating (FDR)
- conduct an 'emergency first aid kit / backpack audit' to ensure emergency contact information and supplies are current- *(See Appendix 3 for suggestions of inclusions)*
- ensure a fire alarm is installed and checked annually
- keep accurate attendance records of children in care each day

- ensure they have ready access to an operating telephone or other similar means of communication to enable immediate communication to and from parents and emergency services at all times education and care is provided
- ensure all contact details of parents/carers and emergency contact details are up to date and a record is provided to the Approved Provider/Responsible Person of the FDC Service
- ensure educator assistants and family members residing in the home are familiar and confident with emergency evacuation policies and procedures and aware of designated assembly areas
- ensure these policies are available for inspection at all times the FDC service is educating and caring for children
- ensure emergency exits are clearly indicated
- eliminate all papers around the FDC residence, including artwork, posters, displays and emptying garbage bins if advised that bush fires are in the local district
- cancel any outdoor activities on days where air quality due to bushfire smoke may cause harm to children [see Bush Fire Smoke Procedure]
- keep up to date with professional development and training about bush fires and emergency evacuation.
- Educator must ensure to do fire drill training annually and get professional to check Fire Extinguisher/Fire Blankets (NUR)

Educator must ensure to do fire drill training every 3 months or whenever new child enrolled in to the care and another best option is to make a part of curriculum every month to make sure children become more knowledgeable what to do in case of emergency (NUR)

EVACUATION PROCEDURE

In the event of a bush fire emergency, notification to evacuate may be issued by emergency services or the Approved Provider. FDC educators will monitor the Fire Danger Ratings daily and take appropriate actions to ensure the safety and wellbeing of children at all times.

Fires in local area- Watch and Act

Conditions are changing and action to protect the safety of children and adults at the service is required.

The educator will:

- contact the Approved Provider and request assistance in contacting all parents/guardians or emergency contacts to request them to collect their child from the FDC residence immediately
- move children to indoor play
- close windows and doors
- turn off any gas cylinders
- gather children's personal items into bags
- gather emergency evacuation bag (collect sign in book/record, medication, visitor sign in sheets)

- ensure all exits are clear
- alert family members in the residence of possible evacuation
- keep in contact with the Approved Provider (notification will need to be made to the regulatory authority within 24 hours of the serious incident)

Emergency Warning

This is the highest level of Bush Fire Alert. Immediate action is required.

- Evacuate immediately (this may be directed by emergency services or the Approved Provider)
- inform children and visitors and other residents of the FDC residence to evacuate as per Evacuation Procedures/Policy
- request assistance to move infants or children with disabilities from other adults in the home/ educator assistant or emergency services if unable to complete the evacuation on their own
- check that all children and adults registered in attendance book are accounted for
- once children are safely evacuated, administer first aid if required
- call 000 and provide name, address and nearest cross street, mobile phone contact number, number of children evacuating
- notify the Approved Provider/Coordinator of the evacuation (only if children's safety is not compromised)
- if the identified evacuation assembly area is not accessible, identify an alternative area where children and other adults will be safe. Communicate with emergency services to confirm your assembly area
- remain calm and reassure children
- once emergency services arrive, request assistance with supervision and contact parents/emergency contacts
- ensure that no family members, children, or visitors leave the evacuation area until the considered safe by emergency services
- maintain attendance register with parent signatures when children are collected from evacuation area
- in the event of a fire within or near the residence resulting in damaged phone lines, the educator may evacuate the children and seek assistance from neighbouring residents and / or use the mobile phone as per the Emergency Evacuation Plan
- continue to check the building/evacuation area and surrounds for any other danger
- following the bushfire incident, review the evacuation procedure and Emergency Management Plan
- debrief with the approved provider/coordinator

- complete an *Emergency Evacuation Incident Report* and an *Incident, Injury, Trauma and Illness Record*. The approved provider will make a notification of a serious incident to a regulatory authority (within 24 hours) through the [NQA IT System](#)

STATE SPECIFICATIONS

WESTERN AUSTRALIA
<ul style="list-style-type: none"> • The Department of Fire and Emergency Services provides guidelines for preparing a Bushfire Risk Management Plan used to identify at risk locations including Early Childhood Services: https://www.dfes.wa.gov.au/waemergencyandriskmanagement/obrm/Documents/OBRM-Guidelines-for-Preparing-a-Bushfire-Risk-Management.pdf • Department of Education The Principal's Guide to Bushfire This document is designed to assist schools with the development of a bushfire risk management strategy (updated July 2021) • Fire Danger Rating: https://www.emergency.wa.gov.au/#firedangerratings

RESOURCES

ACECQA [Managing Emergency Situations in Early Education and Care Services](#)

[Australian Government Department of Education, Skills and Employment](#) Emergency and nature [Be You](#) resources- Bushfires and mental health

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

Department of Planning, Lands and Heritage, Government of Western Australia - A Guide to Developing a Bushfire Emergency Evacuation Plan <https://ecru.createsend1.com/t/d-i-atkhyuk-l-j/>

Department of Fire and Emergency Services, Government of Western Australia <https://www.dfes.wa.gov.au/site/index.html>

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

NSW Department of Education [Developing your Service's Emergency Management Plan and Procedures](#) (updated April 2022)

NSW Department of Education [Service site bushfire grassfire readiness checklist](#)

SOURCE

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

Australian Government: Geoscience Australia. Community safety: Bushfire:

<http://www.ga.gov.au/scientific-topics/hazards/bushfire>

Community Early Learning Australia. [Bushfire advice for children's services:](#)

<https://www.cela.org.au/2018/01/07/bushfire-advice-for-childrens-services/>

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

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

Government of Western Australia. Department of Planning, Lands and Heritage, A Guide to Developing a Bushfire Emergency Evacuation Plan <https://ecru.createsend1.com/t/d-i-atkhyuk-l-j/>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	<ul style="list-style-type: none"> New policy developed for Family Day Care Services located in Western Australia 		

APPENDIX 1

Management must ensure emergency equipment and maintenance testing is registered and kept up to date. All fire equipment must be clearly identified and operating instructions displayed.

2.33.1 FIRE AND SAFETY EQUIPMENT

	✓
Portable fire extinguisher/s	
Fire blanket/s in kitchen and cooking areas	
Fire hose and reels	
Fire hydrants	
Water storage tank – check connections for fire appliances	
Fixed water pressure pumps	
Emergency generator/power system	
Water supplies and equipment	
Sprinklers (including any roof mounted and irrigation systems)	
Alarms	

Fire blankets	
Communication systems	
Other e.g., Roller shutters on shelter-in-place location	

(NSW Department of Education May 2022)

APPENDIX 2

The purpose of the Emergency Management Plan is to ensure the health, safety and wellbeing of all staff, children and visitors at our Service in the event of an emergency.

EMERGENCY MANAGEMENT PLAN inclusions

- Name and address of the FDC service/ residence/ venue
- Early childhood service facility profile (description of the FDC service)
- Emergency contact details (including designated mobile phone number)
- Incident Management Team structure and contact details and responsibilities (Approved provider/coordinator/educators)
- Incident Management Team responsibilities- pre-emergency/during emergency/post-emergency
- Communication tree- Process for notifying, alerting and reporting emergencies
- Emergency response procedures (on-site evacuation/relocation procedure; off-site evacuation procedure; lock down procedure; lock out procedure; shelter-in-place procedure)
- Arrangements for children/students and educators/staff with additional support needs
- Parent/family emergency contact details
- Evacuation diagram and procedures including assembly points and transportation arrangement if required to evacuate
- Essential services at residence- location of hydrants and water main
- A site-specific **Risk Assessment** identifying the particular emergency and hazards, assessing the risks they present and details on how you will manage these
- For **Bush Fire Policy** the Risk Assessment will detail-
 - prevention measures to be taken prior and during the bush fire period
 - procedures to be taken when there is a bush fire in the local district
 - response measures to be taken if confronted with a bush fire hazard or emergency
- Emergency response drills schedule
- Emergency kit checklist
- Testing of equipment (smoke alarms, fire extinguishers)
- Response procedures for specific emergencies – indicate process for making decisions

- warning staff and children
- evacuation
- shelter and assembly area
- location of designated emergency exits
- location of fire hoses/extinguishers/ fire blankets
- location of first aid kits
- Recovery measures to support the return to the FDC residence/venue and routines
- Notification to Regulatory Authority
- Trauma counselling and description

APPENDIX 3

2.33.2 EMERGENCY KIT CONTENTS CHECKLIST

Use the list below as a **guide** on what is required to maintain your Emergency Kit

EMERGENCY KIT CONTENTS	✓
Small portable First Aid kit	
Copy of Bush Fire policy & Emergency Management Plan	
Copy of residence plan identifying exists from building, safe spaces to shelter and assembly points	
Emergency contact details for children	
Emergency contact details for educator/educator assistant	
Details of additional/medical needs of staff and children	
Potentially required medications (e.g. EpiPen, asthma inhaler)	
Charged mobile phone	
Phone chargers to suit any mobile phone likely to be used in an emergency	
Fully charged UHF radio (remote locations) with charger	
Portable battery powered radio	
Torch and spare batteries	
Whistle/s	
House keys	
Staff safety vests	
Bottled water and disposable cups	
Non-perishable snacks (such as biscuits/crackers, dried fruit, energy/muesli bars)	
Spare nappies, baby wipes, and gloves	
Tissues	

Sunscreen and spare hats	
Garbage bags	
Other	

2.34 CLOTHING POLICY

Children need protective, comfortable and appropriate clothing and footwear to explore their environment and participate freely in experiences. Clothing needs to protect children from injury and sun exposure whilst promoting self-help abilities. Appropriate footwear will fit a child's foot correctly and ensure comfort. Family Day Care educators will also dress to prevent injury and sun exposure and will be encouraged to dress in a professional and respectful manner, being positive role models for children.

NATIONAL QUALITY STANDARD (NQS)

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

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
168(2)(ii)	Policies and procedures are required in relation to sun protection

RELATED POLICIES

Children’s Belongings Policy Family Communication Policy Health and Safety Policy Multi-Cultural Policy Nappy Change and Toileting Policy	Respect for Children Policy Sleeping and Rest Policy Sun Safety Policy Supervision Policy
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PURPOSE

We aim to ensure the safety and comfort of all children by providing appropriate clothing guidelines for children, parents and educators utilising.

Children being clothed appropriately enables them to play without risk of sunburn and serious injury caused by inappropriate footwear or clothing. Children are more at ease, comfortable, and less anxious when they are dressed for warmth during winter or not over-dressed during summer or wearing safe footwear when climbing outdoor play equipment or participating in physical activity.

SCOPE

This policy applies to the Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Effective clothing strategies, including appropriate clothing for sun protection are important factors in ensuring a child feels safe and secure at our FDC Service.

Our Family Day Care Service will:

- ensure that a *Sun Safety Policy* is developed and reviewed regularly
- ensure that FDC educators are provided with Personal Protective Equipment (e.g., gloves, goggles etc.) as required to facilitate cleaning and protect their health and safety
- provide information for educators about suitable clothing and footwear expectations for the education and care work environment during induction
- provide information for families about suitable clothing and footwear for their child to wear at the FDC Service. This information will also be shared with families using a variety of communication strategies including newsletters, brochures, websites, and posters
- ensure FDC educators and educator assistants are aware and abide by the *Sun Safety Policy*
- ensure a culturally inclusive environment by conveying respect and understanding of families’ cultural traditions regarding clothing
- provide information to educators and staff about children’s cultural dress requirements.

Families Day Care Educators and Educator Assistants will:

- consult and communicate with families about the individual needs of children with respect to different values and beliefs associated with clothing and footwear
- consult with families about the clothing needs of children with sensory and tactile sensitivities, (free of seams, tags, buttons or textures)
- monitor children's clothing and footwear to ensure compliance with the *Sun Safety Policy* and to support the safety, comfort, and wellbeing of every child
- consider clothing and footwear needs associated with excursions or planned learning experiences and communicate clearly with families about the need for extraordinary protective clothing requirements
- provide protective clothing, such as aprons, for messy play experiences and painting. Children will be encouraged by educators to wear protective clothing during messy and water play.
- encourage children to remove shoes and heavy or excess layers of clothing during rest times to reflect the room temperature, as recommended practice by *Red Nose*
- take off children's jumpers and jackets with hoods during rest time to ensure children's safety
- encourage children to use their self-help skills where appropriate to put on and remove clothing and shoes to meet their needs. FDC educators will observe and monitor younger children to ensure their clothing and footwear is appropriate for the environment and weather conditions.
- monitor the UV rating to ensure children are dressed appropriately for the weather and are adequately protected (e.g., long sleeve shirts, appropriate footwear)
- discuss clothing with children: for example, the need to wear hats for sun protection
- model appropriate clothing: for example, wearing hats and sun safe clothing
- convey respect for children and appreciate their individuality, whilst developing their understanding of safe clothing and footwear for play and the weather
- encourage children to make choices in relation to getting dressed and the clothing they wear.
- respect children's privacy and modesty when having children change their clothes or dressing themselves, ensuring that individual and/ or cultural needs and preferences are understood and catered for
- show respect for children and appreciate their individuality by allowing them to make some decisions about the clothes they wear.
- Educator must ensure to ask parents to always put some extra cloths in child's bag and remember to check once child comes in to the care according to the weather to avoid any conflict with parents if incident happen like cloth dirty during messy play etc.(NUR)

Families will:

- communicate with FDC educators about their child's individual clothing needs- (e.g.: cultural diversity, disability, clothing sensitivity – labels or fabrics, fine motor skills)
- provide spare clothing in children's bags to allow for dirty or soiled clothing and changing weather conditions. (This includes supplying a spare set of socks, and shoes if possible)
- dress children appropriately for play and the weather, including footwear and an appropriate hat
- ensure their child is clothed in an appropriate manner which will allow them to explore and play freely and not restrict them using equipment while at play
- ensure clothing also allows easy access for toileting: i.e., elasticised trousers or track pants rather than buttons, zips, belts, etc.
- not dress their child in good/expensive clothing where there is a chance, they will get dirty or stained
- ensure children are appropriately protected from the sun - please refer to *Sun Safety Policy* for further directives on clothing and sun safe hats (bucket, broad-brimmed or legionnaire's hat)
- ensure children's clothing accommodates the weather conditions. For example, be loose and cool in summer to prevent overheating and warm enough for cold weather, including outdoor play. At all times educators will monitor children to ensure they are appropriately dressed for all weather, play experiences, rest and sleep routines.
- ensure children have appropriate footwear that enables them to play comfortably and not cause safety concerns. For example, thongs, clogs or backless shoes have a trip factor and do not allow children to use equipment safely.
- ensure all clothing and belongings are clearly labelled with the child's name (not just initials)
- be familiar with their child's clothing fabric to minimise possible allergies and reactions.

Clothing choices

Clothing is a way of expressing our culture, personality and individuality. The clothes children wear can affect the development of their independence, self-help skills and participation in play-based activities in early education and care services.

We understand that young children are developing their self-concept and individuality and may be intent on wearing particular accessories or clothing items whilst attending care. We respect their choices and encourage their independence; however, some clothing types or accessories may be dangerous and hinder their participation in physical activities. For example, dresses or skirts that have long hems may cause tripping when children attempt to use play equipment or bikes. Long necklaces, drawstrings on jumpers and long ribbons can also be hazardous to children's safety if they become caught in equipment.

We request that parents talk to their child about the choice of clothes and activities they will be involved in whilst attending Family Day Care and help them to choose clothes that will be practical.

Parents may decide to send additional clothes in their child’s bag to assist the FDC educator ensure their safety when they are participating in physical activities that require clothing to be more practical.

Special clothes/dress up

To facilitate pretend play and celebrate different cultural experiences, children may be invited to dress up according to a theme or particular cultural celebration.

The FDC educator will communicate with families to ensure all children have the opportunity to engage in these activities by wearing appropriate clothing.

When dressing their child in ‘dress up’ clothes, parents are asked to ensure their child’s footwear is appropriate for play-based learning at the FDC service and ensure clothing is sun safe.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
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 Revised National Quality Standard. (2018).
 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.).
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REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
JUNE 2021	<ul style="list-style-type: none"> • Minor edits to policy • National regulations added 	JUNE 2022
JUNE 2020	<ul style="list-style-type: none"> • information about respecting cultural diversity added • additional sections added – Clothing choices and Dress up clothes • sources checked for currency 	JUNE 2021
JUNE 2019	New policy drafted.	JUNE 2020

2.35 NUTRITION AND FOOD SAFETY POLICY

As per Education and *Care Services National Law and Regulations*, our Family Day Care Service has a nutritional and food safety policy and procedures in place to ensure quality practices relating to nutrition, food and beverages and dietary requirements are followed at all times.

Our Family Day Care Service recognises the importance of safe food handling and healthy eating to promote the growth and development of young children and is committed to supporting the healthy food and drink choices of children in our care. It is acknowledged that the early childhood setting has an important role in supporting families in healthy eating. Our FDC Service therefore recognises the importance of supporting families to provide healthy food and drink to their children.

We are committed to implementing the healthy eating key messages outlined in the Australian Dietary Guidelines and the Australian Guide to Healthy Eating. We support and promote the NSW Health initiative Munch & Move and utilise the Australian Government's *Get Up & Grow-Healthy Eating and Physical Activity for Early Childhood and Eat for Health resources*.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
79	Service providing food and beverages
80	Weekly menu
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
160	Child enrolment records to be kept by approved provider and family day care educator
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
169	Additional policies and procedures – family day care services
170	Policies and Procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Administration of First Aid Policy Bottle Safety and Preparation Policy Breastfeeding Policy Child Safe Environment Policy Control of Infectious Diseases Policy Enrolment Policy Excursions / Incursions Policy	Family Communication Policy Governance Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Multicultural Policy
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PURPOSE

Family Day Care Services are required by legislation to ensure the provision of healthy foods and drinks that meet the requirements for children according to the *Australian Dietary Guidelines*. It is essential that our FDC Service partners with families to provide education about nutrition and promote healthy eating habits for young children to positively influence their health and wellbeing. Dietary and healthy eating habits formed in the early years are shown to continue into adulthood and can reduce the risk factors associated with chronic adult conditions such as obesity, type 2 diabetes and cardiovascular disease.

Our FDC Service recognises the importance of healthy eating for the growth, development, and wellbeing of young children and is committed to promoting and supporting healthy food and drink choices for children in our care. This policy affirms our position on the provision of healthy food and drink while children are in our care and the promotion and education of healthy choices for optimum nutrition.

We believe in providing a positive eating environment that reflects dietary requirements, cultural and family values, and promotes lifelong learning for children, as we commit to implementing and embedding the healthy eating key messages outlined in the NSW Health's *Munch & Move* program into our curriculum and to support the *National Healthy Eating Guidelines for Early Childhood Settings* outlined in the *Get Up & Grow* resources.

Our Service is also committed to ensuring consistently high standards of food preparation and food storage and transportation are adhered to.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Our Family Day Care Service has a responsibility to help children to develop good food practices and approaches, by working with families and educators.

All food prepared by the approved FDC educator or families will endeavour to be consistent with the Australian Dietary Guidelines and provide children with 50% of the recommended dietary intake for all nutrients. Food will be served at various times throughout the day to cater for all children's nutritional needs.

Mealtimes reflect a relaxed and pleasant environment where educators engage in meaningful conversations with children. This assists in creating a positive and enjoyable eating environment.

Food will be prepared in accordance with the Food Safety Program. All kitchens and food preparation areas will comply with Food Standards Australia and New Zealand (FSANZ) and any relevant local jurisdictional requirements (i.e. local council registrations and inspections).

NUTRITION

Encourage and support breastfeeding and appropriate introduction of solid foods

Our Family Day Care Service and FDC educators will:

- provide a suitable place where mothers can breastfeed their babies or express breast milk

- support mothers to continue breastfeeding until babies are at least 12 months of age while offering appropriate complementary foods from around 6 months of age
- ensure the safe handling of breast milk and infant formula including transporting, storing, thawing, warming, preparing, and bottle feeding
- in consultation with families, offer cooled pre-boiled water as an additional drink from around 6 months of age
- where breastfeeding is discontinued before 12 months of age, substitute with a commercial infant formula
- always bottle-feed babies by holding baby in a semi-upright position
- ensure appropriate foods (type and texture) are introduced around 6 months of age
- adjust the texture of foods offered between 6 and 12 months of age to match the baby's developmental stage
- offer a variety of foods to babies from all the food groups
- always supervise babies while drinking and eating, ensuring safe bottle-feeding and eating practices at all times.

Promote healthy food and drinks based on the Australian guide to healthy eating and the dietary guidelines for children and adolescents.

Where food is provided by the FDC educator, we will:

- provide children with a wide variety of healthy and nutritious foods for meals and snacks including fruit and vegetables, wholegrain cereal products, dairy products, lean meats, and alternative foods high in protein
- plan and display the FDC Service menu (at least two weeks at a time) that is based on sound menu planning principles and meets 50% of the daily nutritional needs of children
- plan healthy snacks on the menu to complement what is served at mealtimes and ensure the snacks are substantial enough to meet the energy and nutrient needs of children
- vary the meals and snacks on the menu to keep children interested and to introduce children to a range of healthy food ideas
- regularly review the menu to ensure it meets best practice guidelines
- develop the menu in consultation with children, educators and families
- consult with health professionals to support the menu development including Dietitians for children with special dietary requirements such as vegetarian and vegans, dentists and speech therapists
- respect and accommodate children's cultural or religious dietary practices as requested by families

Where food is brought from home we will:

- provide information to families on the types of foods and drinks recommended for children and that are suitable for children's lunchboxes

- provide information to families on how to read the *Nutritional Information Panel* on food and drink labels
- encourage children to eat the more nutritious foods provided in their lunchbox, such as sandwiches, fruit, cheese and yoghurt, before eating any less nutritious food provided
- strongly discourage the provision of highly processed snack foods high in fat, salt, and/or sugar, and low in essential nutrients in children’s lunchboxes. Examples of these foods include sweet biscuits, some muesli bars, breakfast bars and fruit filled bars, and chips.
- food items that should not be brought to the FDC service include confectionary (lollies, sweets, chocolate, jelly), deep fried foods (chicken nuggets, fish fingers) and sugary drinks (cordial, energy drinks).

APPROVED PROVIDER/ COORDINATOR WILL:

- ensure FDC educators and educator assistants are aware of their responsibilities and obligations under the Education and Care Services National Law and National Regulations in relation to this policy and relevant procedures to ensure awareness of safe food handling practices while promoting healthy eating
- ensure new FDC educators, educator assistants and staff are aware of food practices and procedures as outlined in this policy during induction and orientation
- ensure FDC educators have water readily available for children to drink throughout the day in both the indoor and outdoor environment
- ensure FDC Educators offer food and beverages to children regularly during the day
- ensure enrolment forms include information relating to child’s food preferences, allergies, intolerances, cultural or religious considerations or medical conditions which involve food or food practices
- consult with families on enrolment to develop individual management plans, including completing Risk Minimisation Plans for children with medical conditions involving food allergies, food intolerances and special dietary requirements as per *Medical Conditions Policy*
- ensure children’s individual dietary requirements as per enrolment information or medical condition plans are communicated to FDC educators and educator assistants as required
- ensure any changes to children’s individual dietary requirements are recorded and communicated to FDC educators and educator assistants as required
- ensure all FDC educators attend basic safe food handling training, including an appropriate Food Safety and Food Hygiene Certificate
- where food is provided by the educator, ensure FDC educators display the weekly menu in an accessible and prominent area for parents to view,

- where food is provided by the educator, ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure FDC menus are reviewed on a regular basis, every 6 months. Amendments made to each menu will be recorded
- encourage and provide opportunities for FDC Educators to undertake regular professional development to maintain and enhance their knowledge about early childhood nutrition and food safety practices

FAMILIES DAY CARE EDUCATORS/ EDUCATOR ASSISTANTS WILL:

- ensure water is readily available for children to drink throughout the day in both the indoor and outdoor environment
- be aware of children with food allergies, food intolerances, and special diets dietary requirements and consult with families and management to ensure individual management plans are developed and implemented, including completing Risk Minimisation Plans for children with medical conditions involving food as per *Medical Conditions*
- ensure young children do not have access to foods that may cause choking
- ensure all children remain seated while eating and drinking
- ensure all children are always supervised children whilst eating and drinking
- participate in regular professional development to maintain and enhance knowledge about early childhood nutrition and food safety practices
- participate in safe food handling training on a regular basis, every 2 year (NUR) months, including the completion of an appropriate Food Safety and Food Hygiene Certificate
- consult with children, families, coordinators and dietitians regarding the review of the service menu
- participate in opportunities to undertake regular professional development to maintain and enhance their knowledge about early childhood nutrition
- follow the guidelines for serving different types of food and the serving sizes in the guidelines
- use the Australian Government “eat for health” calculator- www.eatforhealth.gov.au
- display nutritional information for families and keep them regularly updated
- ensure the weekly menu is displayed in an accessible and prominent area for parents to view(NUR) wsd
- ensure the weekly menu is accurate and describes the food and beverages provided each day of the week
- ensure food is presented attractively
- ensure infants are fed individually
- ensure age and developmentally appropriate utensils and furniture are provided for each child
- not allow food to be used as a form of punishment or to be used as a reward or bribe

- not allow the children to be force fed or being required to eat food they do not like or more than they want to eat
- encourage toddlers to be independent and develop social skills at mealtimes
- establish healthy eating habits in the children by incorporating nutritional information into our program
- talk to families about their child’s food intake and voice any concerns about their child’s eating
- encourage parents to the best of our ability to continue our healthy eating message in their homes
- ensure pets or animals are not present within the kitchen or food preparation areas.

FOOD HYGIENE

Food poisoning is caused by bacteria, viruses, or other toxins being present in food and can cause extremely unpleasant symptoms such as diarrhoea, vomiting, stomach cramps, and fevers. Children under five years of age are considered a high-risk group as their immune systems are still developing and they produce less of the stomach acid required to kill harmful bacteria than older children or adults (Foodsafety.gov, 2019).

FDC educators will strictly adhere to food hygiene standards to prevent the risk of food poisoning.

BUYING AND TRANSPORTING FOOD

Our Family Day Care Service will ensure FDC educators

- ensure food supplies have been ordered in a timely manner
- always check labels for the ‘use by’ and ‘best before’ dates, understanding that ‘use by’ dates apply to perishable foods that could potentially cause food poisoning if out of date, whilst ‘best before’ dates refer to food items with long shelf life but quality could be compromised
- avoid buying food items in damaged, swollen, leaking or dented packaging
- always check eggs: Never buy dirty or cracked eggs
- never buy any food item if unsure about its quality
- ensure fresh meat, chicken, or fish products cannot leak on to other food items
- ensure chilled, frozen, and hot food items are kept out of the ‘danger zone’ (5 °C to 60 °C) on the trip back to the residence by:
 - not getting chilled frozen, or hot food items until the end of the shopping
 - placing these items in an insulated shopping bag or cooler
 - immediately unpacking and storing these items.

STORING FOOD

Family Day Care educators will:

- ensure the refrigerator and freezer has a thermometer and that the refrigerator is maintained at 5 °C or below and the freezer is maintained at -17 °C or below.
- ensure fridge and freezer temperatures are checked regularly or daily
- store raw foods below cooked foods in the refrigerator to avoid cross contamination by foods dripping onto other foods.
- ensure fresh meat is not stored in the fridge for more than 3 days
- ensure that all foods stored in the refrigerator are stored in strong food-safe containers with either a tight-fitting lid, or tightly applied plastic wrap or foil
- ensure that all foods not stored in their original packaging are labelled with:
 - the name of the food
 - the 'use by' date
 - the date the food was opened
 - details of any allergens present in the food.
- transfer the contents of opened cans into appropriate containers
- ensure all bottles and jars are refrigerated after opening
- place 'left-over' hot food in an appropriate sealed container in the refrigerator as soon as the steam has stopped rising. Food can be cooled quickly to this point by placing in smaller quantities in shallow containers, reducing the amount of time sitting in the 'danger zone'.
- not reuse disposable containers (e.g., Chinese food containers)
- store dry foods in labelled and sealed, air-tight containers if not in original packaging
- store dry foods in cupboards or if in a walk-in pantry, on shelving no lower than 30cm from the floor
- not place anything on the floor of a walk-in pantry (as containers of any type create easy access to shelves for mice and rats)
- store bulk dry foods only in food-safe and airtight containers
- use the FIFO (first in, first out) rule for all foods (dry, chilled, and frozen) to ensure rotation of stock so that older stock is used first
- store cleaning supplies and chemicals separate to food items
- ensure breastmilk or infant formula is stored within the main section of the fridge and clearly labelled with the child's name and date of preparation.

PREPARING AND SERVING FOOD

Family Day Care educators will:

- ensure that all cooked food is cooked through and reaches 75 °C

- ensure that cooked food is served promptly, or
- use a thermometer to ensure that hot food is maintained at above 60 °C until ready to serve.
- ensure that prepared cold food is stored in the refrigerator maintained at below 5 °C until ready to serve.
- discard any cooked food that has been left in the 'danger zone' for two or more hours. Do not reheat.
- reheat cooked food (if required, for example for a child who was sleeping at lunch time) to a temperature of 70 °C (but only ever reheat once. Discard if the food is not eaten after being reheated).
- keep cooked and ready-to-eat foods separate from raw foods
- ensure foods are defrosted in the fridge or microwave
- wash fruit and vegetables thoroughly under clean running water before preparation
- ensure unused washed fruit or vegetables are thoroughly dry before returning to storage
- ensure food that has been dropped on the floor is immediately discarded
- thoroughly clean kitchen utensils and equipment between using with different foods and/or between different tasks
- avoid cross-contamination by ensuring that separate knives and utensils are used for different foods
- avoid cross-contamination by ensuring that colour-coded cutting boards are used (note that it doesn't matter which colour you use for which food providing signs are displayed to alert all staff).

Common colours are:

- Blue: raw fish/seafood
 - Green: fruit and vegetables
 - Red: raw meat
 - Brown: cooked meat
 - Yellow: raw poultry
 - White: bakery and dairy
- ensure that gloves are changed between handling different foods or changing tasks
 - ensure ingredient labels are read carefully when preparing food for children with food allergies or intolerances
 - ensure that food allergies and intolerances are catered for by using separate easily identifiable cutting boards, utensils, and kitchen equipment (e.g., using a colour code, or food-safe permanent marker).
 - ensure FDC educator assistants are aware of children who have severe allergic reactions to certain foods as per ASCIA Action Plans
 - ensure that children with food allergies and/or intolerances are served their meals and snacks individually on an easily identifiable plate (e.g., different colour), and that food is securely covered with plastic wrap until received by the child to prevent possible cross-contamination

- ensure left-over food is stored immediately in the fridge or thrown away
- ensure the safe handling of breastmilk, including during transportation, storage, thawing, warming and during preparation

CLEANING

Our Family Day Care educators will:

- ensure that food preparation areas and surfaces are cleaned both before, after, and during any food preparation
- ensure that all cooking and serving utensils are cleaned and sanitised before use
- ensure that all dishwashing sponges, brushes, and scourers are cleaned after each use and allowed to air dry or placed in the dishwasher
- ensure the food storage area is clean, ventilated, dry, pest free, and not in direct sunlight
- ensure the refrigerator and freezer is cleaned regularly and door seals checked and replaced if not in good repair
- prevent pest infestations by cleaning spills as quickly as possible and ensuring rubbish and food scraps are disposed of frequently
- ensure that the floor mop is thoroughly cleaned and air dried after each use
- replace any cleaning equipment that shows signs of wear or permanent soiling.

PERSONAL HYGIENE FOR FOOD HANDLERS

Our Family Day Care educators will ensure:

- clean clothing is worn such as an apron
- long hair is tied back or covered with a net
- hand and wrist jewellery are not worn while preparing food (e.g., rings and bracelets)
- nails are kept short and clean, and no nail polish is worn (as it can chip into food and hide dirt under the nails)
- strict hand-washing hygiene is adhered to, including washing hands each time they return to the kitchen before continuing with food preparation duties
- wounds or cuts are covered with a brightly coloured, waterproof dressing (that will easily be seen if it falls off), and gloves will be worn over any dressings

Family Day Care educators will:

- ensure gloves (or food tongs) are used when handling 'ready to eat' foods
- ensure children wash and dry their hands (using soap, running water, and single use disposable towels or individual hand towels) before handling food or eating meals and snacks

- ensure food is stored and served at safe temperatures (below 5°C or above 60°C), with consideration to the safe eating temperature requirements of children
- ensure separate cutting boards are used for raw meat and chicken, fruit and vegetables, and utensils and hands are washed before touching other foods
- discourage children from handling other children’s food and utensils
- attend relevant training courses when requested by the FDC Service.

CREATING A POSITIVE LEARNING ENVIRONMENT

Family Day Care educators will:

- sit with the children at meal and snack times to role-model healthy food and drink choices and actively engage children in conversations about the food and drink provided
- choose water as a preferred drink
- endeavour to recognise, nurture and celebrate the dietary differences of children from culturally and linguistically diverse backgrounds
- create a relaxed atmosphere at mealtimes where children have enough time to eat and enjoy their food as well as enjoying the social interactions with educators and other children
- encourage older toddlers and pre-schoolers to assist to set and clear the table and serve their own food and drink, providing opportunities for them to develop independence and self-esteem while promoting children’s agency and decision-making
- respect each child’s appetite. If a child is not hungry or is satisfied, do not insist he/she eats
- be patient with messy or slow eaters
- encourage children to try different foods but do not force them to eat
- not use food as a reward or withhold food from children for disciplinary purposes
- role-model and discuss safe food handling with children

FAMILY DAY CARE SERVICE PROGRAM

Our FDC educators will:

- foster awareness and understanding of healthy food and drink choices through including in the children’s program a range of learning experiences encouraging children’s healthy eating
- encourage children to participate in a variety of ‘hands-on’ food preparation experiences
- provide opportunities for children to engage in discovery learning and discussion about healthy food and drink choices
- embed the importance of healthy eating and physical activity in everyday activities and experiences.

Cooking with children

Cooking experiences may sometimes be carried out with the children as a part of the educational program. On these occasions participating educators will be vigilant to ensure that the experience remains safe, and relevant food hygiene practices are adhered to.

COMMUNICATING WITH FAMILIES

Our Family Day Care Service and FDC educators will:

- provide a copy of the *Nutrition and Food Safety Policy* to all families upon orientation at the FDC Service
- provide opportunities for families to contribute to the review and development of the policy
- request that details of any food allergies or intolerances or specific dietary requirements be provided to the FDC Service and FDC educator, and work in partnership with families to develop an appropriate response so that children's individual dietary needs are met
- communicate regularly with families about food and nutrition related experiences and provide up to date information to assist families to provide healthy food choices at home
- communicate regularly with families and provide information and advice on appropriate food and drink to be included in children's lunchboxes. This information may be provided to families in a variety of ways including factsheets, newsletters, during orientation, information sessions and informal discussion.
- discuss discretionary choices- (food and beverages which are not necessary as part of a balanced diet) with families and if necessary, the FDC educator may remove items from children's lunch boxes. Alternative healthy food will be offered to children.

SOURCE

Australian Breast-Feeding Association Guidelines: <https://www.breastfeeding.asn.au/>

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

Australian Children's Education & Care Quality Authority. (2021). *Nutrition, food and beverages, dietary requirements Policy Guidelines*

Australian Government Department of Education, Skills and Employment. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).

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

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

Food Act 2003

Food Regulation 2015

Food Safety Standards (Australia only). (2015):

<http://www.foodstandards.gov.au/industry/safetystandards/Pages/default.aspx>

Food Standards Australia and New Zealand Act 1991

Food Standards Australia New Zealand. (2016). *Safe Food Australia – A guide to the food safety standard* (3rd Ed.):

<http://www.foodstandards.gov.au/publications/Pages/safefoodaustralia3rd16.aspx>

Food Standards Australia New Zealand: <http://www.foodstandards.gov.au/Pages/default.aspx>

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

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

National Health and Medical Research Council. Australian Dietary Guidelines 2013):

<https://www.nhmrc.gov.au/about-us/publications/australian-dietary-guidelines>

National Health and Medical Research Council. Department of Health and Ageing. Infant Feeding Guidelines. (2013):

https://www.eatforhealth.gov.au/sites/default/files/files/the_guidelines/n56b_infant_feeding_summary_130808.pdf

National Health and Medical Research Council. Eat for health: <https://www.eatforhealth.gov.au/>

NSW Food Authority: <http://www.foodauthority.nsw.gov.au/>

NSW Government. Healthy Kids. (2019). Munch and Move: <https://www.healthykids.nsw.gov.au/campaigns-programs/about-munch-move.aspx>

Revised National Quality Standard. (2018).

The Australian Dental Association: <https://www.ada.org.au/Home>

The Department of Health. Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood – Staff/Carers

Book: [http://www.health.gov.au/resources/collections/get-up-grow-resource-](http://www.health.gov.au/resources/collections/get-up-grow-resource-collection?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation)

[collection?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation](http://www.health.gov.au/resources/collections/get-up-grow-resource-collection?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation)

Victoria State Government Education and Training Nutrition Australia *Healthy eating in the National Quality*

Standard A guide for early childhood education and care services

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2022
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA Nutrition, Food and Beverages, Dietary Requirements Policy Guidelines (August 2021) Additional sections added for AP, Management, NS and Educator and food handlers additional related regulations and related policies added 		MAY 2022
MAY 2021	<ul style="list-style-type: none"> minor editing inclusion of cultural or religious dietary practices sources checked for currency 		MAY 2022
MAY 2020	minor additions- discretionary foods, online shopping addition of health professional's information to ensure best practice sources checked for currency		MAY 2021

MAY 2019	<p>Food hygiene section added, comprising of:</p> <ul style="list-style-type: none"> - Buying and transporting food - Storing food - Preparing and serving food - Cleaning - Personal hygiene for food handlers <p>Heading added to existing information – ‘All staff handling food will:’</p> <p>New section added: Cooking with Children</p> <p>Irrelevant points deleted</p> <p>Additional information inserted into existing points (highlighted)</p> <p>New source added</p>	MAY 2020
MAY 2018	<p>Terminology changed to be specific to FDC services.</p> <p>Additional information added to points.</p> <p>Sources/references corrected, updated, and alphabetised.</p>	MAY 2019
DECEMBER 2017	<p>Updated policy to comply with changes to the National Quality Standard and National Regulations</p>	MAY 2018
MAY 2017	<p>Policy updated to comply with Family Day Care Regulations</p>	MAY 2018

2.36 UNEXPECTED DEATH OF A CHILD AT A SERVICE POLICY

The unexpected death of a child at a Family Day Care Service is a traumatic event and the impact on Family Day Care educators, children and families can cause emotional turmoil, which can overwhelm usual coping skills. A policy providing comprehensive procedures is therefore crucial to ensure a coordinated response and ensure the mandatory reporting requirements to the regulatory authorities are followed.

As a result of the suddenness of such an event, well-trained and experienced staff can experience strong emotions and traumatic stress responses. The role of our FDC Service is to help restore a sense of safety for all children, educators, and families as soon as possible following a traumatic event.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		

7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
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EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
Sec. 174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
176	Time to notify certain information to Regulatory Authority
183 (C)	Storage of records and other document The records must be kept- (c) if the record relates to the death of a child while being educated and cared for by the education and care service or that may have occurred as result of an incident while being educated and cared for, until the end of 7 years after the death.

RELATED POLICIES

Administration of First Aid Policy	Medical Conditions Policy
Administration of Medication Policy	Road Safety Policy
Anaphylaxis Management Policy	Safe Storage of Hazardous Substances Policy
Asthma Management Policy	Sick Children Policy
Child Protection Policy	Sleep and Rest Policy
Epilepsy Policy	Unexpected Death of a Staff Member at a Service
Health and Safety Policy	Policy
Incident, Injury, Trauma and Illness Policy	Water Safety Policy

PURPOSE

Our Family Day Care Service will ensure that the Approved Provider, Coordinator and FDC educators and educator assistants follow the procedures and principles within this policy and that immediate and appropriate action is taken to notify relevant authorities in the event of the death of a child whilst at the Service. There are a number of legal requirements to adhere to in the tragic event of the death of a child at a Service as outlined below.

SCOPE

This policy applies to **children, families**, Approved Provider, **Nominated Supervisor**, Coordinator, educators and educator assistants, **students, volunteers and visitors** of the Family Day Care Service.

SERIOUS INCIDENTS

Regulation 12 defines a serious incident involving the death of a child as:

- (a) The death of a child –
 - I. while that child is being educated and cared for by an education and care service, or

- II. following an incident occurring while that child was being educated and cared for by an education and care service.

NOTIFICATION OF A SERIOUS INCIDENT

Under the National Law and Regulations [Section 174(2) (a) and Regulation 176 (2) (a)], the Approved Provider must notify the regulatory authorities within **24** hours of any serious incidents. This must be completed by logging into the [National Quality Agenda IT System \(NQA IT System\)](#).

KEEPING CHILDREN'S RECORDS

In the event of the death of a child whilst being cared for at the FDC Service, records must be kept for 7 years from the date of the child's death. [Regulation 183 (c)]

INITIAL ACTION AND IMPLEMENTATION OF POLICY

THE FAMILY DAY CARE EDUCATOR OR EDUCATOR ASSISTANT WILL:

Ensure that immediate and appropriate action is taken in the event of the death of a child whilst at the Family Day Care Service by following and implementing the following procedures:

- assess the situation as per service and First Aid procedures for any immediate danger to other children and/or staff or visitors
- provide immediate First Aid and/or CPR in accordance with current First Aid training
- call Emergency Services immediately requesting an ambulance
- call the parents/guardian of the child and arrange to meet at the hospital
- the FDC Service must not advise parents of the death of their child: Medical staff will advise families of the situation
- notify the Approved Provider
- notify Regulatory Authorities including the Police Department
- complete in detail the Service's *Incident, injury, trauma and illness* form (in addition to notifying ACECQA via the NQA IT System **within 24 hours** with assistance from Approved Provider)
- contact their insurance company
- ensure all evidence is preserved
- maintain accurate and detailed record keeping
- provide professional and sensitive communication with families of the FDC Service.
- Note: Educator will not provide care to the enrolled children after enrolled hours of care without notifying to the service nsw

THE APPROVED PROVIDER/COORDINATOR WILL:

- attend the FDC educator's residence/ or approved venue to provide assistance and support

- log the incident on the NQA TI System, attaching incident form and evidence
<https://www.acecqa.gov.au/resources/national-quality-agenda-it-system>
- ensure that parents, families, children and educators receive adequate and appropriate post-incident support
- demonstrate sensitivity, open mindedness and a balanced approach
- recognise and support cultural needs
- ensure all evidence is preserved
- maintain accurate and detailed record keeping
- contact their legal representative for support and direction
- establish protocols for Family Day Care Educators and their family members to discuss the traumatic event
- advise all staff associated with all the FDC Service of social media protocol for the event
- provide professional and sensitive communication with families of the FDC Service
- engage the services of health care professionals (counselling and support for staff).
- cooperate on an ongoing basis with inter-agencies involved in the investigation.

CARING FOR THE WELLBEING OF EDUCATORS, CHILDREN, AND FAMILIES

Our Family Day Care Service will engage health professionals who may include child and family counsellors and psychologists to support our FDC educators and educator assistants during this profoundly difficult time. Health professionals will assist FDC educators to be sensitive and mindful of the impact such an event has had on all stakeholders. With professional guidance and support, we will encourage children to express their emotions and feelings and implement strategies to assist and guide children's process of grieving and re-engage children in learning.

Our FDC Service will provide ongoing monitoring and assistance to the FDC educator and educator assistant (if relevant) over the following months and provide support as required. FDC educators will support children's understanding of grief and loss by:

- answering questions simply and honestly
- allowing children to express their emotions and feelings
- provide appropriate comfort
- implement a range of learning experiences to express their thoughts- drawing, movement, play
- create a safe space for time alone when needed

Our Family Day Care Service will seek advice and support from health professionals to provide appropriate materials to send home to families to assist in understanding the effects of trauma on children and possible changes in behaviour following the unexpected death of a child in our Service.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Unexpected Death of a Child Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SUPPORT SERVICES

Be you 1300 224 636 www.beyou.edu.au

Beyond Blue 1300 224 636 www.beyondblue.org.au

Headspace 1800 650 890 www.headspace.org.au

Lifeline 13 11 14 www.lifeline.org.au

Kid's Help Line 1800 551 800 <https://kidshelpline.com.au>

Compassionate Friends of Victoria 1300 064 068 www.compassionatefriendsvictoria.org.au/

National Centre for Childhood Grief 1300 654 556 <https://childhoodgrief.org.au/contact-us/>

Rainbows 03 9798 7005 <https://rainbows.org>

SOURCE

Australian Centre for Grief and Bereavement: <http://www.grief.org.au>

Australian Child & Adolescent Trauma, Loss & Grief Network:

http://earlytraumagrief.anu.edu.au/files/ACATLGN_grief_and_loss.pdf

Education and Care Services National Amendment Regulations. (2017).

Education and Care National Regulations. (2011).

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

Occupational Health and Safety Act 2004.

What Do We Tell the Children When Someone Dies? http://www.adac.org.au/siteF/resources/l_children_gt.pdf

Work Health and Safety Act 2011.

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2022	NEXT REVIEW DATE	OCTOBER 2023

MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • continuous improvement/reflection section added • minor formatting edits within text • link to Western Australian Education and Care Services National Regulations added in 'Sources' • clarification regarding notification to Regulatory Authority via NQAITS within 24 hours 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> • policy reviewed as part of annual cycle • minor edits (inclusion of FDC reference) • additional support services added • sources checked for currency 	OCTOBER 2022
DECEMBER 2020	<ul style="list-style-type: none"> • Minor editing and formatting • Sources checked for currency • Page numbers inserted 	DECEMBER 2021
DECEMBER 2019	Related policies added Relevant standards and regulations added Additions to some subsections Support services added Sources checked for currency	DECEMBER 2020
DECEMBER 2018	New policy drafted	DECEMBER 2019

2.37 HAND WASHING POLICY

Having and encouraging effective hygiene practices in Family Day Care is essential for reducing the risk of infection. Helping children to develop appropriate personal hygiene habits, such as hand hygiene, will become embedded as they grow and develop. It is important for our Family Day Care educators to work with families to ensure children follow simple hygiene rules by incorporating effective hygiene strategies in both the Service and home environment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.

2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

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

RELATED POLICIES

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

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

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, and visitors of the Family Day Care Service.

IMPLEMENTATION

Infection can be spread through direct physical contact between people, airborne droplets from coughing and sneezing or from contact with surfaces and objects. Children come into contact with a number of other children and adults, toys, eating utensils, and equipment whilst being cared for in early education and care services. This high degree of physical contact with people and the environment creates a higher risk of children being exposed to and spreading infectious illnesses. Whilst it may not be possible for our approved Family Day Care services to prevent the spread of all infections, our FDC educators aim to create a hygienic environment to minimise the spread of diseases and infections.

Effective hand washing is a vital strategy in the prevention of spreading many infectious diseases. Research emphasises effective and frequent handwashing as the single most important way to reduce the spread of bacteria, germs, viruses, and parasites that may infect educators and children in early childhood services and in our general population.

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

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

To ensure the greatest level of personal hygiene our FDC educators will ensure:

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

The Nominated Supervisor/Coordinator will ensure

- FDC educators wash their hands with soap and water for at least 20 seconds regularly throughout the day
- FDC educators wash their hands
 - before and after eating and handling food
 - before and after preparing bottles for infants
 - before and after applying sunscreen or other lotions to children
 - after using the toilet
 - after wiping a child's nose
 - after blowing their own nose
 - after helping children use the toilet
 - after touching animals
 - after cleaning high touch surfaces- (tables, light switches, door handles, computers, iPads)
 - after cleaning or mopping floors
 - after changing learning environments
 - after arriving back to the residence/venue following outings
 - whenever their hands are visibly dirty (after gardening, mud play, painting)
- FDC educators adhere to effective food preparation and food handling procedures
- FDC educators wash hands before and after wearing disposable gloves when:
 - nappy changing
 - preparing food
 - administering medication
 - administering first aid
 - cleaning spills- faeces, vomit or blood
 - cleaning with disinfectant or chemicals
 - after handling garbage and/or contaminated materials (nappies and other waste products)

FDC educators will ensure:

- children are explicitly taught the correct process of hand washing
- children are carefully supervised when handwashing
- children are reminded to wash their hands frequently throughout the day
- they model effective handwashing procedures

- the required equipment and resources are easily accessible and appropriate to use- liquid soap, running water, paper towel
- information about routines and songs for hand washing are shared with families to encourage routines at home

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

Strategies FDC educators will use to encourage effective hand hygiene practice include:

- talking about the importance of hand hygiene
- talking about when hand washing is appropriate and why (in an age-appropriate manner)
- singing a song or reciting a poem/rap as a guide to how long it should take to wash hands (e.g. singing happy birthday twice is a sufficient time frame)
- using a clear visual poster with step-by-step instructions
- using positive language
- encouraging and using positive reinforcement
- ensuring equipment is accessible
- providing clear simple routines
- giving children sufficient time to practice and develop their skills
- ensuring adequate supervision and assistance is available when required
- use STEM opportunities to teach about germs and prevention (i.e.: pepper and soap experiment)

Hand Drying

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

We provide children with disposable paper towel/**warm air dryers** to ensure effective hand hygiene. Bins are provided with foot control lids to dispose of used paper towel.

Where possible, we aim to find sustainable alternatives to paper towel that may harm the environment.

Hand washing procedure

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

Rub soap all over your hands

Rub hands together for as long as it takes to sing “Happy Birthday” twice or “Twinkle Twinkle Little Star” or “Row Row Row Your Boat”

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

Rinse the soap off your hands under running water

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

Alcohol-based hand sanitiser

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

Hand sanitiser must be kept out of reach of children at all times as it can be very dangerous if swallowed. Directions should be followed on how to use the sanitiser correctly. The effectiveness of an alcohol-based hand sanitiser to kill microorganisms or prevent their growth should be at least 60% alcohol. As per National Regulations, a safety data sheet will be kept on file for any alcohol-based hand sanitiser used in the FDC Service.

Hand sanitiser procedure

Apply liquid to the palm of one hand

Rub it all over both hands until the sanitiser dries

This takes about 20 seconds

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

Related information/ Resources

Australian Government Department of Health [Practise good hand hygiene](#)

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

Child Care Centre Desktop- Handwashing posters (see below)

NSW Department of Health [Handwashing poster](#)

Play School [Hello Friends! \(A COVID-19 Special\)](#)

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

The Wiggles: [The Handwashing Song](#)

SOURCE

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

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

Early Childhood Australia Code of Ethics. (2016).

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

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

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

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

National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).

Revised National Quality Standard. (2018).

Safe Work Australia (2020) *Early childhood education and care workers: Minimising the risk of exposure to COVID-19*

Victoria State Government Better Health Channel [Handwashing-why it's important](#)

Victoria State Government Health and safety advice for early childhood education and care services in the context of coronavirus (COVID-19). 2020

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JUNE 2021	<ul style="list-style-type: none"> • minor edits • sources checked and revised where required 	JUNE 2022	
MAY 2020	<ul style="list-style-type: none"> • Major rewrite of the policy to incorporate Department of Health- AHPPC recommendations • Related information and resources added • Addition of alcohol-based sanitiser information • Procedure of handwashing and hand rub added • Sample posters included in policy 	JUNE 2021	
JUNE 2019	<ul style="list-style-type: none"> • Terminology changed to be specific to FDC services. • New NQS point added. • Some grammar, punctuation and spelling edited. • Sources/references added and alphabetised. • Minor formatting for consistency throughout policy. • 'Related policies' alphabetised. 	JUNE 2020	

JUNE 2018	<ul style="list-style-type: none"> New policy created to comply with Regulations and Health and Safety Requirements 	JUNE 2019
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With soap for at least 20 seconds or the time it takes to sing **Twinkle Twinkle Little Star**



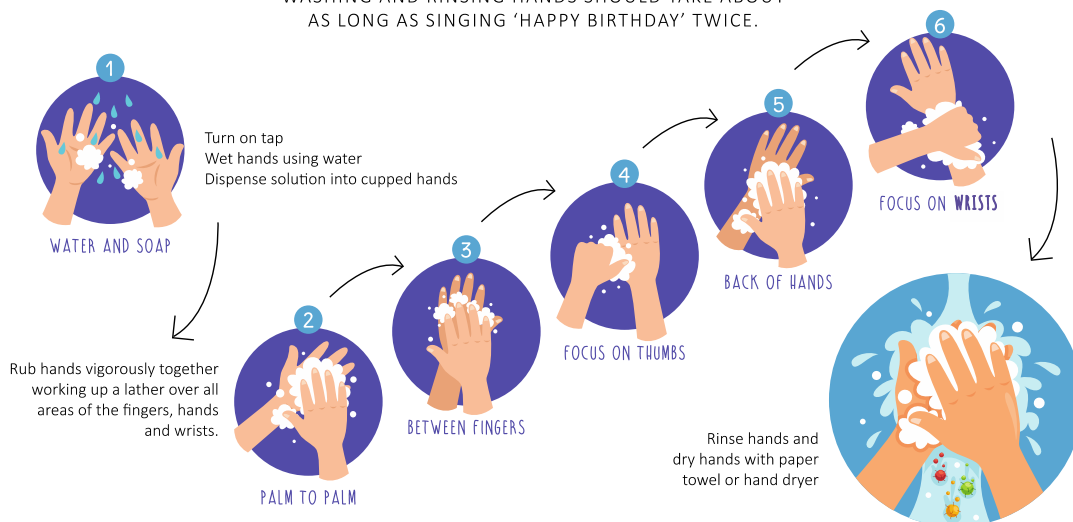
HOW TO WASH YOUR HANDS CORRECTLY

Get your hands wet in clean water. Put soap on your hands and make suds. Rub, rub, rub your soapy hands together. Clean your palms, the back of your hands, and between your fingers. Don't forget to clean under your nails. Nails can trap dirt and germs. Rinse. Hold your hands under clean, running water. Rub them to rinse them fully.



WASH YOUR HANDS

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



Childcare Centre Desktop ©2019 – Hand Washing Procedure

child care CENTRE DESKTOP



Sanitise your hands on entry – Thank You.

HOW TO USE SANITISER CORRECTLY

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

child care CENTRE DESKTOP

2.38 SLEEP AND REST POLICY

All children have individual sleep, rest and relaxation requirements. Our objective is to meet these needs 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 Family Day Care Service's approved residences or venues.

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.

LEGISLATIVE REQUIREMENTS/ EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
Section 165	Offence to inadequately supervise children
Section 167	Offence relating to protection of children from harm and hazard
81	Sleep and Rest
82	Tobacco, drug and alcohol-free environment
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
107	Space requirements-indoor space
110	Ventilation and natural light

115	Premises designed to facilitate supervision
116	Assessments of family day care residences and approved family day care venues
166	Children not to be left alone with visitors
168	Education and Care Services must have policies and procedures
168 (2)(a)(v)	Sleep and rest for children
169	Additional policies and procedures-family day care
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

[please check with your individual state/territory relevant legislation if applicable]

RELATED POLICIES

Dental Health Policy Family Communication Policy Furniture and Equipment Safety Policy Health and Safety Policy Interactions with Children, Families and Staff Policy	Physical Environment Policy Respect for Children Policy Tobacco, Drug and Alcohol-Free Policy Work, Health and Safety Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for children’s sleep and rest. Our *Sleep and Rest Policy* will assist management and FDC educators ensure that all children have appropriate opportunities to sleep, rest and relax in accordance with their individual needs.

Our Family Day Care educators 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). Our policy sets out quality practice and is informed by recognised and evidence-based principles. Safe Sleep practices are informed by Red Nose and guidance from ACEQCA.

If a family's beliefs and requests are against current recommended evidence-based guidelines, our FDC educators will need to determine if there are exceptional circumstances that allow for alternate practices. We will only approve an alternative practice if the FDC educator and Nominated Supervisor is provided with written advice from, and the contact details of a registered medical practitioner accompanied by a risk assessment and risk minimisation plan for individual children.

We have a duty of care to ensure children are provided with a high level of safety when sleeping and resting and every reasonable precaution is taken to protect them from harm and hazard. In meeting the Service's duty of care, it is a requirement that all educators and educator assistants implement and adhere to this policy to ensure we respect and cater for each child's specific needs.

SCOPE

This policy applies to the Educators, Educator Assistants, families, and children of the Family Day Care Service.

IMPLEMENTATION

'Children have different sleep, rest and relaxation needs. Children of the same age can have different sleep patterns, and FDC educators need to consider these when providing education and care. As per Standard 2.1 (Element 2.1.1) of the National Quality Standard, each child's comfort must be provided for and there must be appropriate opportunities to meet each child's sleep, rest and relaxation needs.'

(ACECQA)

Our FDC Service defines 'rest' as a period of inactivity, solitude, calmness, or tranquillity, and can include a child being in a state of sleep. Considering the busy and energetic nature of a child's day, we feel that it is important for children to participate in a quiet/rest period during the day in order to rest, relax, and recharge their body. Effective rest strategies are important factors in ensuring a child feels secure and safe in an early childhood environment.

Our FDC educators 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.

Approved Provider/Management will ensure:

- all nominated supervisors, coordinators, FDC educators and educator assistants are provided with a copy of this policy as part of their induction program
- nominated supervisors, coordinators, FDC educators, and educator assistants follow the policy and procedures
- opportunities are provided to all employed and engaged FDC educators and educator assistants to participate in Red Nose professional training
- sleep and rest environments in FDC residences/venues will be safe and free from hazards including cigarette and tobacco smoke
- safe sleep practices are documented and shared with families
- information is provided to parents and families about Safe Sleep practices (see [Red Nose](#))

Family Day Care Educators will ensure:

- they have a thorough understanding of the service's policy and practices and embed practices to support safe sleep into everyday practice
- reasonable steps are taken to ensure that the needs for sleep and rest of children being educated and cared for are met, having regard to the ages, developmental stages and individual needs of each child
- there are appropriate opportunities to meet each child's need for sleep, rest and relaxation including providing school aged children with comfortable spaces away from the main activity area for relaxation and quiet activities
- they respond to children's individual cues for sleep (yawning, rubbing eyes, disengagement from activities, crying etc)
- there are adequate numbers of cots and bedding available to children that meet Australian Standards
- children are only to sleep in rooms that have been safety checked as part of the FDC residence assessment process by the Approved Provider/Coordination unit. Regular safety checks of the sleep and rest environment are made, and any hazards are identified and rectified immediately
- all cots used in the FDC Service meet the current mandatory Australian Standard for Cots (AS/NZS 2172) and will carry a label to indicate this
- all portable cots used in the FDC Service meet the current mandatory Australian Standard for children's portable folding cots, AS/NZS 2195, and will carry a label to indicate this
- consultation takes place with families about children's sleep and rest needs
- they record sleep and rest patterns daily to share with families
- they are sensitive to each child's needs so that sleep and rest times are a positive experience
- sleep and rest environments will be safe and free from hazards
- areas for sleep and rest are well ventilated and have natural lighting

- the sleep and rest environment is free from cigarette or tobacco smoke
- the room temperature is monitored to ensure maximum comfort for the children
- a relaxing environment for sleeping children is created by playing relaxation music, reading stories, cultural reflection, and turning **off-down** lights
- 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
- safe sleep practices are shared with families: educators are not expected to endorse practices requested by a family, if they differ from [Red Nose](#) safe (formerly SIDS and Kids) sleeping recommendations
- that sleeping infants are closely monitored and that all sleeping children are within hearing range and observed closely. This involves checking/inspecting sleeping children at regular intervals **[insert time interval-at least once every 10 minutes]** 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. **It is recommended that FDC educators not perform administrative duties that would take their attention away from sleeping/resting children.**
- 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
- they 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 from the side of the cot (or floor mattress/toddler bed)
- a record is maintained recording the time and observation of each physical check immediately after checks are made on the **Safe Sleep Record**
- they assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required
 - factors to be considered may include:
 - age of child
 - medical conditions (colds, respiratory condition)
 - individual needs or health issues
- children who are sleeping or resting have their face uncovered at all times
- children are encouraged 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
- amber teething necklaces, bibs or similar must be removed prior to sleeping to minimise choking or strangulation hazards
- that beds/mattresses are clean and in good repair
- beds and mattresses are wiped over with warm water and neutral detergent or vinegar solution between each use

- bed linen is used by an individual child and is washed before use by another child
- children rest/sleep with their beds/mattresses head to toe to minimise the risk of cross infection
- they acknowledge children’s emotions, feelings and fears in regard to sleep/rest time
- develop positive relationships with children to assist in settling children confidently when sleeping and resting
- 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.
- they maintain up to date knowledge regarding safe sleeping practice and communicate this information to educator assistants and families
- provide information to parents and families about Safe Sleep practices. (see [Red Nose](#))
- they do not allow any visitor to the FDC residence or venue to be left alone with any child/children
- when sleeping at the FDC residence overnight, a child will be under the supervision of the FDC educator and have access to the FDC educator at all times.
- the area where a child/ren sleep overnight will be in part of the residence that has been assessed and approved by the FDC Service. Regular assessments are conducted at least annually
- procedures for overnight or extended care include-
 - how they will monitor the child/ren during the night
 - risks and physical safety of the child’s sleeping environment
 - access to other parts of the house during the night
 - night-time emergency evacuation procedures/lockdown

CHILDREN OF ALL AGES IN COTS

FDC Educators and Educator Assistants will:

- give bottle-fed children their bottles before going to bed
- ensure children are not put in cots or in beds with bottles as per the *Dental Health Policy*
- ensure that sleeping areas with cots have operational baby monitors on at all times
- observe children at **10-minute** intervals while they sleep. The FDC educator must go into the room/s and physically see babies breathing and **check lip and skin colour**. The educator will then officially record this on a **Sleep Check Form**.
- 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

- wooden cots should only be set at the lowest height until the baby is able to sit and then changed to ensure there is no climbing risk
- turn off wall-mounted heaters before children use the room for sleeping. Rooms/areas for sleeping 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 organised by the Service Provider
- understand that bassinets, hammocks and prams/strollers do not carry safety codes for sleep. Babies should not be left in a bassinet, hammock, or pram/stroller to sleep, as these are not safe substitutes for a cot.
- 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
- ensure cots

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:

- spaces between bars and mattress sides are as per regulations/guidelines (not more than 25mm apart)
- spaces do not pose any danger to children- arm and leg traps/finger traps
- ensuring there are no choking hazards- cords, strings, bunting
- checking all bolts and screws are tight
- cots are not painted with any paint that contains lead
- paint work of cots is not chipped when babies are teething
- there are no toys, bumpers or other objects in the cot that could cause suffocation
- ensure there are no sharp edges
- ensure the cots have high sides- from top of mattress to top side of cot should be at least 500mm.

BABIES AND TODDLERS

Recommendations sourced from ACECQA

- Babies should 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.
- Ensure any bed linen is securely tucked underneath the mattress so it cannot ride up and cover the baby’s chest or cover his/her head.
- 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.
- If being used, a dummy should be offered for all sleep periods. Dummy use should be phased out by the end of the first year of a baby’s life (in consultation with parents). If a dummy falls out of a baby’s mouth during sleep, it should not be re-inserted.
- 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.

PRE-SCHOOL AGE CHILDREN

FDC Educators and Educator Assistants 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
- introduce relaxation techniques into rest routine- use of a relaxation tape
- 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 patterns to provide information to parents/families

ADDITIONAL CONSIDERATIONS FOR CHILDREN IN CARE OUT OF CORE HOURS OR OVERNIGHT

- Commonwealth documentation requirements require the FDC educator to seek approval from the FDC Service principal/Approved Provider prior to care occurring
- strict adherence to child protection measures are required for authorised FDC educators and adult household members
- any adult household members, or adults who reside in the FDC residence, are required to hold a current Working with Children Check (or similar in each state/territory)
- adults who stay regularly but are not full time (e.g.: one or two nights a week) still require having a WWCC
- a Household Members Register form recording details of family members and regular visitors staying at the service is to be submitted to the FDC Service/FDC Coordinator
- parents must provide written authorisation before any child is permitted to sleep overnight at the FDC residence
- specific information about sleeping arrangements, including sleeping in the same room as a sibling, even if this is a normal family arrangement, must be stated in the written authorisation
- a specific room must be provided for the child/ren to sleep in (not a thoroughfare or lounge area)
- individual beds and bedding should be provided for children who regularly stay overnight
- no child is to sleep on a waterbed or beanbag
- children staying overnight will have access to the FDC educator at all times
- children are not to be taken from the premises without written authorisation of a parent or authorised nominee as stated in the child's enrolment record
- the FDC educator holds responsibility and supervision of the child/ren at all times. Supervision must not be delegated to any other family member
- a risk assessment is to be completed prior to children sleeping overnight at the FDC residence
- educators are to ensure National Regulations and service policies are followed at all times when children are cared for, including overnight care
- educators are to ensure medical condition plans are followed at all times, including when overnight care is provided

- emergency evacuation plans and procedures are to take into consideration care that may be provided outside of core hours, including overnight care
- an FDC Coordinator is to be available at all times when education and care is provided for children, including overnight care or care outside of core hours

Key terms

Term	Meaning
ACECQA- Australian Children’s Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.
Infant	A young child between the ages of birth and 12 months
Rest	A period of inactivity solitude, calmness or tranquility and can include a child being in a state of sleep.
Relaxation	Relaxation or other activity for bringing about a feeling of calm in your body and mind.
Red Nose	Red Nose is Australia’s leading authority on safe sleep and safe pregnancy advice.
Sudden and Unexpected Death in Infancy (SUDI)	A broad term used to describe the sudden and unexpected death of a baby for which the cause is not immediately obvious.
Sudden Infant Death Syndrome (SIDS)	The sudden and unexpected death of an infant under one year of age with an onset of a fatal episode occurring during sleep, that remains unexplained after a thorough investigation including performance of a complete autopsy and review of the circumstances of death and the clinical history.

SOURCE

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Early Childhood Australia Code of Ethics. (2016).

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

Education and Care Services National Regulations. (2011)

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

Guide to the National Quality Framework. (2018). (Amended 2020).

Kidsafe Family Day Care Guidelines. 7th edition. (2020).

NSW Department of Education. (2021). *Sleep and rest for children-Policy guidelines for early childhood education and care services*

Red Nose: <https://rednose.com.au/section/safe-practices>

Red Nose: <https://rednose.com.au/section/safe-sleeping>

Revised National Quality Standard. (2018).

Standards Australia – www.standards.org.au

The NSW Work Health and Safety Act 2011

The NSW Work Health and Safety Regulation 2011

REVIEW

POLICY REVIEWED BY: [NAME]	[POSITION]	[DATE]	POLICY REVIEWED BY: [NAME]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Policy reviewed and inclusions to reflect best practice added • Sources checked for currency • Additional information added for overnight or out of core hours care section 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JUNE 2021	<ul style="list-style-type: none"> • policy reviewed to align with ACECQA policy guidelines (June 2021) • Additional legislative requirements added • Additional section added 'Approved Provider/Management' • Additional section added- Key Terms 		JUNE 2022
FEBRUARY 2021	<ul style="list-style-type: none"> • reviewed to check currency of information and sources • addition Kidsafe Family Day Care Guidelines source • additional related policies added 		FEBRUARY 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> • Additional section for pre-schoolers added • Additional section for overnight stays • edits to ensure compliance to regulatory authority feedback (August 2020) 		FEBRUARY 2021
FEBRUARY 2020	<ul style="list-style-type: none"> • Referenced appropriate content to ACECQA • Sources checked for currency • Red Nose link added • Parent information added 		FEBRUARY 2021
FEBRUARY 2019	Added sections 'Children in cots' and 'Babies and toddlers' Changed the order of points for better flow. Additional points added and additional information added to points. Sources/references corrected and alphabetised.		FEBRUARY 2020
FEBRUARY 2018	Added 'related policies' section Updated safe sleep practices for babies and infants		FEBRUARY 2019
DECEMBER 2017	Modifications made to comply with current National Quality Standard and Regulations		FEBRUARY 2018

MAY 2017	Policy updated to comply with Family Day Care Regulations	FEBRUARY 2018
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2.39 CONTROL OF INFECTIOUS DISEASE POLICY

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

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

NATIONAL QUALITY STANDARD (NQS)

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

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

90	Medical conditions policy
93	Administration of medication
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
169	Additional policies and procedures for family day care service
170	Policies and procedures to be followed
172(2)(g)	a notice stating that there has been an occurrence of an infectious disease at the premises
173	Prescribed information to be displayed
175	Prescribed information to be notified to the Regulatory Authority
EDUCATION AND CARE SERVICES NATIONAL LAW	
172	Offence to fail to display prescribed information
174(2)(a)	Notification to the Regulatory Authority – (a) any serious incident at the approved education and care service

RELATED POLICIES

Administration of Medication Policy Bottle Safety and Preparation Policy Coronavirus (COVID-19) Management Policy Child Safe Environment Policy Dental Health Policy Enrolment Policy Family Communication Policy Governance Policy Hand Washing Policy Health and Safety Policy	Immunisation Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Nappy Change & Toileting Policy Physical Environment Policy Pregnancy in Early Childhood Policy Sick Children Policy Sleep and Rest Policy Work Health and Safety Policy
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PURPOSE

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

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

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure policies and procedures are in place in relation to dealing with infectious diseases. (ACECQA, August 2021). Our FDC Service is committed to minimise the spread of infectious diseases and viruses by implementing recommendations as stated in the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) developed by the Australian Government National Health and Medical Research Council and advice provided from the Australian Health Protection Principal Committee (AHPPC).

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

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

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

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

- COVID-19 Management Policy
- Immunisation Policy
- Sick Children Policy
- Incident, Illness, Accident and Trauma Policy and
- Medical Conditions Policy and
- Handwashing Policy

Preventing Infectious Diseases

Children enter education and care services when their immune systems are still developing. They have not been exposed to many common germs and therefore are susceptible to bacteria that may cause

infections. Given the close physical contact children have with other children in early childhood and care, it is very easy for infectious diseases and illnesses to spread through normal daily activities.

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

- effective hand washing hygiene
- cough and sneeze etiquette
- use of gloves
- exclusion of children when they are unwell or displaying symptoms of an infectious disease or virus
- effective environmental cleaning including toys and resources (including bedding)
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the family day care residence
- physical distancing (if recommended)
- wearing of face masks (as mandated by PHO)
- restricting parents and visitors from entering FDC residences/venues to reduce threat of spread of a community disease (e.g.: COVID-19)

2.39.1 Immunisation requirements

Immunisation is a reliable way to prevent many childhood infectious diseases. Unvaccinated children due to their parent's conscientious objection are no longer able to be enrolled in approved early childcare services. Children who cannot be fully vaccinated due to a medical condition or who are on a recognised catch-up schedule may still be enrolled upon presentation of the appropriate form signed by a medical practitioner who meets the criteria stated by the Australian Government.

Only parents of children (less than 20 years of age) who are fully immunised or are on a recognised catch-up schedule can receive Child Care Subsidy (CCS) and the Family Tax Benefit (FTB) Part A end of year supplement.

The relevant vaccinations are those under the *National Immunisation Program* (NIP), which covers the vaccines usually administered before age five. These vaccinations must be recorded on the Australian Immunisation Register (AIR).

FDC educators and other staff are highly recommended to keep up to date with all immunisations including yearly influenza vaccinations and COVID-19 vaccinations. These include vaccinations recommended by the National Health and Medical Research Council (NHMRC).

FDC educators, staff and visitors, including health professionals, volunteers, students, committee members and contractors are required to be fully vaccinated for COVID-19 under Public Health Orders.

2.39.2 Reporting Outbreaks to the Public Health Unit and Regulatory Authority

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

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

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

Family Day Care educators must notify the Approved Provider/Nominated Supervisor of any incidence of an infectious disease. This must be also be documented on an *Incident, Injury, Trauma and Illness Record*.

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

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ('German measles')

- Measles
- Pertussis ('whooping cough')
- Tetanus
- An outbreak of 2 or more people with gastrointestinal or respiratory illness.

The Approved Provider/Nominated Supervisor will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak.

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

THE APPROVED PROVIDER WILL ENSURE:

- that all information regarding the prevention and transmission of infectious diseases is sourced from a recognised health authority [Australian Government Department of Health](#)
- exclusion periods for people with infectious diseases recommended by Government Authorities are implemented for all educators, children, parents, families and visitors
- the Service implements recommendations from [Staying healthy: Preventing infectious diseases in early childhood education and care services](#) to maintain a healthy environment
- advice and recommendations from the Australian Health Protection Principal Committee (AHPPC) and Safe Work Australia will be implemented where reasonably possible
- children are protected from harm by ensuring relevant policies and procedures are followed regarding health and safety within each family day care residence/or venue
- required enrolment information, including health and immunisation records of enrolled children is collected, maintained and appropriately and securely stored
- a staff immunisation record that documents each staff member's previous infection or immunisations (including dates) is developed and maintained
- a record is kept of all educator and staff's COVID-19 vaccinations [if mandated by Public Health Orders]
- the Public Health Unit is notified in the event of an outbreak of viral gastroenteritis. Management must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2-day period. (NSW Government- Health 2019)
- infection control measures are implemented in each FDC residence or approved venue
- a notice is clearly displayed stating an occurrence of an infectious disease at the FDC residence or approved venue

Managing a positive case of COVID-19 in FDC settings

Changes may occur to how our FDC services manage positive cases of COVID-19 during 2022. We will be directed by our regulatory authority as to what procedures need to be followed to ensure the health and safety of all educators, children and families.

Any person who tests positive to COVID-19 must inform their workplace/employer, FDC educator/service and education facility (if applicable) as soon as possible. If a parent or carer attended the FDC service while infectious they must inform the educator. A positive person and any close contacts must self-isolate for a minimum of 7 days.

The Approved Provider is required to submit a notification through the National Quality Agenda IT System ([NQA ITS](#)) if a child or staff member tests positive to COVID-19 as soon as possible (within 7 days).

- management/FDC educator will determine children and visitors who were in attendance with the case during the infectious period
- any children and adults are defined as a close contact or house-like contact and are required to get tested and quarantine for 7 days [Please check with your state/territory for close contact self-isolation guidelines]
- undertake a thorough clean of the FDC residence or venue
- a decision to close the FDC service may be required if the FDC educator and/or educator assistant is required to self-isolate and all families will be notified of the closure
- privacy and confidentiality laws are adhered to- the person/s who has the confirmed case of COVID-19 will be on a 'need to know' basis only
- re-opening dates will be confirmed to the Regulatory Authority, DESE and families.

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON /FAMILY DAY CARE EDUCATOR WILL ENSURE:

- a hygienic environment is promoted and maintained
- children are supported in their understanding of health and hygiene practices throughout the daily program and routine (hand washing, hand drying, cough and sneeze etiquette)
- they are aware of relevant immunisation guidelines for children and themselves
- wall charts about immunisation are displayed in the principal office of the FDC Service and in each FDC residence and/or venue
- an Immunisation History Statement for each child is collected on enrolment and maintained regarding the child's immunisation status (AIR) and any medical conditions

- families are provided with relevant sourced materials and information on infectious diseases, health, and hygiene including:
 - the current NSW Immunisation Schedule [insert state/territory schedule]
 - exclusion guidelines in the event of a vaccine preventable illness at a FDC Service- in a residence or venue for children that are not immunised or have not yet received all their immunisations
 - advice and information regarding any infectious diseases in general and information regarding any specific infectious illnesses that are suspected/present in the approved residence/venue or FDC principal office.
- families are provided with information about an infectious disease verbally and by displaying and emailing the Infectious Diseases Notification Form and details
- information or factsheets related to the disease/infection and the necessary precautions/ exclusions required will be provided to families
- families are advised that they must alert the Service if their child is diagnosed with an Infectious Illness
- all FDC educators are mindful and maintain confidentiality of individual children’s medical circumstances
- that opportunities for educators to source pertinent up to date information from trusted sources on the prevention of infectious diseases and maintaining health and hygiene are provided
- that opportunities for staff, children, and families to have access to health professionals by organising visits/guest speakers to attend the service to confirm best practice are provided
- families are advised to keep children at home if they are unwell. If a child has been sick, they must be well for 24hrs before returning to the FDC Service. For example, if a child is absent due to illness or is sent home due to illness, they will be unable to attend the next day as a minimum. The coordinator may approve the child’s return to care if families provide a doctor’s certificate/clearance certifying that the child is no longer contagious and is in good health. Please note; it is not always possible to obtain a doctor’s certificate or clearance for suspected cases of an illness. The decision to approve a child’s return is up to the Coordinator/Family Day Care educator.
- to complete the register of *Incident, Injury, Trauma and Illness* and/or document incidents of infectious diseases no later than 24 hours of an illness or infectious disease occurring in the Service
- FDC educators who have diarrhoea or an infectious disease must not provide education and care to children for at least 48 hours. Alternative arrangements will need to be made for a relief educator during this period.
- any risk to a child or adult with complex medical needs is minimised in the event of an outbreak of an infectious disease or virus. This may require a risk assessment and decision-making regarding the suitability of attendance of the child or staff member during this time

FDC EDUCATORS WILL ENSURE:

- notification is made immediately to the Approved Provider and PHU of any confirmed case of COVID-19
- families are advised that they must alert the FDC Service if their child is diagnosed with an infectious illness
- after confirmation that a child is suffering from an infectious disease, and as soon as practical, the family of each child must be notified whilst maintaining the privacy of the ill/infectious child.

Communication may be:

- verbally
 - through a letter from the educator or Approved Provider
 - posting a note or sign at the entry of the residence
 - via electronic message- text message or email
- the Approved Provider must approve the content of the message before this is sent to families
 - information or factsheets related to the disease/infection and the necessary precautions/exclusions required will be provided to families
 - their own immunisation status is maintained, and the Approved Provider/Nominated Supervisor is advised of any updates to their immunisation status.
 - opportunities are provided for children to participate in hygiene practices, including routine opportunities, and intentional practice such as hand washing, sneezing and cough etiquette.

Infection Control Measures – Managing the outbreak

In the event of an outbreak of gastroenteritis or any other infectious illness, the FDC educator will:

- isolate a sick child/ren where possible in the residence
- contact parents/guardian to collect their unwell child/ children as soon as practicable
- depending on the symptoms of the illness, request the child has a COVID-19 test (RAT or PCR)
- immediately clean up any vomit/ faeces with paper towel
- respond to the child's needs and ensure their health and emotional needs are supported at all times
- ensure appropriate health and safety procedures are implemented when treating ill children- wear disposable gloves, face mask or other PPE if needed
- clean the child using disposable paper towels and change of clothes
- put clothing in a leak proof plastic bag for parent to take home
- remove disposable gloves

- put on new disposable gloves and clean all resources or items touched by a child with a suspected illness. Once cleaned, disinfect ([Staying Healthy: Preventing diseases in early childhood and care services](#))
- wash hands thoroughly with liquid soap and alcohol rub
- alert all children to participate in hygiene practices, including hand washing, sneezing and cough etiquette
- ensure consideration is given to the combination of children to decrease the risk of attaining an infectious illness when planning the routines/program of the day
- ensure sick children are excluded from the FDC residence for at least 48 hours after symptoms stop (gastro) or they are no longer considered infectious (see exclusion periods)
- if a child has tested positive to COVID-19 test, they are not permitted to return to care until they have completed at least 7 days self-isolation and have no symptoms- sore throat, runny nose, cough, shortness of breath (see *COVID-19 Management Policy*)
- complete the *Incident, Injury, Trauma and Illness* record and ensure parents acknowledge the details contained in the record to be true with their signature and date. A copy of this record must be given to the Approved Provider as part of the notification to the Regulatory Authority, Public Health Unit and other government agencies as required.

Prevention strategies for minimising the spread of disease within our Family Day Care Service include all educators, educator assistants and coordinators ensuring:

- they adhere to the Family Day Care Service’s health and hygiene policy including:
 - hand washing
 - daily cleaning of the Family Day Care Service
 - wearing gloves (particularly when in direct contact with bodily fluids- nappy changing and toileting)
 - appropriate and hygienic handling and preparation of food
 - wearing of face masks as mandated by PHO
 - COVIDSafe Plan [delete if not applicable]
- they maintain up to date knowledge with respect to Health and Safety through on-going professional development opportunities
- they clean surfaces first with detergent and water before using disinfectants. [Disinfectants cannot kill germs unless areas are clean]
- children rest ‘head to toe’ to avoid cross infection while resting or sleeping
- cots or mattresses are placed at least 1.5m away from each other if physical distancing measures are required to be implemented

- children do not to share beds at the same time
- bedding is cleaned using detergent and water after each use and if the surface is known to be contaminated with a potential infectious disease, disinfectant is also used to clean beds
- all play dough is freshly made every week. If there is an outbreak of vomiting and/or diarrhoea, or any other contagious communicable disease, play dough is to be discarded at the end of each day and a new batch made each day for the duration of the outbreak. **[some services may choose to avoid the use of playdough during this time]**
- children are to wash their hands before and after using the play dough.
- mops used for toilet accidents are to be soaked in disinfectant in a bucket in the laundry sink and then air-dried
- that a daily clean is carried out on other surfaces that may transmit germs such as high touch objects including doorknobs, tables, light switches, handles, remotes, play gyms, low shelving, etc. This will be increased if an outbreak has been recorded in the Service or to minimise the risk of transmission of a virus such as COVID-19
- that if a child has a toileting accident, the items are placed in a plastic bag with the child's name on it. The plastic bag will be stored in a sealed container labelled 'soiled/wet clothing' for parents to take home.
- cloths are colour coded so that a separate cloth is used to clean floors, bathroom, art and craft, and meal surfaces
- that any toy that is mouthed by a child is placed immediately **in the 'toys to be washed' basket located on the top shelf in the nappy change area** and washed with warm soapy water at the end of the day. All washable toys out on display for the children are to be washed on a weekly basis to decrease the risk of cross contamination and recorded with the date and a signature as evidence.
- toys and equipment (that are difficult to wash) will be washed with detergent (or soap and water) and air-dried in sunlight
- washable toys and equipment will be washed in **detergent and hot water or the dishwasher** and aired to dry (toys will not be washed in the dishwasher at the same time as dishes). All toys and equipment that have been cleaned will be recorded on the toy cleaning register.
- a **'Dummy Basket'** is located by the sign in sheet that requires all children that use a dummy to place the dummy in the basket in an individual container, small zip locked plastic bag, or a protector with the child's name clearly stated to reduce the risk of cross contamination.
- all cleaning procedures will be recorded on the **FDC Service's Cleaning Checklist**.
- furnishings, fabric tablecloths and pillowcases will be laundered at the end of each week and hung out to dry. This will be increased to every **Monday, Wednesday and Friday** during winter months or daily during an outbreak of illness in the Service.
- floor surfaces will be cleaned on a daily basis after each meal and at the end of each day

- toilets/bathrooms will be cleaned in the middle of the day, the end of the day and whenever needed throughout the day using disinfectant **and paper towel**.
- when cleaning up spills of faeces, vomit or urine off beds, floors, bathrooms etc. FDC educators will use disinfectant on the surface after cleaning it with detergent and warm water
- pregnant FDC educators must minimise their exposure to changing nappies, toilet training, cleaning up body fluids due to the risk of contracting Cytomegalovirus (CMV). The occupational risks of CMV infection must be discussed with management of the FDC Service. (*see Pregnancy in Early Childhood Policy*)

FAMILIES WILL:

- adhere to the Service's policies regarding *Control of Infectious Diseases, Immunisation and Sick Children* and adhere to exclusion requirements
- adhere to the FDC Service's restrictions of entry into approved FDC residences and/or venues in the event of an outbreak of an infectious disease or virus
- adhere to the FDC Service's policy regarding *Hand Washing*
- exclude their child from care if they display symptoms of an infectious illness or disease or in the event of a vaccine preventable disease occurs in the residence/venue where their child is educated and cared for and their child is not fully immunised
- advise the Coordinator/FDC educator of their child's immunisation status, by providing a current Immunisation History Statement recorded on the Australian Immunisation Register (AIR) for the service to copy and place in the child's file.
- advise the Coordinator/FDC educator when their child's medical action plan is updated
- provide sufficient spare clothing, particularly if the child is toilet training
- adhere to the FDC Service's risk minimisation strategies if their child has complex medical needs in the event of an outbreak of an infectious disease or virus

Resources

[Gastro Pack NSW Health](#)

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

[Minimum periods for exclusion from childcare services \(Victoria\)](#)

[Minimum periods of exclusion may be different in each state or territory. Check your own jurisdiction and include a link for parents to access.]

[Time Out Keeping your child and other kids healthy!](#) (Queensland Government)

Time Out Brochure [Why do I need to keep my child at home?](#)

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines. *Dealing with Infectious Diseases*.
 Australian Government Department of Health *Health Topics* <https://www.health.gov.au/health-topics>
 Australian Government. Department of Health (2019). *National Immunisation Strategy for Australia 2019-2024* https://www.health.gov.au/sites/default/files/national-immunisation-strategy-for-australia-2019-2024_0.pdf
 Australian Government Department of Health Australian Health Protection Principal Committee (AHPPC)
 Department of Human Resources: National Immunisation Program Schedule: <https://beta.health.gov.au/initiatives-and-programs/national-immunisation-program>
 Early Childhood Australia Code of Ethics. (2016).
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 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
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 Guide to the National Quality Standard. (2020).
 Medicare Australia (Department of Human Services): <https://www.humanservices.gov.au/individuals/medicare>
 National Health and Medical Research Council (NHMRC): <https://www.nhmrc.gov.au/>
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 NSW Government Department of Health. Vaccination requirements for child care.
https://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx
 NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>
Public Health Act 2010
Public Health Amendment Act 2017
 Public Health Regulation 2012
 Public Health and Wellbeing Regulations 2019 Victoria
 Queensland Health [Information for parents about infectious diseases and exclusion periods in Queensland early childhood education centres and schools](#)
 Revised National Quality Standard. (2018).
 Safe Work Australia

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> deleted information about a confirmed COVID-19 case replaced by <i>Managing a positive case of COVID-19 in an ECEC Service</i> services must check with their state regulatory authority for current guidelines for managing a positive case of COVID-19 as definitions of close contacts and management of cases may change minor edits sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> Additional law/regulations added- ACECQA Guidelines to Policy and Procedures document- Dealing with Infectious Diseases (August 2021) 		MARCH 2022

	<ul style="list-style-type: none"> • additional related policies added • Additional information added re: mandated COVID-19 vaccinations 	
MARCH 2021	<ul style="list-style-type: none"> • review of policy changed to March each year in readiness for cold/flu season • 'Information to be displayed at the Service' deleted (This is contained in Immunisation Policy) • sources checked for currency and links updated where needed • additional resources added for Queensland services 	MARCH 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> • additional information related to notification to PHU and Regulatory Authorities • additional information related to COVID-19 management added • further guidance for Infection Control Measures added including contacting parents 	JUNE 2021
MAY 2020	<ul style="list-style-type: none"> • Additional information from Australian Health Protection Principal Committee and Safe Work Australia re: physical distancing, immunisation for staff, risk minimisation for vulnerable children/adults, additional cleaning • Requirement of a doctor's certificate for suspected cases of infectious disease made editable for individual services to decide upon • Pregnancy in Early Childhood reference and risks of CMV and pregnancy • Inclusion of recommended exclusion periods Poster link- Staying Healthy: Preventing infectious diseases in ECECE 	JUNE 2021
MARCH 2020	<ul style="list-style-type: none"> • Implementation information added regarding infectious illnesses • Added mandatory reporting to public health unit information • Rearranged some content into new headings- Prevention Strategies • deleted repeated items • New sources added 	JUNE 2021
JUNE 2019	<ul style="list-style-type: none"> • Grammar, punctuation and spelling edited. • sentences reworded/refined. • Additional information added to points. • Sources/references added. • Sources/references alphabetised. • Added a Related Policy. • Related policies alphabetised. 	JUNE 2020
JUNE 2018	<ul style="list-style-type: none"> • Updated the opening statement, included the 'Related Policy' section and made general improvements to grammar to support further understanding and implementation. 	JUNE 2019

OCTOBER 2017	<ul style="list-style-type: none"> Updated to comply with new vaccination regulations in NSW. Effective January 1, 2018 	JUNE 2018
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2.40 FLOOD MANAGEMENT POLICY

Floods are a natural phenomenon that occur when water covers land that is usually dry. Flooding most commonly occurs from heavy rainfall when natural watercourses cannot carry the excess water. Flooding can also be caused by storm surges as a result of a tropical cyclone, or severe storm, a tsunami or even due to a dam release or fail.

Extensive flooding in 2011, led the Australian Government to introduce a [standard definition of flood](#) for certain insurance policies. For this purpose, a flood is defined as:

The covering of normally dry land by water that has escaped or been released from the normal confines of: any lake, or any river, creek or other natural watercourse, whether or not altered or modified; or any reservoir, canal, or dam.

According to Geoscience Australia, floods can have both positive and negative impacts. They can bring welcome relief for people and ecosystems suffering from prolonged drought, but also are estimated to be the costliest natural disaster in Australia.

Appropriate emergency preparedness and mitigation strategies need to be developed to ensure flooding can be a manageable hazard, especially in flood prone communities. Changes in rainfall intensity and the occurrence of severe storms and rising sea levels, however, have made many parts of Australia, especially coastal areas, a flood risk.

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.

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

97	Emergency and evacuation procedures
98	Telephone and other communication equipment
168	Education and Care Services must have policies and procedures

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Arrival and Departure Policy Cyclone Management Policy Emergency Evacuation Policy Family Communication Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Lockdown Policy Retention of Records Policy Supervision Policy
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PURPOSE

Our Family Day Care Service aims to maintain children’s safety and wellbeing by developing an *Emergency Management Plan* that includes flood emergency plans and proactive responses to minimise the potential risks faced by children and educators in Family Day Care residences and approved venues.

SCOPE

This policy applies to children, families, educators, educator assistance, coordinators, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the Family Day Care Service.

IMPLEMENTATION

Management will take effective action to ensure that the FDC Service, FDC residence and approved venue is as flood safe as possible. We will identify possible flood risks, engage members of the community for advice and help and ensure all staff are aware of their responsibilities and roles if required to respond to a flood emergency. Our Emergency Management Plan (EMP) is developed and updated in consultation with children, families, educators, management and emergency services.

FLOODS IN AUSTRALIA

Floods are categorised according to the speed at which floodwaters rise:

Slow-onset flood: Occur by slow rise and fall of water level and usually lasts for a relatively longer period. Slow-onset floods may last one or more weeks, or even months. Due to the flood lasting for a longer period, it can lead to loss of livestock, agricultural products, roads, rail roads etc.

Rapid onset floods: Occur by a rapid rise in water level which lasts for a shorter period. The damage rapid onset floods can cause are often more destructive and pose a greater risk to life and property as people usually have less time to take preventive action prior to the flood.

Flash-Floods: Occur by a rapid rise in water level, within minutes or a few hours after heavy rainfall, tropical storm, failure of dams or levees. Flash-Flooding poses the greatest threat to life and may result in significant damage to property.

FLOOD WARNING SYSTEM

A flood warning system provides people with the ability to act in keeping safe and reducing the costs of flooding. A flood warning system includes the following elements:

Prediction: Recognition of changes in the environment that lead to flooding and the forecast of future water levels during the flood

Interpretation: Recognising in advance the effect of the predicted flood levels and the communities at risk

Message Construction: Planning the content of the message which clearly warns people of approaching flood

Communication: Distributing warning information in a timely way to people and organisations likely to be affected by the flood.

Response: Getting the appropriate protection behaviour from the community and agencies involved

Review: Reflecting on the various aspects of the system with a view to improving its performance

Flood warnings are issued by Emergency Services. The predicted extent of the flood and the amount of time available before it arrives will determine the course of action to be taken.

When there is a flood evacuation warning, educators need to prepare for possible emergency evacuation and implement the procedures effectively to ensure the safety of all children, staff, families and visitors in the FDC Service, FDC residence or approved venue.

MANAGEMENT AND EDUCATORS

To ensure compliance with National Regulations our FDC Service will ensure:

- a comprehensive risk assessment to identify local risks associated with the impact of flooding is completed annually for each FDC residence and approved venue in collaboration the SES (State Emergency Services) 132 500 (for anywhere in Australia) and an Emergency Management Plan (EMP) is developed
- hazards within the FDC residence and approved venue that may be harmful to children, staff, educators during a flood are identified in the risk assessment
- families are made aware of the *Flood Management Policy* and emergency evacuation procedures
- emergency evacuation plans are displayed in prominent positions near each exit and in the indoor and outdoor learning environments
- clear procedures are in place for when a flood warning occurs to ensure the safety of educators, coordinators, children and families
- emergency evacuation rehearsals (drills) will be practiced every **three months**, including identifying a designated assembly point and place of refuge in case of flooding
- a range of possible flood scenarios are included in evacuation drills
- each emergency evacuation drill is documented (Reg. 97)
- emergency telephone numbers will be clearly displayed in prominent positions within the FDC residence or approved venue
- emergency contact details of all children are updated regularly
- strategies to implement emergency plans are discussed and documented between the coordinator and educator regularly during service visits
- consideration is made to how to save critical records- (current records, historical artefacts and archives)
- counselling services are provided to employees and their family members affected by flooding
- FDC educators have a current insurance policy that covers the residence or approved venue for flood damage

BEFORE A FLOOD

MANAGEMENT AND EDUCATORS WILL:

- continue to visit Bureau of Meteorology to check current flood and weather warnings
<http://www.bom.gov.au/>
- visit the Bureau of Meteorology flood watch- [Flood warning system](#)
- refer to the SES State Flood Plans which outline arrangements for responding to floods in **your [state/territory]** <https://www.emergency.nsw.gov.au/Documents/plans/sub-plans/SubPlan-Flood.pdf>
- download a copy of your council's flood plans (**see below for state-by-state specific sites**)
- be familiar with the warning levels and what action needs to be taken during a flood
- ensure the removal of leaves, debris and other items that can enhance flooding (e.g.: check gutters and drains)
- become familiar with the emergency evacuation plan identifying routes and safe locations if evacuation is required (note: this may be different for a flood situation)
- prepare the Emergency Evacuation Kit
- ensure an up-to-date emergency contact list for all children is included in the Emergency Evacuation Kit
- organise sandbags and sand
- follow the advice by emergency services
- place chemicals on a high shelving to reduce contamination of flood water
- talk to the children about the flood, using simple words that children can understand
- ensure there is a procedure for out of hours decision making
- ensure plans are made to include removal of animals (if safe to do so).

2.40.1 DURING A FLOOD

EDUCATORS WILL:

- act quickly
- monitor current flood warnings in the local area
- liaise with Emergency Services instructions and react to changing conditions
- consult or inform the FDC Service and/or FDC coordinator, if time permits, regarding the implementation of emergency evacuation procedures
- contact families to come and collect their child/ren once emergency services have issued a Flood Evacuation Order for your area
- consult or inform the FDC Service and/or FDC coordinator, if time permits, regarding the implementation of emergency evacuation procedures
- turn off electricity, water and gas
- place sandbags in the toilet bowls and over shower and bath outlets to prevent backflow of sewerage into the FDC Service, residence or approved venue

- lock all doors and take recommended evacuation routes for the local area
- contact emergency services to ensure the relocation area is safe before proceeding and follow all advice
- evacuate the FDC residence or approved venue immediately and relocate to clearly defined area as discussed with emergency services and clearly identified in the FDC Service's Emergency Evacuation Plan
- keep families and the FDC Service or FDC coordinator updated regularly of the relocation site

IF IT'S TOO LATE TO LEAVE DURING A FLOOD

Important: calm and logical thinking will be required. The following points are options depending on the circumstances within your own context. Seeking safe options to move children and staff above rising waters levels will be the primary objective.

MANAGEMENT AND EDUCATORS WILL:

- continue to seek advice from emergency services
- remain calm
- move to higher ground and avoid standing in flowing or rising water
- if time permits, stack possessions, equipment and resources onto benches and tables
- ensure that if flowing water is above the ankles, STOP! Turn around and go another way
- avoid entering flood waters

AFTER THE FLOOD

MANAGEMENT WILL:

- complete a serious incident notification to the regulatory authority within 24 hours when there has been an emergency that has posed a risk to the safety and wellbeing of the children-[NQA ITS](#)
- notify the regulatory authority if the FDC residence or approved venue is required to close for a period of time as a result of a local emergency (evacuation due to flooding or to repair damage caused by flooding)
- notify the DESE if the service is temporarily closed via the Provider Entry Point (PEP)
- notify families about absences and Child Care Subsidy (CCS) due to a local emergency

EDUCATORS WILL:

- stay tuned to local radio stations for official warnings and advice
- wait until emergency services have declared the area safe before entering the flood zone
- do not enter the FDC residence or approved venue until the water has dropped below floor level

- do not let children play in or near floodwater
- stay away from drains
- wear rubber boots or rubber soled footwear and rubber/leather gloves when entering the Service
- check with electricity, gas and water establishments to determine if the supplies to the FDC residence or approved venue and local area have been affected and if it safe for them to be turned on
- be aware of damaged power lines, bridges, buildings, trees surrounding the FDC residence or approved venue
- contact families or emergency contacts to confirm the location and safety of the children
- if possible, take photographs for insurance claims
- when safe and convenient, clean or discard contaminated toys and equipment

Preparing for an emergency

Australian Government Department of Education, Skills and Employment Resources

<https://www.dese.gov.au/child-care-package/ccp-resources-providers/help-emergency>

[NSW Department of Education: Flood planning for Early Childhood Education and Care \(ECEC\)](#)

Australian Government- Emergency Management Australia-[What to do before and after a flood](#)

Resources to assist services after an emergency/natural disaster

[BeYou Educator Wellbeing after a natural disaster](#)

[Community Child Care- What happened to my world? Helping Children cope with natural disasters and catastrophes](#)

[Get Ready Queensland- Cyclone and Storm Surge](#)

STATE SPECIFIC INFORMATION

New South Wales

New South Wales State Emergency Service SES

Flood plans for NSW <https://www.emergency.nsw.gov.au/Documents/plans/sub-plans/SubPlan-Flood.pdf>

Council Flood Plans <https://www.ses.nsw.gov.au/flood-resources/before-a-flood/know-your-risk/>

Phone: 132 500 SES

Victoria

The Victoria State Emergency Service (VICSES) is the control agency for flooding in Victoria.

Local flood guides can assist in understanding your Service's flood risk, how flood warnings work and how to prepare the Service for flood. [Local Flood Guides](#)

Phone: 132 500 SES

Victoria State Government [Emergency management requirements](#)

South Australia

South Australian State Emergency Services provide flood assistance.

Phone: 132 500 SES

[Flood checklist](#)

Tasmania

Tas State Emergency Service provides information on flood risk management and emergency services.

Phone: 132 500 SES

[Floodplain Risk Assessment Guidelines for Municipal Councils in Tasmania](#)

Western Australia

Department of Fire and Emergency Services manage the State Emergency Service Western Australia and provide assistance in the event of flooding

Phone: 132 500 SES

[Flood Smart Guide](#) provides assistance in preparing your Service in you are in a flood prone region.

Northern Territory

NT Emergency Service provides assistance during floods, storms and cyclones.

Phone: 132 500

Know your local flood history and community plans.

[Floodplain maps](#) and [NT Rainfall and River Conditions](#)

Queensland

Queensland State Emergency Services (SES) for flood and storm emergency assistance.

Phone: 132 500

[Get Ready Queensland](#) assists in preparing and emergency and evacuation plan.

[Get Ready Queensland](#)- alerts and warnings

Early Childhood Education and Care [Incident and emergency management](#)

SOURCE

ABC Emergency: Plan for an emergency – Flood <https://www.abc.net.au/news/emergency/plan-for-an-emergency/flood/>

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

Australian Government Attorney General’s Department (2009) *Flood Preparedness* Australian Emergency Manual Series

Australian Government Department of Education, Skills and Employment (2020). Help in an emergency

Australian Government: Geoscience Australia <http://www.ga.gov.au/scientific-topics/hazards/flood/basics>

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

Floods: Warning, Preparedness and Safety

http://www.bom.gov.au/australia/flood/EMA_Floods_warning_preparedness_safety.pdf

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

Queensland Government Natural disaster resources

SES – NSW State Emergency Services <https://www.ses.nsw.gov.au>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	• New policy drafted for Family Day Care services		

2.41 HEAD LICE POLICY

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

Whilst families have the primary responsibility for the detection and treatment of head lice, our (FDC) Service and educators will work in a cooperative and collaborative manner to assist all families to manage head lice effectively. Educator will inform to all family members if any child has head lice to provide best treatment and care so it can prevent to spread to other children or Educators.(Nur)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.

2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

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

RELATED POLICIES

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

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

Our Family Day Care Service aims to:

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

SCOPE

This policy applies to the educators, educator assistants, children, families, and visitors of the Family Day Care Service.

HEAD LICE

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

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

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

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

FINDING HEAD LICE

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

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

IMPLEMENTATION

Responsibilities of the Approved Provider, Coordinator, Educators and Educator Assistants

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

remind parents to be vigilant in checking for head lice weekly

confidentially notify the parent/caregiver of a child who is suspected of having live head lice and request that the child is treated before returning to the Service the following day

keep families informed if there is someone at the FDC Service with head lice, ensuring confidentiality is not breached by disclosing the child's name who has head lice

reduce head-to-head contact between all children when the Service is aware that someone has head lice

support parents and children who have head lice by providing factual information, reducing parental anxiety and not singling out individual children with head lice

ensure that the child or children with head lice are not isolated or excluded from learning

provide families with suggestions of effective treatment for head lice

encourage parents to tie back children's hair when attending the FDC Service

record all cases confidentially so an outbreak can be avoided or minimised

encourage children to learn about head lice so as to help them understand the issue and how to prevent further outbreaks- e.g.: avoid sharing hairbrushes and hats.

Responsibilities of families:

check your child's head once a week for head lice

notify the FDC **educator** immediately if head lice are found on your child's head

ensure you check all members of your family if one person has head lice (there is no need to treat the whole family, unless they also have head lice)

ensure your child does not attend the FDC Service with untreated head lice. If you find any live lice or eggs, begin treatment immediately and notify the service if your child is affected so the Service can monitor the number of cases and act responsibly.

check for effectiveness of the treatment every 2 days until no live lice are found for 10 consecutive days. Remove eggs from your child's hair using the conditioner method and head lice comb.

once treatment has started, your child can attend the FDC **residence/approved venue**

children with long hair will attend the Service with their hair tied back

only use safe and recommended practices to treat head lice

maintain a sympathetic attitude and avoid defaming/blaming families who are experiencing difficulty with control measures.

Treatment

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

Conditioner and Combing Technique

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

Untangle dry hair with an ordinary comb

Apply hair conditioner to dry hair (white conditioner makes it easier to see the eggs). Use enough conditioner to cover the whole scalp and all the hair from roots to tips.

Use an ordinary comb to evenly distribute the conditioner and divide the hair into four or more sections using hair clips.

Starting with a section at the back of the head, place the teeth of a head lice comb flat against the scalp. Comb the hair from the roots through to the tips.

Wipe the comb clean on a tissue after each stroke and check for head lice or eggs on the tissue.

Comb each section twice until you have combed the whole head. If the comb becomes clogged, use an old toothbrush, dental floss or a safety pin to remove the head lice or eggs.

Wash out the conditioner.

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

Chemical treatments

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

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

FURTHER INFORMATION FOR EACH STATE (DELETE NON-APPLICABLE STATES):

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

AUSTRALIAN CAPITAL TERRITORY (ACT)
ACT Government https://www.health.act.gov.au/media/232

NEW SOUTH WALES (NSW)
NSW Department of Education https://education.nsw.gov.au/student-wellbeing/health-and-physical-care/health-care-procedures/conditions/head-lice

NORTHERN TERRITORY (NT)

Northern Territory Health

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

QUEENSLAND (QLD)

Education Queensland

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

TASMANIA (TAS)

Department of Education Tasmania

<https://documentcentre.education.tas.gov.au/Documents/Infosheet-Health-Headlice.pdf>

VICTORIA (VIC)

Victoria State Govt. Health Vic.

<https://www2.health.vic.gov.au/public-health/infectious-diseases/head-lice>

WESTERN AUSTRALIA (WA)

Department of Health WA

http://healthywa.wa.gov.au/Articles/F_1/Head-lice

SOUTH AUSTRALIA (SA)

South Australia Department of Health

[Head lice management for schools](#)

SOURCE

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

Better Health Channel. (2019). Head lice (nits) [Fact Sheet].

<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/head-lice-nits?viewAsPdf=true>

Early Childhood Australia Code of Ethics. (2016).

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

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

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

Guide to the National Quality Standard. (2017).

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

Privacy Act 1988.

Revised National Quality Standard. (2018).

SA Health. (2019). Head lice, management guidelines for schools:

United Nations Convention on the Rights of the Child

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none">• policy maintenance - no major changes to policy• minor formatting edits within text• hyperlinks checked and repaired as required		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JULY 2021	Minor formatting edits sources checked for currency		JULY 2022
JULY 2020	Regulations added for compliance reordering of wording in 'Implementation' section small changes to family responsibility section links checked and modifications made where indicated further information added to treatment section additional source added		JULY 2021
JUNE 2019	New policy drafted for FDC services		JULY 2020

2.42 SAFE TRANSPORTATION POLICY

Under the Education and Care Services National Regulations the approved provider must ensure that policies and procedures are in place in relation to the safe transportation of children (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

[ACECQA 2021.] Educators who don't want to make their own Safe Transportation Policy must have to follow Nurture Childcare and Education Safe Transportation Policy and should readily available for all Stake holders. Educators working within Nurture Childcare and Education Services often provide transportation of children as part of our education and care service. This may include transporting children between the Family Day Care residence or venue and other locations to participate in regular outings such as play groups, library visits, walks in the park or collecting children from homes or schools.

Compliance with the Education and Care Services National Law and Regulations is mandatory to ensure the safety of children at all times and new provisions and amendments to these regulations are reflected in our procedures and policy for transportation and the safe handover of children.

We acknowledge our ensuring duty of care obligations by adhering to relevant legislation providing adequate supervision of children at all times, maintaining correct educator to child ratios, maintaining accurate attendance records and providing appropriate child restraints for children under our care.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND LAW	
4 (1)	Definition regular transportation
85	Incident, injury, trauma and illness policies and procedures
89	First Aid Kits
98	Telephone or other communication equipment
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct a risk assessment for excursion
102A	Transportation of children other than as part of an excursion
102B	Transport risk assessment must be conducted before service transports child
102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
122	Educators must be working directly with children to be included in ratios
124	Number of children who can be educated and cared for- family day care educator
136	First aid qualifications

158	Children’s attendance record to be kept by approved provider
161	Authorisations to be kept in enrolment record
168	Education and care service must have policies and procedures
168(2)(ga)	Education and care service must have policies and procedures (transportation)
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
183	Storage of records and other documents
s165	Failure to adequately supervise children
s167	Failure to take reasonable precautions to protect children from harm and hazards

RELATED POLICIES

Arrival and Departure Policy Administration of First Aid Policy Behaviour Guidance Policy Child Protection Policy Child Safe Environment Policy Enrolment Policy	Excursion Policy Incident, Injury, Trauma and Illness Policy Record Keeping and Retention Policy Responsible Persons Policy Work Health and Safety Policy
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PURPOSE

We aim to ensure that all children being educated and cared for by our educators within our Family Day Care Service are adequately supervised at all times. This includes ensuring educator to child ratios are met whenever and wherever education and care is provided to children and including providing transportation as part of our service activity.

SCOPE

This policy applies to the Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

The safety of children enrolled at our FDC Service is paramount. Every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury. Appropriate safety measures have been implemented through our comprehensive risk assessment process to ensure supervision is adequate at all times including transportation. Educator to child ratios is adhered to in addition to

ensuring the maximum numbers on the service approval are not breached at any time. Adequate supervision is therefore not static as it is dependent upon a range of considerations documented in risk assessments. (e.g., when FDC educators travel together in a larger vehicle for an excursion).

Definitions (effective 1 October 2020)

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

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

Regular transportation: in relation to an education and care service, means the transportation by the service or arranged by the service (other than as part of an excursion) of a child being educated and cared for by the service, where the circumstances relevant to a risk assessment are *substantially* the same for each occasion on which the child is transported.

Written authorisation: authorisation given by a parent or other person named in the child's enrolment record as having authority to authorise the child being transported by the service or on transportation arranged by the service. If the transportation is regular transportation, the authorisation is only required to be obtained once in a 12-month period. The authorisation must state:

- a) the child's name; and
- b) the reason the child is to be transported; and
- c) if the authorisation is for a regular outing, a description of when the child is to be taken on the regular outings; and
- d) if the authorisation is **not** for a regular transportation, the date the child is to be transported; and
- e) a description of the proposed pick-up location and destination; and
- f) the means of transport; and
- g) the period of time during which the child is to be transported; and
- h) the anticipated number of children likely to be transported; and
- i) the anticipated number of staff members and any other adults who will accompany and supervise the children during the transportation; and
- j) any requirements for seatbelts or safety restraints under a law of each jurisdiction in which the children are being transported; and
- k) that a risk assessment has been prepared and is available at the education and care service; and

- l) that written policies and procedures for transporting children are available at the education and care service.

2.42.1 Transport specific risk assessment

As per the Education and Care Services National Law, our FDC Service will *'ensure that every reasonable precaution is taken to protect children...from harm and from any hazard likely to cause injury'* (Section 167).

Our FDC educators will conduct comprehensive transport specific risk assessments to minimize and manage all potential risks for transporting children before authorisation is sought to transport a child from the Approved Provider. [Reg. 102B, 102D (4)].

A risk assessment will be undertaken at least annually for *'regular transportation'* of children. Each time a FDC educator transports, or arranges, the transport of children as part of an excursion, a new risk assessment will be conducted. All risk assessments will be regularly assessed and evaluated as to facilitate continuous improvement in our service.

Our risk assessment process is guided by the following process: **will:**

- **identify** any hazards or potential hazards that transporting the child may pose to the safety, health and wellbeing of the child
- **assess** the risk of harm or potential harm using a risk matrix
- **specify how the identified risks will be managed** by eliminating or minimising the impact using control measures
- **evaluate** the current risk or potential harm by implementing control measures
- **review** and monitor the risk or potential harm to ensure it continues to be managed as a low risk

source: Risk assessment and management ACECQA (2020)

Our risk assessment will consider:

- a) the proposed route and duration of the transportation; and
- b) the proposed pick-up location and destination; and
- c) the means of transport; and
- d) any requirements for seatbelts or safety restraints (as per the law of our jurisdiction); and
- e) any water hazards; and
- f) the number of adults and children involved in the transportation; and
- g) given the risks posed by transportation, the number of educators or other responsible adults to provide supervision and whether any adults with specialized skills are required; and

- h) whether any items should be readily available during transportation (mobile phone, list of emergency contact numbers) and;
- i) the process for entering and exiting-
 - i. the education and care service premises; and
 - ii. the pick-up location or destination (as required); and
- j) procedures for embarking and disembarking the means of transport, including how each child is to be accounted for on embarking and disembarking.

Additional considerations may include:

- the experience of the driver and licensing conditions for the vehicle
- the age, ability, needs and skills of children being transported (non-ambulant, infants)
- the experience of adults involved in transportation and their capacity for supervising children
- movement of children between the vehicle and venues
- traffic conditions
- extreme weather conditions or natural disasters
- environmental hazards such as temperature extremes, smoke
- communication to/from the vehicle- mobile phone reception
- health needs of all children and adults
- first aid provision and management of illness, injuries and emergencies
- child safe practices.

source: NSW Government Kids and Traffic (2020)

The Coordinator and FDC Educator will ensure:

- all educators and educator assistants are inducted in the *Safe Transportation Policy* and procedure and have completed practical training
- a copy of any training is kept at the FDC Service principal office
- risk assessments are carried out prior to seeking authorisation for transporting children is made with the Approved Provider
- risk assessments for 'regular transportation' are evaluated regularly to ensure potential risks are identified and managed
- risk assessments for 'regular transportation' are reviewed at least annually
- any updates to procedures are clearly communicated with educators and educator assistants
- rehearsals for transportation of children are conducted throughout the year as 'best practice'
- details of the safest route for travel, type of vehicle and required restraints are included in the risk assessment

- every reasonable precaution is taken to protect children from harm and hazards likely to cause injury
- compliance with first aid requirements of Regulation 136 is met at all times
- parents/guardians complete a written authorisation for transportation of their child and a copy of this is filed in the child's enrolment record
- children are instructed on processes for entering and exiting the **FDC residence or approved venue**
- children's attendance is checked against an accurate attendance record showing when children are within the care of the FDC service/ **FDC educator**. The record of attendance must record the time that the child arrives and departs **the residence or approved venue**
- children's attendance is checked by the FDC educator before departure from the designated pick-up location and marked as present as they disembark from the vehicle
- procedures for the safe handover of children between the FDC Service and other educational site is documented correctly (if applicable)
- educator to child ratio requirements is maintained at all times
- children exit the vehicle using the 'safety door'
- children wear approved seatbelts/restraints whilst the vehicle is in motion in accordance to **Western Australia** Road Rules and Road Transport Act
- children are never left unattended in the vehicle
- education on road safety for children is included in the FDC Service's programming (for example Kids and Traffic, Vic Roads Primary School roads information)
- safety rules are developed with children to ensure a clear understanding of appropriate and inappropriate behaviour
- they are aware of appropriate procedures to be followed in the event of a vehicle crash involving children from the service
- a working mobile phone or other similar means of communication to communicate with the principal office, coordinator, parents/carers is carried in case of emergency
- a list of emergency contact numbers for the children being transported is available at all times
- every effort will be made to notify parents/carers of delays returning to the **FDC residence or venue** if applicable
- relevant criminal history requirements and Working with Children Checks are made for any person transporting children. WWCC is recorded in staff records.
- the FDC educator or person driving the vehicle/bus holds a current Australian driver's licence
- any allegation of misconduct of the educator or other adult will be reported immediately as per the Reportable Conduct Scheme detailed in our Child Protection Policy and/or Child Safe Environment Policy.

Safe Maintenance of transportation vehicle

The Coordinator and FDC educator will ensure:

- the transportation vehicle is fitted with the required child restraints, approved by the Roads and Traffic Authorities (see Rule 266 of the Australian Road Rules)
- the vehicle has enough fuel to transport the children each day as in accordance with schedule
- the vehicle is registered, roadworthy and insured (general legal requirements and best practice standards are adhered to)
- any repairs are completed as soon as possible by a qualified mechanic
- all drivers hold a current Australian driver's licence, licenced to carry the required number of passengers for the vehicle
- in the event of any mechanical or other breakdown, children will be kept safe, comfortable and occupied with suitable activities
- educators/drivers wear/have access to a high visibility vest

The Approved Provider, Coordinator and FDC Educators will ensure:

- adequate supervision is provided when children are being transported. Consideration must include:
 - the number, age and ability of children
 - visibility and accessibility
 - physical positioning of educators
 - risks related to the mode of transportation (including travel on foot)
 - risks in the environment, location and while travelling
 - the experience, knowledge and skill of each educator.
- driver's licence is current, and they are licenced to carry the required number of passengers for the purpose
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury
- they adhere to the road rules and regulations mandated by law within each state/territory
- children remain seated and secured in child restraints and do not behave in a dangerous or inappropriate manner
- the vehicle is parked in a secure and safe location for children to access
- the number of passengers does not exceed the legal requirement
- a working mobile phone is taken in case of an emergency
- an easily recognised and suitably equipped first aid kit is easily accessible during transportation
- educators carry medication, health plans and risk assessments for individual children

- educators are aware of emergency procedures in case of an incident, injury or illness of a child
- FDC educators and educator assistants accompanying children during transportation hold:
 - an approved first aid qualification and
 - a current approved anaphylaxis management training qualification and
 - an approved emergency asthma management training qualification.

Picking up children and during transportation

The FDC educator and/or educator assistant will ensure:

- the vehicle is parked in a safe location close to the entry of the FDC residence or venue
- all children accompany the FDC educator or educator assistant when leaving the residence
- the 'head count' and check of the children's attendance record is checked by the educator as children assemble in a predetermined location at the residence or venue prior to embarking the vehicle
- if both the FDC educator and educator assistant are travelling in the vehicle, a check of the home must be conducted prior to departure to ensure no children are left behind
- children are safely secured into their seats/restraints
- children are continuously supervised during transportation by the educator, ensuring they have clear vision of all children
- children are to remain seated and secured in appropriate child restraints until the vehicle/bus has completely stopped
- the designated driver of the vehicle/bus complies with all appropriate road, safety and transport regulations
- under no circumstances will the driver of the vehicle/bus supervising the children use handheld mobile phones unless safely parked
- under no circumstances will the driver and/or FDC educator supervising children be under the influence of alcohol or drugs
- the designated driver of the vehicle has the right, *if required* to stop in a safe place until the children conform to the safety guidelines. Parents will be notified if their child continues to be challenging and/or behaving in a dangerous manner.

Dropping off children

- at each stop, the FDC educator and/or educator assistant must park the vehicle and turn off the ignition
- children are to remain seated until the vehicle/bus has completely stopped

- if the child is being collected or dropped off to a school or a venue that requires the FDC educator to escort the child to that location, the vehicle must be parked, and all children accompany the FDC educator
- children must never be left unsupervised in the vehicle
- if an educator assistant is travelling with the FDC educator, one of these adults may remain in the vehicle to supervise children whilst a child/ren is delivered safely to their venue/location and signed in
- the FDC educator/educator assistant will assist children to safely disembark the vehicle/bus
- children will exit the vehicle/bus using the 'safety door' or door located near the kerb
- the FDC educator/educator assistant will ensure the child/ren are safely delivered to their location and into the care of a specific person (OSHC educator, kindergarten teacher, preschool educator) as authorised by the parent/carer.

Returning to the FDC Residence

- The FDC educator will park the vehicle in a safe location close to the entry of the FDC residence or venue
- children will be removed from their restraints and escorted inside the residence
- a 'head count' of children against the attendance record will be checked by the FDC educator once inside the residence
- a signed copy of the roll/attendance record should be kept as a record for inspection by the Regulatory Authority (best practice)
- once the children have been removed from the vehicle the FDC educator and/or educator assistant will conduct a final thorough sweep of the vehicle/bus, checking on and under seats to ensure there are no children or belongings left behind
- checks should be marked as completed and signed by the FDC educator and/or educator assistant and kept on record as best practice
- if any child is unaccounted for, the FDC educator must immediately make all necessary enquiries to establish the child's location. This will include:
 - physical search of the vehicle
 - contacting other relevant locations- school, park, library and request an immediate search
 - contact the police and child's parents/carers
 - contact FDC scheme Coordinator/Nominated Supervisor
 - notify regulatory authority of a serious incident within 24 hours with the support of the approved provider.

Families will:

- adhere to the Service's *Arrival and Departure Policy* and *Safe Transportation Policy*
- communicate any change in transportation requirements for their child with their FDC educator as soon as they are aware (for example: no transport is required on a particular day as the child has returned home from school due to illness)
- notify the Service and FDC educator if their child is going to be absent on a particular day and not require transport
- ensure written permission for transportation of their child by the FDC educator/and service is granted by either the parent or authorised nominee named in the child's enrolment record
- update emergency contact numbers regularly.

Resources

Childcare Centre Desktop

Safe Transportation of Children Module

- Transporting Children Risk Assessment Template
- Safe Transportation Procedure
- Car/Bus Pick Up Drop Off Checklist

[Kids and Traffic- Early Childhood Road and Safety Education Program](#)

- Transporting children safely- Guidance on Understanding safe transport and travel requirements for education and care service providers (2020).
- Safe Travel and Transport- Advice for working with children, families, schools and communities (2020).

SOURCE

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

ACECQA. (2021). *Policy and Procedure Guidelines. Safe Transportation of Children.*

Australian Government Department of Education Skills and Employment. (2009). *Belonging, Being and Becoming: The Early Years Learning Framework for Australia.* (2009).

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

Childhood Australia Code of Ethics. (2016).

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Guide to the National Quality Framework. (2018). (Amended 2020).
 Kids and Traffic Early Childhood Road Safety Education Program (NSW)
 Revised National Quality Standard. (2018).
 Road Transport (Safety & Traffic Management) Act 1999.
 Queensland Government Early Childhood Education and Care (2021) [Guidelines for health and safety-Transportation](#)
 Vic Roads- Primary school road safety education resources

REVIEW

POLICY REVIEWED	OCTOBER 2021	NEXT REVIEW DATE	JULY 2022
MODIFICATIONS	<ul style="list-style-type: none"> • Additional law/regulations added- ACECQA Guidelines to Policy and Procedure document (August 2021) • Additional consideration for risk assessment included • further information related to dropping children off at various stops/venues included to ensure safety of children at all times • additional section 'Returning the FDC residence' added • checks of the vehicle after disembarkation to be recorded as best practice • information added regarding unaccounted children 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	<ul style="list-style-type: none"> • relevant National Law added • clarification of adequate supervision added • additional information re: communication/telephone • additional resources added- Kids and Traffic 	JULY 2022	
AUGUST 2021	<ul style="list-style-type: none"> • New policy created for Family Day Care Services 	JULY 2022	

2.43 TEETHING POLICY

Nurture Childcare and Education Services FDC) Service aims to manage the teething process of babies and young children whilst ensuring the health and safety of all children, families, educators and visitors of the Family Day Care residences and/or approved venues. Symptoms of common childhood illnesses are often mistakenly linked to 'teething', which may prevent the identification an underlying bacterial or viral or middle ear infection.

This policy aims to ensure educators, FDC coordinators, parents, families and visitors to the approved Family Day Care residences and/or approved venues understand teething symptoms, measures implemented to manage the teething process and treatments that are not recommended or used at our FDC Service.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
87	Incident, injury, trauma and illness record
92	Medication record
93	Administration of medication
168	Education and care service must have policies and procedures

RELATED POLICIES

Administration of Medication Policy	Handwashing Policy
Enrolment Policy	Incident, Injury, Trauma and Illness Policy
Family Communication Policy	Sick Children Policy

PURPOSE

We aim to assist families manage the teething process of their child whilst maintaining the health and wellbeing of all children.

SCOPE

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

IMPLEMENTATION

Our FDC Service implements specific strategies to ensure the health and wellbeing of all children, families, educators and visitors. Our Policies are informed by current research and recommendations provided by

the Australian Government- Department of Health and local Public Health Units and we adhere to the recommendations by the Australian Government National Health and Medical Research Council Publication *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition).

Although some babies and young children may display signs of discomfort and pain whilst teething, many babies experience little of no discomfort. Our educators will implement a range of management strategies to support and comfort babies and young children during this time.

Teething

Baby teeth develop while babies are still in the womb. Teething is the process in which the teeth begin to 'erupt' and break through the gums. Teething commonly begins between four and ten months of age and is different for each child. The order of tooth eruption however is usually the same with the two front teeth (central incisors) in the lower jaw occurring between the ages of six and ten months.

Generally, children will have their full set of primary teeth (20 teeth) by the age of three years.

Symptoms and/or behaviours of Teething

Teething takes about eight days for a tooth to fully erupt from the gum. During this time babies and young children may suffer some discomfort. Symptoms and/or behaviours may include:

- babies rubbing their gums together
- flushed red cheeks
- sucking on toys, fingers or fists
- irritable, grizzly or grumpy
- baby being more clingy or fretful than usual
- dribbling as more saliva is produced during teething
- nappy rash

Whilst teething symptoms for some babies can be concerning, there is **no** clear evidence to suggest that teething causes fever or diarrhoea in children. (Royal Children's Hospital Melbourne). Symptoms of common childhood illnesses can sometimes be mistakenly linked to teething resulting in underlying viral, bacterial or middle ear infections to go undiagnosed. Teething may cause discomfort and irritability, but it does not cause an illness. If a baby or child has a temperature at or above **38°C** parents should seek urgent medical attention.

Management of Teething

Educators will implement a range of techniques to comfort and support babies and young children during teething. These may include:

- offering a cooled/chilled teething ring to chew on
- use a cold, wet flannel (face washer) to massage the gum area with a finger
- if baby has started solid foods and is over six months, offering food items that are firm- such as a sugar free rusk, or raw vegetables
- offering mushier foods for mealtimes (mashed vegetables, yoghurt)
- additional comforting and play time to distract the baby from any pain

Management for Teething

As per our *Sick Children Policy*, FDC educators will **not** accept a child into care if they have been given medication for a pain relief or temperature prior to arriving at the FDC residence and/or approved venue (for example Panadol). If a child becomes ill whilst at the FDC Service and has developed a temperature, we will adhere to our *Sick Children Policy* and monitor the child's symptoms, temperature and respond accordingly.

If the child is displaying signs of pain and discomfort and other measures have not helped, educators will administer paracetamol only with written authorisation by a parent. Any medication administered to a child will be recorded on the *Administration of Medication Record* or *Administration of Paracetamol Record* and witnessed by another educator. Dosage amounts and instructions will be checked carefully and recorded appropriately. The *Administration of Medication Record* or *Administration of Paracetamol Record* will be acknowledged and signed by the parent or authorised nominee when collecting the child from the Family Day Care residence and/or approved venue. When paracetamol has been administered, it is our policy to request parents or an authorised person to collect the child from care within 30 minutes.

Teething Gels- educators will NOT administer teething gels for a child who is teething. Common teething gel formulations contain choline salicylate which is related to aspirin and is not recommended for children under 16 years of age. Teething gels containing benzocaine are also not recommended. (Victoria Health-better health)

Amber Beads- The use of amber beads to assist for soothing teething is **not** supported by our FDC Service. The Australian Competition and Consumer Complaints (ACCC) has identified amber beads as

public safety warning due to the risk of amber teething necklaces and bracelets becoming a possible choking or strangulation hazard.

MANAGEMENT AND EDUCATORS WILL ENSURE:

- they aware of a range of strategies to support babies and young children during teething
- communication with parents and families is consistent and supportive
- children will **not** be accepted into care if they have been provided with paracetamol or other medication for pain relief or temperature **prior** to arriving at the FDC residence and/or approved venue
- effective hygiene policies and procedures are adhered to at all times to prevent the spread of illnesses
- effective environmental cleaning policies and procedures are adhered to all times
- toys and other equipment mouthed by babies or young children are thoroughly cleaned after use
- all families are provided access to relevant policies upon enrolment which will be explained by management including: *Teething Policy, Sick Children Policy, Incident, Injury, Trauma and Illness Policy, Administration of Medication Policy*
- families are provided with relevant information from a trusted source about teething and management of teething
- that any child who registers a temperature of **38°C** or above is to be collected from the FDC residence and/or approved venue within 30 minutes and excluded for 24 hours after the last elevated temperature *or* until the educator receives a doctor's clearance letter stating that the child is cleared of any infection and able to return to childcare
- administration of medication for pain relief will only occur after all other measures to reduce pain and discomfort for teething children have been exhausted and with written authorisation by a parent or authorised nominee
- if paracetamol is administered to a child for any reason, parents or an authorised person must collect the child within 30 minutes from the Service
- accurate records for *Administration of Medication* and/or *Administration of Paracetamol* are completed and signed by a parent/authorised nominee when collecting the child.

PARENTS WILL:

- adhere to the *Teething Policy* and *Sick Child Policy*
- not administer paracetamol or other medication for pain relief or temperature prior to arriving to the FDC residence and/or approved venue
- provide written authorisation to administer pain relief medication (e.g., Panadol)

- acknowledge and sign the *Administration of Medication Record* if required
- collect their child from the FDC residence and/or approved venue within 30 minutes if paracetamol has been administered
- monitor their child’s health and recognise the symptoms of an underlying illness rather than teething

SOURCE

Australian Dental Association <https://www.ada.org.au/Your-Dental-Health/Children-0-11/Babies>

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

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

Guide to the National Quality Standard. (2020)

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

Pregnancy, Birth and Baby <https://www.pregnancybirthbaby.org.au/teething>

Raising Children Network: <https://raisingchildren.net.au/babies/health-daily-care/dental-care/dental-care-babies>

The Royal Children’s Hospital Melbourne. https://www.rch.org.au/kidsinfo/fact_sheets/Fever_in_children/

Victoria Health Department. Better Health Channel. Teeth Development in Children.

<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/teeth-development-in-children>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> • New policy developed for FDC 		

2.44 DENTAL HEALTH POLICY

Nurture and It’s Educator do believe that Early childhood is an important time for developing good dental hygiene practices. From the time a baby starts teething, keeping gums and teeth clean can safeguard against cavities in the ‘baby’ teeth which can also cause damage to the permanent teeth underneath. Our Family Day Care Service promotes the importance of good dental health to children and families.

NATIONAL QUALITY STANDARD (NQS)

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

2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
78	Food and beverages
87	Incident, injury, trauma and illness record

RELATED POLICIES

Administration of First Aid Policy Bottle Safety and Preparation Policy Health and Safety Policy	Incident, Injury, Trauma and Illness Policy Nutrition and Food Safety Policy
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PURPOSE

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

SCOPE

This policy applies to the **Approved Provider, Nominated Supervisor**, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

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

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

To minimise the risk of cavities forming we encourage children to eat nutritious foods and to avoid sticky and sugary foods. All food served and prepared at our FDC Service comply with these guidelines by providing a variety of recommended vegetables, fruit, and dairy products. Children will be encouraged to drink water.

The FDC Educator will:

- ensure that food and drinks provided by the FDC educator adheres to recommendations from organisations such as *Munch and Move* and *Get Up and Grow*, and recognised authorities. The Royal Children’s Hospital of Melbourne recommends that children should avoid foods and drinks such as:
 - Chocolate
 - Lollies
 - Sweetened breakfast cereals
 - Biscuits
 - Fruit bars
 - Dried fruit
 - Muesli bars
 - Soft drink
 - Flavoured milk
 - Juice
 - Sports drinks
 - Cordial
 - Flavoured water
- always ensure children have access to safe drinking water
- ensure the routine incorporates ‘swish and swallow’ after each mealtime
- ensure enrolment form contains up to date information about each child’s family dentist (in case of emergency)
- provide opportunities to discuss dental health education and food and drink choices to support dental health with children
- provide resources to support dental health learning such as books, posters, ‘giant’ teeth and toothbrushes, etc.
- pay particular attention to meal and snack times to ensure healthy food is being eaten.
- encourage ‘swish and swallow’ after each mealtime
- give children bottles before they go to bed. When children take a bottle to bed it allows the lactose (sugar) in the milk to sit on their teeth which can cause tooth decay.
- arrange visits by dental professionals so that children and families can learn correct brushing techniques and oral care
- provide dental care information to families through newsletters, posters, professional visits, web links and brochures.
- provide information to families about the Child Dental Benefits Schedule (CDBS)
- **promote Dental Health Week with children and families each year.**

Dental Emergencies

It is important for FDC educators to be aware of how to manage dental accidents and emergencies. Our Family Day Care Service will:

- ensure all FDC educators and educator assistants have current first aid qualifications to follow dental accident procedures
- ensure procedures for Adminstrating First Aid are adhered to (including completing a Illness, Accident or Trauma record)
- ensure families are notified of any injury as soon as is reasonably practicable
- ensure that the phone number of an emergency dentist is located near the office phone.
- ensure children are supervised at all times to minimise accidents and incidents.

SOURCE

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

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

Australian Government Services Australia *Child Dental Benefits Schedule*

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

Dental Health Services Victoria: <https://www.dhsv.org.au/oral-health-advice/Professionals/early-childhood>

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

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

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

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

Raising Children Network: www.raisingchildren.net.au

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
SEPTEMBER 2021	<ul style="list-style-type: none"> • no major changes • sources checked for currency and updated 		SEPTEMBER 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> • additional regulations and related policies added 		SEPTEMBER 2021

	<ul style="list-style-type: none"> inclusion of First Aid requirements inclusion information Child Dental Benefits Schedule sources checked for currency 	
SEPTEMBER 2019	Contextualised to FDC Sources checked and updated Unavailable or unrelated URLs deleted	SEPTEMBER 2020
SEPTEMBER 2018	New policy created for Family Day Care services	SEPTEMBER 2019

2.45 TERMINATION OF ENROLMENT POLICY

Nurture Childcare and Education Services Including Management and educators are dedicated to developing a respectful and effective partnership between the family and Family Day Care Service. This partnership supports children’s inclusion, access, engagement, and participation. Management implements systems to manage risks whilst promoting the health, safety and wellbeing of all children and staff within the FDC Service. There may be some circumstances where this is compromised due to non-compliance of our policies and therefore the appropriate course of action could lead to the termination of a child’s enrolment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.2	Safety	Each child is protected
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.2	Collaborative partnerships	Collaborative partnerships enhance children’s inclusion, learning and wellbeing.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interaction with children
168	Education and care service must have policies and procedures
177	Prescribed enrolment and other documents to be kept by approved provider
181	Prescribed enrolment documents to be kept by the Approved Provider
183	Storage of records and other documents

RELATED POLICIES

Additional Needs Policy Anti-Bias Policy Behaviour Guidance Policy Code of Conduct Policy Enrolment Policy	Inclusion Support Management Plan Payment of Fees Policy Withdrawal of a Child Policy Work, Health and Safety Policy
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PURPOSE

'All children have the right to experience quality education and care in an environment that provides for their physical and psychological wellbeing and provides support for each child's growing competence, confidence and independence.' Quality Area 2, ACECQA.

We have the legal duty to ensure the health, safety and wellbeing of children, educators, families, coordinators and volunteers at our FDC Service. To promote respectful and effective partnerships with families, we ensure that each child and family participate in a comprehensive induction including detailing our terms of enrolment, as per our legal agreement, which advises families on the Services' right to terminate a child's enrolment if a service policy has been breached.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants and families of the Family Day Care Service.

IMPLEMENTATION

THE APPROVED PROVIDER/COORDINATORS AND FDC EDUCATORS WILL:

- work in partnership with families to promote inclusion of all children within the FDC Service
- use positive language and a range of communication strategies with children and families to ensure positive relationships
- discuss concerns or issues of non-compliance with management before communicating with families
- document all communication and meetings (informal and formal) with families and outside professional support

- access external professional support to ensure child's inclusion in the Service's program
- document proposed strategies and practices suggested to resolve any issue
- develop individual educational plans for children as required (refer to Behaviour Guidance Policy; Additional Needs Policy, Inclusion Support Management Plan)
- implement State and Federal Government requirements for vaccination requirements for enrolment of children
- remind families of our *Code of Conduct Policy*
- document evidence of non-compliance, events, behaviour, grievances and observations.
- ensure minutes are collected and signed by all parties present at meetings to ensure a true and accurate record of the meeting.

BEHAVIOUR GUIDANCE

There are times when children's behaviour requires guidance, which will always be undertaken according to the Service's policies and procedures. Every effort will be made to deal with the behaviour using positive guidance and the FDC educator and coordinator working closely with families to implement a plan in order to help rectify any unacceptable behaviour. If the child's behaviour continues to be disruptive and harmful and the safety of other children and staff is compromised, we reserve the right to ask you to withdraw your child from the FDC Service.

FAMILY DAY CARE POLICIES AND PROCEDURES

Our FDC Service has a range of policies and procedures to ensure the safety, welfare, and wellbeing of children, educators/educator assistants, families and visitors. We reserve the right to terminate a child's enrolment if at any time a Service policy has been breached.

This may include:

- failure to comply with the enrolment contract
- disparaging or hurtful behaviour of a child that continues even with parent collaboration in stopping the behaviour
- non-payment of childcare or late fees and/or recurring late payment of fees
- continuing to pick up the child past the required licensed time following multiple warnings
- inability to meet the child's needs without family support and commitment to ensure their child receives the best possible support within our Service
- deliberate impertinence towards the approved provider or educators/educator assistants- (*Code of Conduct*)
- if a parent knowingly brings their child ill to a FDC residence or venue
- consistent child-rearing style differences between the parent and provider

- false information given by a parent either verbally or in writing
- bullying and/or harassing FDC educators, children or families enrolled at the Family Day Care Service-
Code of Conduct Policy
- failure to provide AIR Immunisation History Statement or AIR Immunisation Medical Exemption form or AIR Immunisation History Form (catch up schedule)

TERMINATION NOTIFICATION

The Approved Provider or Coordinator will advise families in writing that their child’s enrolment will be terminated following all attempts to rectify any non-compliance.

Two weeks’ notice will be provided to families, unless the safety and wellbeing of other children, FDC educator or other families are at risk. In this case, an immediate termination of enrolment may apply. Any outstanding fees will be provided to families and remain due to be paid upon termination of enrolment. The initial Bond payment made on enrolment will not be refunded until any outstanding fees are paid.

TERMINATION ADVISED BY FAMILY

Families are advised upon enrolment of the withdrawal of enrolment conditions. Families are required to provide two (2) weeks written notice of termination of enrolment. Families will abide by the conditions set within the *Withdrawal of a Child Policy*.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Termination of Enrolment Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP - RELATED RESOURCES

Termination of Enrolment Procedure

SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
 Australia Children’s Education & Care Quality Authority. (2018). *Guide to the National Quality Framework*.
 Early Childhood Australia Code of Ethics. (2016).
[Education and Care Services National Regulations](#). (2011).
 Guide to the Education and Care Services National Law Regulations. (2017).
 NSW Government. Anti-Discrimination Act 1977. No 48.
<https://www.legislation.nsw.gov.au/#/view/act/1977/48/full>
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • continuous improvement/reflection section added • Childcare Centre Desktop Related Resources section added • link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
NOVEMBER 2021	<ul style="list-style-type: none"> • Additional sections added: Termination advised by Family • sources checked for currency 	NOVEMBER 2022	
NOVEMBER 2020	<ul style="list-style-type: none"> • National regulations added • policy reviewed/ sources checked 	NOVEMBER 2021	
NOVEMBER 2019	Amendments to NQS inclusions Revised introduction to policy Revised implementation to policy Inclusion of Termination notification Related policies added Sources check for currency and edited where required	NOVEMBER 2020	
SEPTEMBER 2018	New policy drafted	NOVEMBER 2019	

2.46 ADVENTUROUS (RISKY) PLAY POLICY

'Being adventurous is about creating opportunities for children (and adults) to explore and test their own capacities, to manage risk and to grow as capable, resourceful and resilient children and adults.'

(National Quality Standard, Professional Learning Program, 2013).

Nurture Childcare and Education Services and its Educators and management acknowledge that it is sometimes difficult to find the right balance between allowing children to engage in adventurous play in our physical environment whilst preventing serious injuries.

Our Family Day Care Service is committed to supporting families to understand the importance and benefits of risk taking through *adventurous play* for their children. We believe that for children to learn effectively and prepare for life-long skills, it's important for them to experience challenging situations in our physical environment that is managed effectively to minimise negative outcomes, not eliminate risk.

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.
2.1.3	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		
3.1.2	Upkeep	Furniture and equipment are safe, clean and well maintained.
3.2	Use	The service environment is inclusive, promotes competence and supports exploration and play-based learning.
3.2.1	Inclusive environment	Outdoor and indoor spaces are organised and adapted support every child's participation and to engage every child in quality experiences in both built and natural environments.
3.2.2	Resources support play-based learning	Resources, materials and equipment allow for multiple uses, are sufficient in number, and enable every child to engage in play-based learning.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational programs
86	Notification to parents of incident, injury, trauma and illness
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
105	Furniture, materials and equipment
113	Outdoor space—natural environment
114	Outdoor space—shade
115	Premises designed to facilitate supervision

168	Policies and procedures are required in relation to enrolment and orientation
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of First aid Policy Child Safe Environment Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy	Physical Environment Policy Sun Safety Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

We acknowledge the important developmental benefits of adventurous and risky play such as psychological, perceptual, physical/motor skills and social development. (Sandseter, 2010). We encourage educators to support children’s curiosity by providing them with opportunities to access risks and manage situations appropriately. We aim to support and respond to children’s physical development by offering an environment that provides open-ended, dynamic, stimulating and challenging learning opportunities for all children.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants and families of the Family Day Care Service.

WHAT IS ADVENTUROUS PLAY?

Adventurous play, sometimes referred to as ‘risky play’ is a natural part of children’s play and can often be described as a thrilling and exciting activity, involving a risk of physical injury and play that provides opportunities for challenge, testing limits, exploring boundaries and learning about injury risk (Sandseter (2007); Little & Wyver, 2008). Involvement in adventurous play provides children with opportunities to explore and test their own capacity, access risks and manage situations, master new skills, extend their limits and learn life skills. Research shows that success and failure of adventurous play motivates children to try again and work out different ways of doing things, increases their physical and motor skills and teaches them about their own limits. (Sandseter, 2011; Tovey, 2010).

In our endeavour to create a physical environment that is safe for all children at all times, we may be creating a physical environment that inadvertently limits adventure and risk-taking. The National Quality Standard (2.1.3) aims to encourage *“the educational leader and educators to foster physical and*

psychological development in children by encouraging physical activity that is challenging, extends thinking and offers opportunities to take manageable risks.” (2018, p: 68).

IMPLEMENTATION

Family Day Care (FDC) educators will continually determine whether a learning environment is dangerous or a potential learning opportunity may actually encourage risk taking.

Children are faced with risks every day. Rather than trying to eliminate all risks from children’s play, our FDC educators will identify the possible risks and make informed decisions about whether the benefit for children’s development and learning outweighs the risks and protect children from any potential harm. Educators will ensure that every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury (Section 167 National Law).

FDC educators will conduct daily safety checks in the outdoor and indoor environments at their residence or approved venue, to identify potential risks and hazards. According to Curtis (2010), a hazard is something that is inherently dangerous and needs to be immediately remedied. For example, a climbing structure with sharp edges, a broken fence or gate.

FDC educators will use positive language to support and encourage children to engage in adventurous and risky play, modify activities to ensure all experiences are inclusive and promote competence and exploration.

Nominated Supervisor/ Coordinators/FDC Educators will ensure:

- risk assessments are conducted to identify potential hazards, assess the risks, and minimise any risks that could potentially cause harm or injury to children
- to engage in critical reflection as a team and with the children about the risks and benefits of a new activity or process (see: ACECQA- [Talking about Practice: Adventurous Play. Developing a culture of risky play](#))
- daily inspection of the outdoor learning environment will be undertaken to identify any potential risk of harm to children as per our *Health and Safety Policy*
- FDC educators employ ‘active’ supervision techniques at all times
- FDC educators provide direct, constant and proximal monitoring of children undertaking activities that involve some risk and recognising when the ratio of educators to children needs to be increased (e.g.: carpentry, water activities, climbing)
- the FDC educator will notify management of any serious incident as soon as possible. The Approved Provider will ensure the Regulatory Authority is notified within 24 hours of the incident.

- parents are notified as soon as practicable but within 24 hours if their child is involved in a serious incident/situation. Details of the incident/situation are to be recorded on the *Incident, Injury, Trauma and Illness Record*.
- they actively encourage and acknowledge children’s competence to assess risks and possible consequences (It is important to involve children in the risk assessment process, as this provides added benefits of being able to talk through hazards, learn about assessing and managing appropriate risks for themselves.)
- children of all ages and abilities are provided with authentic learning experiences aimed to challenge children’s capabilities, manage risk and grow as capable resourceful and resilient children (and adults)
- children are encouraged to take risks through the use of positive language, guidance and enthusiasm
- children are not pushed or forced to do something they are not sure about
- they provide a challenging and adventurous learning environment that supports children’s curiosity, adventure and motivation
- to respect children’s growth mindset is respected and educators acknowledge them as competent and capable learners
- to educators trust in children’s abilities and judgement whilst scaffolding their learning
- children learn new skills in a safe environment through supervision and adherence to the correct educator to child ratios
- they mentor and support families’ knowledge about the benefits of providing children with adventurous play experiences
- children are not denied the value of an experience because it may appear to be dangerous
- their duty of care is upheld and taken seriously
- they continue to meet their legal obligations and responsibilities as documented in the NQS and Education and Care Services National Law and Regulations.

ADVENTUROUS PLAY ENCOURAGES CHILDREN TO:

- Problem-solve
- Develop skills in negotiating (including risks)
- Build resilience, perseverance and persistence
- Extend their balance, orientation skills and coordination
- Become aware of their own capabilities and limits
- Make appropriate risk decisions
- Develop self-regulation
- Take acceptable risks
- Make decisions

- Learn about the consequences (positive and negative) of risk taking
- Gain confidence and independence
- Become creative and curious
- Learn how to use equipment safely

Source

Australian Children’s Education & Care Quality Authority. (2013). *Talking about practice: Adventurous play. Developing a culture of risky play.*

Australian Government. Department of Education, Skills and Employment. (2009). *Belonging, Being and Becoming- The Early Years Learning Framework (EYLF).*

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

Australian Government. Department of Education, Skills and Employment.

Coster, D. & Gleeve, J. (2008) Give us a go! Children and young people’s views on play and risk-taking. *Play Day*. Retrieved 29th July 2019 from <http://www.playday.org.uk/wp-content/uploads/2015/11/give-us-a-go-children-and-young-peoples-views-on-play-and-risk-taking.pdf>

Curtis, D. (2010, March-April). What’s the risk of no risk? *Exchange Magazine*, 52-56.

Greenland, P. (2010). Physical development. In T. Bruce (ed.), *Early Childhood. A guide for Students* (188-192). London: Sage.

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

Guide to the National Quality Standard. (2018).

Harper, N (2017). Outdoor risky play and healthy child development in the shadow of the “risk society”: A forest and nature school perspective.

Kids Safe (2012). Challenging Play – Risky! Retrieved 28th July 2019

<https://www.kidsafensw.org/safety/playground-safety/challenging-play-risky/>

National Quality Standard Professional Learning Program: NQS PLP e-Newsletter No.58 (2013). Talking about practice: Adventurous play – Developing a culture of risky play.

Rethinking childhood- Tim Gill. <https://rethinkingchildhood.com>

Sandseter, E. B. H. (2007). Categorizing risky play – How can we identify risk-taking in children’s play? *European Early Child Education Research Journal*, 15(2), 237-252. Retrieved 26th July 2019

from <http://www.tandfonline.com/doi/full/10.1080/13502930701321733#.UygSNM6YcRA>.

Sandseter, Ellen Beate Hansen. (2011). Children’s risky play in early childhood education and care. *Childlinks*. 3.

Tovey, H. (2010). Playing on the Edge: Perceptions of Risk and Danger in Outdoor Play. In P. Broadhead, J. Howard & E. Wood (eds), *Play and Learning in the Early Years* (79-94). London: Sage.

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text to improve flow of wording • hyperlinks checked and repaired as required 		
POLICY REVIEW	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE

AUGUST 2021	New policy developed for FDC	AUGUST 2022
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2.47 FURNITURE & EQUIPMENT SAFETY POLICY

Nurture do believe that Adequate furnishings and equipment are an essential component of quality Family Day Care services. Under the Education and Care Services National Law and Regulations, we have a responsibility to protect the health and safety of children enrolled at our FDC Service. Whilst this is reflected in our health and safety policies, nursery furniture and equipment require careful consideration to minimise risks to all those entering the Service. It is clear that any Educator who is keeping any furniture which is not safe for children will be directed to throw or stored for repair on the spot and will not allow to keep any unsafe furniture. If any tupe of the incident occurs again then educator may be penalised or new furniture will be bought for Educator and educator need to pay for that furniture.(Nur)

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 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
3.1.2	Upkeep	Premises, furniture and equipment are safe, clean and well maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
116	Assessment of family day care residences and approved family day care venues
168	Education and care service must have policies and procedures
169	Additional policies and procedures- family day care service

170	Policies and procedures must be followed
174	Time to notify certain circumstances to the Regulatory Authority
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Child Safe Environment Policy	Physical Environment Policy
Health and Safety Policy	Supervision Policy
Incident, Injury, Trauma and Illness Policy	Work Health and Safety Policy

PURPOSE

Management and Family Day Care educators have a responsibility and duty of care to ensure that the building (residence or venue), furniture, grounds, and equipment are safe and hygienic. We aim to ensure that all furniture and equipment at the Family Day Care residence or venue adheres to recognised safety standards and is age appropriate for the children.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Our Family Day Care Service understands the importance of children experiencing and learning about risk through safe and creative play. All children have the right to be safe. The provision of safe environments for children is essential to prevent injury and enable them to grow and develop. Our FDC educators will only use furniture and equipment that has been made in accordance with Australian mandatory design standards and follow recommendations from the Kidsafe Family Day Care Safety Guidelines.

The Family Day Care Service will ensure:

- assessments are conducted of the Family Day Care residence or venue at least annually to ensure that the health, safety and wellbeing of children are protected
- a proactive process of risk management is implemented, and clear processes are in place for the identification of hazards, risk minimisation and other control measures
- every reasonable precaution is taken to protect children from harm (e.g., not locating a swing too close to a concrete wall)

- to adhere to the Education and Care Services National Law and Regulations and licensing requirements that relate to the safety of children at the Family Day Care Service
- records are kept of inspections and maintenance of furniture, playgrounds, and equipment
- FDC educators conduct daily/weekly routine visual inspections to identify obvious hazards in surfacing, fixed and mobile equipment, moving parts, swings, ropes, chains, tyres, fences, sandpits
- mandatory Australian Safety Standards are always adhered to when
 - purchasing new equipment or furniture, in particular in relation to cots, prams and strollers, baby dummies and dummy chains, baby walkers, bicycle helmets, and child restraints
 - installing equipment (for example: equipment footings, clustering of equipment, free height fall, swings)
 - entrapment hazards
- the equipment and furniture used in providing education and care at the residence/**approved** venue is safe, clean and in good repair
- there is sufficient furniture and developmentally appropriate equipment so each child can take part in the educational program depending on their interests, ages and abilities
- to implement recommendations from organisations, such as Kidsafe, on fall zones and suitable heights of furniture, equipment and playground equipment (soft fall such as grass, sand or tan bark) (minimum height of equipment **for requiring** fall zone is 500 mm)
- the age recommendation in relation to the age and developmental stage of the children using the furniture and equipment is adhered to.
- FDC educators are aware of appropriate instructions for use and supervision for all equipment and furniture
- furniture in the FDC residence or venue is securely built so it will not collapse, is easy to clean, and non-toxic
- entrapment hazards are identified; it is easy for small fingers and limbs to get caught in gaps. Head and upper body entrapments can cause death by asphyxiation. (Be aware that fingers can get caught in holes or openings between 5-12mm, limbs in gaps between 30-50mm and heads in gaps over 85mm.)
- all equipment and furniture is kept in a clean and hygienic state, particularly before and after food service.
- furniture and equipment does not contain any lead. This is most likely to occur with second-hand furniture
- the Regulatory Authority is notified of any serious incident involving serious injury or trauma to a child within 24 hours.

Educators/Educator Assistants will ensure:

- to provide effective supervision of children, including the supervision of infants at all times to minimise the risk of accidents and injuries that could result from the furniture and equipment within the learning environment and nursery
- consideration should be made for the different ages of children at the service and adapt supervision of these play resources accordingly
- they regularly check furniture and equipment for stability and wear and tear- (corners, surface-splinters, missing bike handle grips, faulty cleats in boards or ladders, heavy objects on climbing frames that destabilise the equipment)
- considerations are made about fall zones and heights recommended by KidSafe
- soft fall is maintained (grass, sand, tanbark or fall mats)
- they keep records of daily/weekly inspection of indoor/outdoor equipment
- that a record is kept of any furniture or equipment that needs maintenance in the *Equipment and Maintenance Record* and this is reported to the FDC Coordinator
- the FDC educator ensures repairs and maintenance is completed as indicated above
- they carefully consider all aspects regarding the use of furniture and equipment and how it suits the age and stage of the children's development
- to regularly test locking devices to ensure they are functioning correctly
- non-toxic, easy to clean surfaces will be sourced for all equipment
- to reflect on common accidents and incidents in the learning environment and implement an action plan to ensure the safety of children and minimise accidents at the Family Day Care Service
- to provide a safe physical environment that allows children to play safely
- they remain up to date with health and safety changes within the early childhood sector by attending appropriate professional development
- the furnishings and equipment within the program support and stimulate children's development
- the Coordinator/Approved Provider and Regulatory Authority are notified of any serious incident involving serious injury or trauma to a child within 24 hours.

Nursery Furniture

- all equipment will comply with compulsory Australian safety standards- (AS/NZS 2172 for cots AS 4684 for highchairs)
- locking devices and stability of cots and highchairs will be checked daily/weekly
- inspections will be made to check bolts and nuts on cots to ensure they are maintained as per instructions supplied with the cot
- nappy change facilities are suitable for children attending the service. Any nappy change table

must be sturdy and have:

- roll-off protection, such as a child safety harness and raised edges
- ends and sides that are raised at least 100mm with smooth edges
- no gaps that could injure a child's fingers or toes
- the Nursery area will be free from small objects or items that can break and become a potential hazard
- cots will be positioned away from heaters, power points, windows or curtain and blind cords
- FDC educators will always use furniture and equipment that is free of rough surfaces, sharp edges, points, projections and/or small pieces that can break off
- the use of unsafe equipment such as baby walkers will be avoided
- to reduce the risk of harm, collapsible furniture and furniture that presents possible entrapment hazards will not be used (e.g., toy boxes with heavy lids)
- sleeping infants will be closely monitored at all times
- all infants will be safely secured in their highchair when eating
- FDC educators will ensure that the sides of cots are put up when occupied by children

WESTERN AUSTRALIA JURISDICTION

Consideration requirements when assessing the Family Day Care Residences and Venues

Things to consider when conducting an assessment include:

- are the premises, furniture and equipment suitable for the children who attend the service?
- is fencing and security adequate?
- is there enough furniture, materials and equipment?
- availability of laundry facilities or other arrangements for dealing with soiled clothing?
- suitable toilet, washing and drying facilities?
- is there enough ventilation and natural light?
- have glass windows and doors been made child safe?
- availability of nappy change arrangements for children who wear nappies.
- are there any water hazards, water features or swimming pools at or near the premises?
- are there any animals that could harm the children?
- A record of assessment of family day care residences and approved family day care venues about safety of furniture and equipment

ADDITIONAL RESOURCES

Child Care Centre Desktop (Child Care Forms- Audits and Checklists)

Equipment and Maintenance Record

Outdoor Environment and Playground Safety Audit

Outdoor Cleaning and Safety Checklist

SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
- Australian Competition & Consumer Commission. (2013). Keeping baby safe – a guide to infant and nursery products: <https://www.productsafety.gov.au/publication/keeping-baby-safe-a-guide-to-infant-and-nursery-products>
- Australian Competition & Consumer Commission. (n.d.). Product safety Australia: Mandatory standards: <https://www.productsafety.gov.au/product-safety-laws/safety-standards-bans/mandatory-standards>
- Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia.*
- Early Childhood Australia Code of Ethics. (2016).
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
- Guide to the National Quality Standard. (2017).
- Kidsafe NSW Kidsafe (2020) *Family Day Care Safety Guidelines* 7th edition
- Kidsafe NSW Inc. Home and community safety information sheets: <https://www.kidsafensw.org/resources/information-sheets/>
- Revised National Quality Standard. (2018).
- [Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits • hyperlinks checked and repaired as required • link to WA National Regulations added for WA services 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEW REVIEW DATE
AUGUST 2021	<ul style="list-style-type: none"> • additional QA added (QA3) • Minor formatting changes • sources checked for currency • Reference to outdoor environment and playground safety audit added 		AUGUST 2022
AUGUST 2020	<ul style="list-style-type: none"> • additional regulations added • notification to Regulatory Authority added • points added to Management responsibilities • additional points to Nursery Furniture/Equipment • sources checked for currency- new source added 		AUGUST 2021
AUGUST 2019	<ul style="list-style-type: none"> • sentences reworded/refined • additional information added to points • points added • relevant sources added 		AUGUST 2020

	<ul style="list-style-type: none"> sources checked for currency – updated as required sources alphabetised related policies alphabetised 	
SEPTEMBER 2018	<ul style="list-style-type: none"> new policy draft for FDC 	SEPTEMBER 2019

2.48 SNAKE AWARENESS POLICY

Some of Nurture’s FDC educators operating an early childcare education and care service located in bush settings or visit bush settings as part of their educational program where it is known snakes may be active and present. Snakes are most prevalent during spring or summer but could be encountered at any time of the year- especially on sunny days.

Unprovoked, snakes rarely attack humans and are generally shy, timid animals that will avoid conflict if given the opportunity. Snakes are protected under the Nature Conservation Act 1992, and it is an offence to kill or injure them. The greatest risk of snake bite from venomous snakes is from people trying to kill or handle them.

Our Family Day Care Scheme is committed to ensuring our FDC educators provide a safe and healthy environment for children whilst being respectful of wildlife in and around our environment. We aim to minimise the potential risk of injury from a snake bite by educating children and FDC educators about the risks associated with snakes.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.2.3	Environmentally responsible	The service cares for the environment and supports children to become environmentally responsible

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
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7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
89	First Aid Kits
97	Emergency and evacuation procedures
98	Telephone or other communication equipment
100	Risk assessment must be conducted before excursion
168	Education and care services must have policies and procedures

RELATED POLICIES

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

We aim to ensure every reasonable precaution is taken to protect children and FDC educators from harm and hazards likely to cause injury, including the potential risk from snake bites. This policy aims to define the risks of snakes within environments in Family Day Care residences and approved venues, the necessary strategies implemented to minimise the risk of snake bites and the appropriate medical response if required.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

SNAKES

Australia has around 170 species of land snakes, some equipped with venom more toxic than any other

snakes in the world. Some of the most dangerous snakes belong to the front-fanged group including- the tiger snake, brown snake, eastern taipan, death adder and mulga or king brown snake. Although less venomous than many other Australian snakes, the red-bellied black snake is quite common in urban areas of NSW. Snake bites can be potentially fatal so immediate medical assistance should be sought for all cases of suspected snake bite.

Snakes are not naturally aggressive and always prefer to retreat. They will only attack humans if hurt or provoked. People are most likely to be bitten when attempting to kill or handle a snake.

IMPLEMENTATION

NOMINATED SUPERVISOR/COORDINATOR WILL:

- assist FDC educators to conduct a risk assessment to identify the potential risk of encountering a snake on the Family Day Care Service premises or approved venue
- assist in developing an emergency plan and procedure to include the response if encountering a snake and emergency first aid required in case of a snake bite
- provide a snake identification chart for snakes found in our local area for FDC educators and any support staff
- ensure all FDC educators and educator assistants have current emergency first aid training
- provide updates and information each 'snake season' of immobilisation techniques
- ensure educators display an emergency action plan in a prominent location should a snake bite occur
- ensure all FDC services have fully stocked First Aid Kits containing compression bandages
- ensure FDC educators conduct daily inspections of the outdoor and indoor learning environment prior to children arriving at the Family Day Care Service
- ensure lawns and gardens are well maintained at each residence and approved venue
- request educators cut any long grass around the boundaries of the premises
- ensure snake habitats such as piles of timber, compost heaps or sheets of galvanized iron are removed from around the premise
- ensure clean surroundings around any animal housing/cages to reduce any potential mice population (a food source for snakes) are maintained
- ensure any chicken or other animal enclosures are reptile proof
- ensure pet food and water bowls are not accessible to wildlife
- provide information to educators to give to families about snake awareness and recommended responses if encountering a snake
- ensure children are educated about how to respond to a snake sighting or encounter at the residence or when participating on an excursion

- ensure FDC educators have the contact number of Wires or other licensed snake handler readily available to assist in rescuing the snake if the snake cannot return to its natural environment- [for example the snake is located in a garden shed or storage container; the snake is located inside and is unable to exit the building/premises]
- follow procedures for notification of a serious incident to the regulatory authority in the unlikely event of an educator or child being bitten by a snake
- complete an *Incident, Injury, Trauma and Illness Record* in the event of a snake bite
- the approved provider will make a notification of a serious incident to a regulatory authority (within 24 hours) through the [NOA IT System](#) when emergency services have attended an education and care service in response to an emergency
- ensure all FDC educators, educator assistants and other staff wear enclosed footwear at all times.

FDC EDUCATORS AND EDUCATOR ASSISTANTS WILL:

- collaborate with the Nominated Supervisor/Coordinator to conduct risk assessments for potential risk of snakes in their environment
- examine the Family Day Care Service grounds during their daily indoor and outdoor safety checks to ensure no snakes are sighted
- ensure no animal food or water is left out for wildlife overnight
- ensure lawns and gardens are well maintained at each residence and approved venue
- ensure snake habitats such as piles of timber, compost heaps or sheets of galvanized iron are removed from around the residence or venue
- ensure emergency evacuation policies and procedures are in place in case of a snake encounter or snake bite
- ensure emergency First Aid training is current
- ensure the first aid kit is easily accessible and contains compression bandages
- always leave snakes alone
- be aware of snake species inhabiting the local area
- notify the Nominated Supervisor/Coordinator if a snake has been sighted within the FDC residence environment
- wear adequate clothing and enclosed shoes at all times
- educate children about snakes and snake bite prevention behaviours
- ensure children are reminded on a regular basis that if they encounter a snake, to move away quietly and report the sighting to the FDC educator
- educate children not to put their hands into hollow logs or rock crevices.

ENCOUNTERING A SNAKE

If a snake is sighted or encountered the FDC educator and educator assistant will:

- inform children to move away quietly
- remove all children from the immediate area, or evacuate the room until snake is removed if indoors
- isolate this area until the snake is removed or moves
- note the location of the snake
- if possible, monitor the snake from a safe distance (at least 5 metres away)
- if snake remains and is perceived to be a threat, contact local snake handler or WIRES [insert wildlife service in your jurisdiction]
- if indoors, close doors to the room and place towels along the bottom of the doors so the snake cannot move to another area and wait for snake handler to remove the snake
- **do not** approach the snake or try to contain it

2.48.1 EMERGENCY SNAKE BITE ACTION PLAN

- Conduct a primary survey of the area – do not attempt to catch or kill the snake
- Stay calm and call for help- have someone call 000 for an ambulance
- Reassure the child/adult and encourage them to keep calm and still
- Immediately apply a firm bandage over the bite marks or scratches
- Apply Pressure Immobilisation Technique (see Appendix 1)
- Maintain continued pressure and immobilise ensuring the child/adult does not move
- Rest and reassure the patient
- Do not take off clothing
- Do not wash bite as a venom sample can be used to identify the snake
- Do not cut or suck the bite to drain venom
- Do not apply a tourniquet
- Be prepared- resuscitation may be required

FAMILIES WILL:

- familiarise themselves with the *Snake Awareness Policy*
- ensure their child wears closed shoes when attending Family Day Care
- reinforce snake awareness behaviours with their child- especially during 'snake season'
- provide feedback to the Service regarding this policy for review and improvement.

APPENDIX 1

Pressure immobilisation bandage

A pressure immobilisation bandage is recommended for anyone bitten by a venomous snake. This involves firmly bandaging the area of the body involved, such as the arm or leg, and keeping the person calm and still until medical help arrives.

Follow these steps to apply a pressure immobilisation bandage:

- First put a pressure bandage over the bite itself. It should be tight, and you should not be able to easily slide a finger between the bandage and the skin.
- Then use a heavy crepe or elasticised roller bandage to immobilise the whole limb. Start just above the fingers or toes of the bitten limb and move upwards on the limb as far as the body. Splint the limb including joints on either side of the bite.
- Keep the person and the limb completely at rest. If possible, mark the site of the bite on the bandage with a pen.

(Source: Australian Government, *health direct*)

Poster

[First aid fact sheet Snake bite St John Ambulance](#)

First aid fact sheet
Snake bite

St John

! All known or suspected snake bites must be treated as potentially life-threatening, and medical aid should be sought urgently.

Signs and symptoms
Signs of a snake bite are not always visible. In some cases, the patient may not have felt anything. Symptoms may not appear for an hour or more after the person has been bitten.

Depending on the type of snake, signs and symptoms may include some or all of the following:

- immediate or delayed pain at the bite site
- swelling, bruising or local bleeding
- bite marks (usually on a limb) that may vary from obvious puncture wounds to scratches that may be almost invisible
- swollen and tender glands in the groin or armpit of the bitten limb
- faintness, dizziness
- nausea and vomiting
- headache
- abdominal pain
- oozing of blood from the bite site or gums
- double or blurred vision
- drooping eyelids
- difficulty in speaking or swallowing
- limb weakness or paralysis
- difficulty in breathing
- occasionally, initial collapse or confusion followed by partial or complete recovery.

What to do
Pressure bandage & immobilise

- 1 Follow DRSABCD.
- 2 Call triple zero (000) for an ambulance.
- 3 Lie the patient down and ask them to keep still. Reassure the patient.
- 4 If on a limb, apply an elasticised roller bandage (10-15 cm wide) over the bite site as soon as possible.
- 5 Apply a further elasticised roller bandage (10-15 cm wide), starting just above the fingers or toes and moving upwards on the bitten limb as far as can be reached.
 - Use clothing or other material if an elasticised roller bandage is not available.
 - Apply the bandage as firmly as possible to the limb. You should be unable to easily slide a finger between the bandage and the skin.
- 6 Immobilise the bandaged limb using splints.
- 7 Keep the patient lying down and completely still (immobilised).
- 8 Write down the time of the bite and when the bandage was applied. If possible, mark the location of the bite site (if known) on the skin with a pen, or photograph the site. Do not wash venom off the skin or clothes because it may assist identification.
- 9 Stay with the patient until medical aid arrives.

In a medical emergency call Triple Zero (000)

DRSABCD Danger ► Response ► Send for help ► Airway ► Breathing ► CPR ► Defibrillation

You could save a life with first aid training • www.stjohn.org.au • 1300 360 455

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SOURCE

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

Australian Venom Research Unit, University of Melbourne www.avru.org

Australian Capital Territory Government Environment, Planning and Sustainable Development Directorate-Environment *Urban Wildlife Snakes*

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

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

Guide to the National Quality Framework. (2018). (Amended 2020).

Health Direct <https://www.healthdirect.gov.au/snake-bites>

Revised National Quality Standard. (2018).

St John Ambulance Australia (2020 *First aid fact sheet Snake Bite*

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • link to Western Australian Education and Care Services National Regulations added in 'Sources' • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEW	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
AUGUST 2021	New policy drafted for FDC service types	AUGUST 2022	

2.49 UV / SUN SAFE POLICY

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

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child.

2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.1.1	Fit for Purpose	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child

EDUCATION AND CARE SERVICES NATIONAL LAW	
167	Protection from harm and hazards

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
100	Risk assessment must be conducted before excursions
113	Outdoor space natural environment
114	Outdoor space shade
168	Education and care service must have policies and procedures
168 (2)(a)(ii)	Sun Protection

RELATED POLICIES

Clothing Policy Enrolment Policy Excursion/ Incursion Policy Health and Safety Policy	Physical Environment Policy Supervision Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

To protect all children and staff from the harmful effects of ultraviolet (UV) radiation from the sun. To ensure the outdoor environment provides shade for children and the educator to minimise unsafe UV exposure.

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, Educators, Educator Assistants, children, families, and visitors **(including contractors)** of the Family Day Care Service.

IMPLEMENTATION

Our FDC 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 applies to all activities at a FDC residence or venue, or whilst engaging in regular outings and excursions.

2.49.1 MONITORING UV LEVELS

Sun protection is required when UV levels reach level 3 or above. FDC educators will monitor the UV levels daily through one or more of the following methods:

- Using the smartphone [SunSmart app](#) available at iTunes App Store and Google Play store
- Using the SunSmart widget on the Service's website available at www.cancer.org.au
- Viewing the Bureau of Meteorology website <http://www.bom.gov.au/>
- Visiting www.myuv.com.au

2.49.2 OUTDOOR ACTIVITIES

The sun protection measures listed are used for all outdoor activities during the daily local sun protection times, when the UV Index is 3 or above. The sun protection times are a forecast from the Bureau of Meteorology for the time of day UV levels are forecast to reach 3 or higher. At these levels, a combination of sun protection is recommended for all skin types.

FDC Educators will use a combination of sun protection measures (see below) **whenever UV Index levels reach 3 and above.**

2.49.3 Sun protection times

UV levels vary across Australia and throughout the year. This listing highlights when UV is typically three and above in each state / territory. 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 for your location.*

[Adjust policy specific to your state/territory requirements].

ACT August to end of May

Wherever practicable, outdoor activities should be minimised between 11am and 3pm in summer.

NSW All year

Extra care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.

NT	All year Wherever practicable, outdoor activities should take place before 10am and after 3pm, when UV levels are lower.
SA	August to end of April Extra care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.
TAS	September to the end of April Active outdoor play is encouraged throughout the year provided appropriate sun protection measures are used when necessary.
VIC	Mid-August to the end of April Active outdoor play is encouraged throughout the day all year provided appropriate sun protection measures are used when necessary.
WA	All year Active outdoor play is encouraged throughout the day all year provided appropriate sun protection measures are used when necessary.
QLD	All year Wherever practicable, outdoor activities should take place before 10am and after 3pm, when UV levels are lower.

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

2.49.4 SHADE

- Sufficient natural, portable, or man-made shade will be provided, particularly in high use areas
- Shaded areas will be used for play experiences
- Play experiences will be monitored throughout the day and moved as required to remain in the shade
- Regular risk assessments and reviews will be made of the outdoor area to assist in planning for further shade requirements

- Children who do not have appropriate hats or outdoor clothing are required to choose a shady play space or a suitable area protected from the sun and not move to unshaded areas of the playground.

2.49.5 HATS

FDC educators, children, and visitors are required to wear sun safe hats at all times they are outdoors.

Cancer Council Australia describes sun safe hats as:

- Hats that protect a person's face, neck, and ears, which include:
 - a legionnaire hat – the front peak and flap should overlap at the sides and the flap should cover the neck
 - a bucket hat with a deep crown and angled brim that is at least 5cm for young children and at least 6cm for adults and must shade the face, neck, and ears
 - a broad brimmed hat with a brim size of at least 6cm for children or 7.5cm for adults. The brim should provide shade for the whole face.

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

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

2.49.6 CLOTHING

- When outdoors, educators 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.

2.49.7 SUNSCREEN

As per Cancer Council Australia recommendations:

- educators and children will apply SPF30 or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours or more frequently if washed or wiped off
- permission to apply sunscreen is included in the FDC Service enrolment form (see: *Enrolment Policy*)

- where children have allergies or sensitivity to the sunscreen, parents are asked to provide an alternative sunscreen or a child is encouraged 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 the FDC educator and are encouraged to do so
- sunscreen is stored in a cool, dry place and the use-by-date monitored.

2.49.8 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 is 3 or above
- physical protection such as shade positioning, clothing and broad-brimmed hats are the best sun protection measures the front peak and flap should overlap at the sides

If babies are kept out of the sun or well protected from UV radiation by clothing, hats and shade, then sunscreen need only be used occasionally on very small areas of a baby's skin. The widespread use of sunscreen on babies under 6 months old is not recommended

2.49.9 RISKS OF SUMMER PLAY

Australia has a hot climate and inevitably playground equipment and surfacing can heat up rapidly and retain heat. Many playground surfaces and equipment can exceed temperatures greater than 50°C and if young children come into contact with these surfaces, they can be burned severely within seconds.

The FDC educator and coordinator will:

- ensure risk assessments are conducted to identify any potential hazards to children during summer months that could cause harm or injury to children. Risk minimisation control measures will be put in place to protect children. Potential hazards could include:
 - hot equipment- slides, poles, guardrails, any metal surfaces
 - hot surfaces- rubber and synthetic grass, walkways, concrete surfaces
 - sun burn
 - access to bodies of water (filled water troughs/containers/trays/pools)
- **complete a *Daily Playground Surface Temperature Check* during summer months or extreme hot weather**
- 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 or mud pit]

2.49.10 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 and educator assistants will therefore be required to role model appropriate sun protection behaviours by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF30+ broad-spectrum water-resistant sunscreen 20 minutes before going outdoors
- using and promoting shade
- wearing sunglasses that meet the Australian Standard 1067:2003 (optional)
- discussing sun protection with children and demonstrating a positive and proactive approach to the management of sun protection in the service
- families and visitors are encouraged to role model positive sun safe behaviour
- monitoring the UV Index and Daily Sun Protection Times throughout the day
- regularly monitoring and reviewing the effectiveness of the *Sun Safety Policy*
- submitting the Sun Safety Policy to the Cancer Council every three years to maintain SunSmart status (required if a SunSmart member).

EDUCATION AND INFORMATION

- Sun protection will be incorporated regularly into learning programs
- Sun protection information will be promoted to all FDC educators, families and visitors.
- Educators and educator assistants are encouraged to complete free Cancer Council Generation SunSmart online PL learning modules
- Further information and resources are available from the Cancer Council website <https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety> and each state and territory SunSmart web page.
See <https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/be-sunsmart/sunsmart-in-schools> for links.

- The *Sun Safety Policy* will be made available to all educators, staff, families, and visitors of the Service to ensure a comprehensive understanding about keeping sun safe including appropriate hat, clothing and sunscreen requirements
- When enrolling their child/ren to our Family Day Care Service, parents will be required to give permission for the FDC educator or educator assistant to apply sunscreen to their child
- Information about Sun Safety will be included in our Family Handbook and sun protection information and resources made accessible and communicated regularly to families.

CONTINUOUS IMPROVEMENT

Our *Sun Safe Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

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

SOURCE

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

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

Australian Professional Standards for Teachers (APST)- Standard 4.4 and 7.2

ARPANSA [Radiation Protection Standard for Occupational Exposure to Ultraviolet Radiation](#) (2006)

Bureau of meteorology. Home page (for UV Index): <http://www.bom.gov.au/uv/>

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 2018).

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

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

Guide to the National Quality Standard. (2017).

Kidsafe NSW [Playground Safety](#) .(2020).

Occupational Health and Safety Act 2004

Revised National Quality Standard. (2020).

REVIEW

Note: Our Sun Safe Policy has recently been reviewed by Cancer Council’s SunSmart program in each state and territory and when used in its entirety meets SunSmart membership criteria. (August 2021).

Please note: Certain health conditions and medications mean some people are more sensitive to UV radiation and need to use sun protection at all times regardless of the UV levels. Please make sure your policy includes the particular needs of these children and staff at your school/service. For further information visit [Risk factors for skin cancer](#).

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> regular policy maintenance link to Western Australian Education and Care Services National Regulations added in ‘Sources’ minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
AUGUST 2021	<ul style="list-style-type: none"> Policy reviewed by Cancer Council’s SunSmart Program for all states/territories additional information re: Sun Protection times for each state/territory added small additions to wording included in policy- re: hat/brim size, safety standards, links to resources and information 		SEPTEMBER 2022
JANUARY 2021	<ul style="list-style-type: none"> additional UV index level information edited webpage address for BOM optional Daily Playground Surface Temperature Check added minor edits 		SEPTEMBER 2021
SEPTEMBER 2020	<ul style="list-style-type: none"> Additional regulation re: risk assessments Additional section for Risks of Summer Play Information about parent handbook added minor editing changes for consistency for FDC services regulations added to sources 		SEPTEMBER 2021
SEPTEMBER 2019	<ul style="list-style-type: none"> Revision and re-write Current Regulations included in source 		SEPTEMBER 2020
MAY 2019	<ul style="list-style-type: none"> Latest updates have been made to comply with the latest recommendations by the Cancer Council of Australia and the SunSmart program. 		SEPTEMBER 2019

SEPTEMBER 2018	<ul style="list-style-type: none"> • Latest updates include terminology and grammar improvements. • Added the section displaying related policies on page 1. 	SEPTEMBER 2019
OCTOBER 2017	<ul style="list-style-type: none"> • Updated the references to comply with the revised National Quality Standard 	SEPTEMBER 2018
AUGUST 2017	<ul style="list-style-type: none"> • Minor changes made to comply with being a Sun Smart Service 	SEPTEMBER 2018

2.50 WATER SAFETY POLICY

2.50.1 Educator Must READ

According to the Nurture Childcare and Education Services all Educator must have to aware that our water policy prevents to all educator to visit to the places where are pool, water features lakes, ocean, rivers, Creeks or other deep-water sources are available. Even water safety at home is also highly required when providing care to children. Educator need to be care full that children must be along with educator all the time and 100% supervision required. Children must not allow to enter into bathroom where there is bath tub available and educator has not locked to their bathroom. (Educator must have to lock the bathroom and children must be accompanied to educator if they required to enter into FDC bathroom. Educator must not plan any deep-water activities and must not take to children in any place where swimming pools are available e.g., Leisure complex, centre, friend or relative house where swimming pool is available etc are included but not limited. Any educator found doing any visit purposefully may be ask to explain the reason and if not satisfactory then educator may be penalised due to misconduct and not following service policy and procedures. (Nur)

The safety and supervision of children is paramount when in or around water. This policy relates to water play, excursions near water, hot water, drinking water and hygiene practices with water at the Family Day Care Service approved residences and venues. 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.

LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
Sec. 165	Offence to inadequately supervise children
Sec. 167	Offence relating to protection of children from harm and hazards
26(1)(l)	Application for service approval- family day care-swimming pool
101	Conduct of risk assessment for excursions
115	Premises designed to facilitate supervision
116	Assessments of family day care residences and approved family day care venues
116 (2) (d)	The existence of any water hazards, water features or swimming pool at or near the residence or venue
136	First aid qualifications
168	Education and care service must have policies and procedures
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
274	Swimming pools (NSW)
345	Swimming pools prohibition (Tasmania only)

RELATED POLICIES

Administration of First Aid Policy Child Safe Environment Policy Educational Program Policy Excursion/Incursion Policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Physical Environment Policy Sun Safe Policy Supervision Policy
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PURPOSE

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

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, Educators, Educator Assistants, children, families, and visitors **(including contractors)** of the Family Day Care 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, nappy/**mop** buckets
- sinks, basins
- water features, such as a wishing well
- containers for feeding animals
- water troughs, containers
- beach

DROWNING

Drowning is one of the major causes of unintentional death for children 0-4 years. According to the Life Saving Society of Australia an annual average of 30 drowning deaths of children aged 0-4 years occur in swimming pools and 5 drowning deaths of children 0-4 years in bathtubs/spa baths.

(Kidsafe, 2020).

Although home swimming pools are the most common site for drowning, children can drown in just a few centimetres of water. Adult supervision of young children is therefore critical when any child is in or around water.

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.

Legal requirements for pools, spas, paddling pools and other water troughs vary across each state and territory. Family Day Care Service Providers must ensure they adhere to Regulations, Council

requirements and national safety standards when approving an educator and assessing the residence before providing care approval. Some states/councils require FDC educators to have a current Pool/Spa safety certificate. [ensure this policy reflects the regulations/requirements of your state/territory and FDC Service approvals]

Western Australia

Additional regulations to improve safety within Family Day Care Services residence and approved venues located within Western Australia have been introduced from 1st September 2022 for FDC Service residence and approved venues with a swimming pool, spa or water feature. Changes include requirements for Approved Providers to undertake monthly inspections, keep records of the monthly inspections, report safety issues to ECRU and ensuring additional communication devices are available. Additional requirements regarding installation of safety devices will be introduced from 1st March 2022. From 31st December 2020 new FDC educators will not be able to register and operate with a swimming pool or spa in Western Australia.

FDC Services with a water feature/s may be subjected to monthly inspections from the Approved Provider if the water feature has a permanent standing body of water with a depth of water greater than 30 cm, and it is accessible to children therefore posing a risk. [WA Services]

Family Day Care Approved Provider/ Coordinator will:

- conduct annual assessments of the approved FDC residence and or venue
- conduct and record monthly inspections of swimming pools, water features and spas for FDC service residence and approved venues [mandatory for WA Services, other states may implement this action as best practice]
- ensure swimming pools or spas have a safety device has been installed to alert or deter a child from entering the water [mandatory from 1st March 2023 for WA Services]
- ensure detailed risk assessments are completed for any identified water hazards and water-based activities
- ensure boundary barriers around pools and spas comply with Australian Standards including
 - self-locking gates
 - making spas inaccessible with locked pool cover and isolation barriers at least 1.2m high
 - ensure pool barriers are at least 1.8m high
 - ensuring any doors that form part of the pool barrier have a self-closing mechanism and child resistant lock
 - making pool filters inaccessible to children

- inform all families of FDC educator residences that have swimming pools or spas and the risk mitigation strategies that have been implemented to provide safety for their child whilst in the care of the educator
- ensure no person engages in swimming whilst education and care is provided by the FDC educator (including other children who live at the residence)
- provide direction and education to educators, educator assistants and families on the importance of children's safety and supervision in and around water
- ensure health and safety practices are incorporated to ensure safe storage of water and water play
- ensure premises adjacent to or providing access to any water hazards that are not able to be adequately supervised at all times (e.g. dams, swimming pool) are to be isolated from children by a child resistant barrier or fence
- ensure that each FDC educator and educator assistant hold current first aid certificates, including CPR at all times (Regulation 136)
- ensure all swimming pools at the family day care educator's residence and/or venue comply with the Australian Standards and State regulations for pool fencing and gates
- ensure any items around the perimeter of the pool (for example, tables, chairs, pot plants etc.) are not able to be used as a climbing aid for children
- ensure a Cardiopulmonary Resuscitation (CPR) chart is displayed near any water
- ensure any containers that hold or collect water, such as nappy buckets, ponds, spas must be safely covered or made inaccessible to children
- ensure educators maintain a back-up communication device that is kept in a permanent location and is always available in an emergency [mandatory for WA Services]

Family Day Care Educators/ Educator Assistants will:

- complete risk assessments that identify and assess risks associated with any water hazards and water-based activities
- ensure all water hazards have Australian Standard barriers- fencing; self-closing mechanism and child-resistant locks
- complete and assist in record keeping of monthly inspections of swimming pools, spas and water features [mandatory for WA Services, other states may implement this action as best practice]
- ensure pools or spas have a safety device has been installed to alert or deter a child from entering the water [mandatory from 1st March 2023 for WA Services]
- ensure a back-up communication device is available at all times, located in a permanent location in FDC residence or approved venue [mandatory for WA Services]
- ensure they hold a certified safety certification and final council approval for pool fencing

- advise new families of the water hazards at their residence prior to care beginning- pool, spa, fishpond, dam, water tanks
- ensure water hazards and water play are always highly supervised including:
 - supervising children near water at all times
 - never leave children alone near any water
 - direct and constant monitoring of children
 - scanning and moving around the environment
 - observing play and anticipating behaviour
- conduct a risk assessment in accordance with the regulatory requirements (regulation 101) prior to taking children on an excursion, clearly identifying any water hazard and indicating how this is assessed and managed
 - seek approval by the Approved Provider before any outing/excursion is conducted
 - ensure all emergency procedures are adhered to whilst on any excursion as per *Excursion Policy*
- gain prior written authorisation from parents, indicating any water hazard and educator to child ratios that will be applied to ensure supervision requirements are met, prior to any excursion.
 - for children who are less than 3 years- 1 adult to each child
 - for children who are at least 3 years but not yet 6 years- 1 adult to 2 children
 - for children 6 years and over- 1 adult to 4 years
- ensure children in a bath (if required) are
 - directly supervised at all times
 - remain within arm's reach of children
- empty water immediately after use
- ensure fish / frog ponds and water features that are not able to be adequately supervised at all times and/or pose an unacceptable risk to children are guarded or effective barriers are in place
- complete a daily Safety Inspection of premises to ensure that all hazards are known and minimised (including items close to a pool fence that could provide climbing access). When a hazard or potential hazard is detected, the educator will complete a risk assessment to address any concerns and children will be excluded from the area until the hazard has been rectified.
- utilise water activities in appropriate weather as part of the planned program
- allow the children the opportunity to experiment with water, sand, and mixing materials
- incorporate water safety awareness into the educational program
- monitor all taps on the premises that children have access to and ensure they are turned off securely when not in use
- safely cover or make inaccessible to children all water containers, e.g. mop buckets.

- empty wading pools immediately after every use and store to prevent the collection of water, e.g. upright
- check for and empty any water that has collected in holes or containers after rainfall or watering gardens
- ensure water troughs are not used without a stand to keep it off the ground.
- ensure children remain standing on the ground whilst using the water trough
- ensure buckets of water for soaking toys or clothing are inaccessible to children
- ensure water troughs or containers for water play are filled to a safe level and emptied into the garden areas after **each** use
- discourage children from drinking from these water activities (as above)
- ensure laundry, storerooms have signage to remind the educator/adults to close doors behind them
- teach children about staying safe in and around water
- ensure wading pools are hygienically cleaned, disinfected and chlorinated appropriately:
 - on a daily basis remove leaves and debris, hose away surface dirt and scrub inside with disinfectant
 - wash away disinfectant before filling pool
 - add Chlorine to pool before children used the pool
 - check chlorine levels frequently
 - children with diarrhoea, upset stomach, open sores or nasal infections should not use the pool
 - all children should wear appropriate swimwear / bathers, go to the toilet before entering the pool, and follow correct toilet hygiene practices while in the pool.
 - remove all children immediately, empty and disinfect the pool should a child pass a bowel motion whilst in the pool.

OPERATIONAL SAFETY

- Water tanks will be labelled with “Do Not Drink” signage and the children will be supervised in this area to make sure they are not accessing this water for drinking
- The educator will discuss with the children the use of water tank water and how it differs from drinking water
- Hot water accessible to children will be maintained at the temperature of 45.C° which will be tested annually (AS 3498)
- Water for pets at the FDC residence must be changed daily and only be accessible to children when the educator or educator assistant is supervising.

WA RESIDENCE/APPROVED VENUES - SAFETY DEVICES

From 1st of March 2023 educators located within Western Australia will be required to install safety devices to swimming pools or spas. The safety device will be designed to alert or deter a child from entering the pool, spa or surrounding areas. Appropriate types of device may include:

- gate alarms that provide an alert when a gate is left open
- pool alarms that provide an alert when someone has entered the pool area
- personal alarms designed to alert when a child enters a pool
- pool covers that are fixed in such a way that a child may not lift them to gain entry and can support the weight of anyone falling onto them

[mandatory for WA Services, other states may implement this action as best practice]

IMPORTANT: Parents will be notified as soon as practicable but within 24 hours if their child is involved in an incident/accident at the FDC Service or while under Service care.

Details of the incident/accident will be recorded on an *Incident, Injury, Trauma and Illness Record*.

If the incident/accident, situation or event presents imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours by the Approved Provider.

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.

CONTINUOUS IMPROVEMENT

Our *Water Safety Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

RESOURCES

[KidSafe Family Day Care Safety Guidelines 2020 \(7th edition\)](#)

Royal Life Saving Society Australia Toddler drowning prevention

<https://www.royallifesaving.com.au/families/at-home/toddler-drowning-prevention>

The Royal Children's Hospital Melbourne Safety: Swimming Pools

https://www.rch.org.au/kidsinfo/fact_sheets/Safety_Swimming_pools/

SPASA Australia *Australian Pool Fencing Rules*

<https://www.spasa.com.au/consumer-info/fencing-laws/>

The Children's Hospital at Westmead *kids health* Burns and scalds

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure Guidelines. *Water Safety*
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011)
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations (2017).
 Guide to the National Quality Standard. (2017).
 Government of Western Australia. Department of Communities. [Family day care residences or venues with swimming pools, spas and water features in Western Australia](#)
 Kidsafe Family Day Care Safety Guidelines 7th Edition (2020).
 National Health and Medical Research Council (NHMRC): www.nhmrc.gov.au
 NSW Department of Health: www.health.nsw.gov.au
 Revised National Quality Standard. (2018).
 Victoria Government. Better Health Channel. Water safety for children.
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> regular policy maintenance link to Western Australian Education and Care Services National Regulations added in ‘Sources’ minor formatting edits within text hyperlinks checked and repaired as required Additional information regarding ‘safety devices’ and monthly inspections for residence/venues with pool/spas for services located within Western Australia 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
SEPTEMBER 2021	<ul style="list-style-type: none"> Policy reviewed and included suggested guidelines from ACECQA Water Safety Policy Guidelines (June 2021) Additional legislative requirements added Additional related policies deleted ‘nappy’ bucket and replaced to ‘mop bucket’ 		SEPTEMBER 2022
SEPTEMBER 2020	additional section re: ‘water hazards’ risk assessment measures added detail regarding fencing/child resistant locks added hot water temperature edited re: Australian Standards additional supervision section added additional sources sources checked for currency		SEPTEMBER 2021

	resources added	
SEPTEMBER 2019	Wording 'corrected'. Some sentences reworded/refined. Additional information added. Points added. Sources/references corrected, updated, and alphabetised. Related policies alphabetised.	SEPTEMBER 2020
SEPTEMBER 2018	Latest updates include terminology and grammar improvements. Added the section displaying related policies on page 2.	SEPTEMBER 2019
DECEMBER 2017	Updated to comply with National Quality Standard	SEPTEMBER 2018
MAY 2017	Policy updated to comply with Family Day Care Regulations	TBA

2.51 PHOTOGRAPH POLICY

Nurture Childcare and Education Services 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 organizational 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 care for by Family Day Care (FDC) educators in approved residences and/or venues. To ensure the privacy of children and families is respected, our FDC educators will only use photographs of children to support their learning and to record individual developmental progress with written authorization from parents/guardians. Written authorization form is attached for the information of Educator so they can always use the form to get permission from the parents. (NUR)

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

RELATED POLICIES

Child Safe Environment Policy	Enrolment Policy
Child Protection Policy	Social media Policy
Code of Conduct Policy	Technology Policy
Dealing with Complaints Policy (Families)	Privacy and Confidentiality Policy
Educational Program Policy	Respect for Children Policy

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 the educators, educator assistants, children, families, **Approved Provider, Nominated Supervisor, Coordinators, students, volunteers** and visitors **(including contractors)** of the Family Day Care Service.

IMPLEMENTATION

The displaying of photos at FDC residences and/or venues provide 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.

Management 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 the FDC educator or educator assistant (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 FDC 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 or educator assistants support the children's learning and record children's individual progress
- photographs recorded are part of a normal day and are taken using a digital camera or service owned/registered electronic device and are only taken by approved FDC educators, educator assistants, or by practicum students with written parental permission
- at no time are 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
- that the FDC Service and/or educator seeks written permission from families for their child to be photographed when an outside photographer/agency is contracted to take photographs for marketing purposes or to take individual and group photos once a year. Only children who have written permission from their parent/guardian will be included in any photography

- that the FDC Service notifies parents of the purpose of taking photographs such as use on the Service's website, advertising flyers/brochure, parent handbook and *Social Media Policy*
- 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 or Nominated Supervisor at time of enrolment or if their decision for consent changes
- a record of all children who are NOT to be photographed will be developed, maintained and shared with FDC educators and educator assistants
- FDC educators will keep an up-to-date record of enrolled children at their service who are NOT to be photographed
- this record will remain private and confidential
- 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 FDC 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 FDC service environment

Families (Parents/carers) will:

- complete the FDC Service's enrolment form at time of enrolment and provide written notification (Yes/No) to the Nominated Supervisor/Coordinator if they do **NOT** want their child to be photographed or their photo published in any form. The Nominated Supervisor/Coordinator will keep a record of children who are not to be photographed and notify relevant FDC educators
- be invited to record their child's inclusion in group events and celebrations through the use of photographs or video on the understanding that they will not publish any material on the Internet, including on their personal social media, as the Service has no control over these images once they are in the public domain. (*see Social Media Policy*)
- be requested to provide written permission/consent for FDC 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 FDC 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
- be provided with clear information about how to make a complaint and our complaints handling processes.

CONTINUOUS IMPROVEMENT

Our *Photograph Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

SOURCE

Byrnes, J., & Wasik, B. (2009). Picture this: Using photography as a learning tool in early childhood classrooms. *Childhood Education, 85*.

Child Protection Act, 1998.

Education and Care Services National Regulations. (2011).

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

Guide to the National Quality Standard. (2017).

NSW Government. Office of the Children’s Guardian *Child Safe Standards* (2020).

Privacy Act 1988

Revised National Quality Standards. (2018).

Victoria State Government Department of Education and Training (2020). *Child Safe Standards: Creating a safe environment*

Western Australian Education and Care Services National Regulations

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023

MODIFICATIONS	<ul style="list-style-type: none"> regular policy maintenance link to Western Australian Education and Care Services National Regulations added in 'Sources' minor formatting edits within text hyperlinks checked and repaired as required 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
SEPTEMBER 2021	<ul style="list-style-type: none"> inclusion of considerations for Child Safe Standards- translation of policies/dealing with complaints processes added information about enrolment form- providing written authorisation (YES/NO) regarding photography and video sources checked for currency 	SEPTEMBER 2022
OCTOBER 2020	<ul style="list-style-type: none"> re-write of policy to ensure inclusion of Child Safe Standards/written consent for photography and video of children Management/educator responsibility section added family (parent/carers) section added detailing requirement to notify service if they do not want their child photographed 	SEPTEMBER 2021
OCTOBER 2019	New policy drafted	OCTOBER 2020

2.51.1 PHOTOGRAPHY AND PROMOTIONAL MATERIAL PERMISSION LETTER

Dear Parents,

Children at our Service will often be involved in various events and activities where they may be photographed. Photographs of children are used to document children's learning and in various marketing promotions. This includes social media, newsletters, brochures, web site, Facebook, Whatsapp educator/ family groups, Service promotional documents, Service Facebook or Whatsapp status and special events.

The Service recognises that photography, filming and audio are valuable learning tools, utilised in many ways to document children's progress and development. The Australian Privacy Principles (APPs) specify requirements when collecting personal information about individuals. The Service has a responsibility to ensure compliance with Privacy Laws and seek permission to take and use photographs of children.

If you have any questions or concerns, please feel free to contact management at your earliest convenience.

Please Note: This permission form is effective for the duration of your child's enrolment at the Service however, permission may be withdrawn at any time with written notification.

Yours sincerely

Hamparbha Sharma

Director / Nominated Supervisor

Nurture Childcare and Education Services

I _____ understand the privacy considerations revealed for my child _____
[Insert Parent Full Name] [Insert Child's Full Name]

I do give/do not give permission for photographs of my child to be used by Educators and students to document children's learning.	
I do give/do not give permission for my child's photograph to be used to promote the Service, including social media, newsletters, brochures, web sites, Whatsapp groups, Service social media status and during special events or activities.	
Parent's Full Name	
Parent Signature	

2.52 TECHNOLOGY POLICY

Digital technologies and computers have become an integral part of many children's daily lives. For this reason, it is important that our Family Day Care (FDC) educators are not only familiar with the use of digital technologies, but are able to guide children's understanding of, and ability to **use them interact, engage, access and use a range of digital technology in a child safe environment**. Technology and media items will only be used as an extension to the daily program assisting in the development of social, physical, emotional, cognitive, language, and creative potential of each child. Digital technologies can be helpful in the retelling of stories about our culture, help to celebrate diversity and assist in providing an inclusive and equitable educational program.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 1: EDUCATIONAL PROGRAM AND PRACTICE		
1.1.1	Approved learning framework	Curriculum decision-making contributes to each child’s learning and development outcomes in relation to their identity, connection with community, wellbeing, and confidence as learners and effectiveness as communicators.
1.1.3	Program learning opportunities	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child’s learning.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational Program
76	Information about educational program to be given to parents
155	Interactions with children
156	Relationships in groups
181-184	Confidentiality of records and storage of records

RELATED POLICIES

<p>Child Protection Policy</p> <p>Child Safe Environment Policy</p> <p>Code of Conduct Policy</p> <p>Cyber-Safety Policy</p>	<p>Dealing with Complaints Policy</p> <p>Educational Program Policy</p> <p>Privacy and confidentiality policy</p> <p>Social Media Policy</p>
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PURPOSE

Nurture Childcare and Education Services will ensure FDC educators implement responsible behaviour and limit screen time when using technology, respecting the children, and the privacy of families and educators. Educators will exercise appropriate judgement and behave in a professional and ethical manner when using technology. **At all times, FDC educators will provide a child safe environment and supervise children when using technology to minimise the opportunity for abuse or other harm to occur (Child Safe Standard 8). Educator should not provide Screen time more than 30 to 45 Minutes to children for their entertainment or for the knowledge and can't exceed the time on the name of children learning. If necessary, Educator can provide time in different series of learning episodes but should not exceed the given time into the Nurture Childcare and Education Technology Policy.(Nur)**

SCOPE

This policy applies to the Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Technology when used appropriately, can be a tool for learning, especially when educators play an active role. The Internet is a magnificent resource for research, communication, and extending programming ideas and interests. Computer/Ipad use within our Service aims to encourage children to solve problems and use logical reasoning, leading children to make decisions and choices and assisting them to use computer software competently and safely. FDC educators are diligent in ensuring children are only able to access age-appropriate technology on any device provided at the FDC service/residence or approved venue. & Must have to stay nearby and keep eye on the available content on the technology device. (Nur)

Definition of terms

- App: An abbreviation of the term 'Application'- refers to small programs that can be downloaded or installed on mobile phones
- Coding: Process of creating and inputting messages that can be understood by others or a digital device such as a computer robotic toy or app
- Digital data: Information that is transmitted digitally, including (but not limited to) text, audio, images and video
- Digital technology: enables large amounts of data to be stored and shared so it can be accessed, created and used by people anywhere and at any time
- Digital documentation: recording and analysing children's engagement and learning using digital tools. (includes photos, text and video and may be communicated via an online program).
- Interactive whiteboard: a digital screen that projects content for groups of children to view or co-view or co-engage. Incorporates touch sensitive or responsive controls so the user may engage via the screen rather than a mouse or keyboard

(source: ECA Statement on young children and digital technologies, 2018.)

Examples of technology for early childhood education may include:

- touchscreen devices- tablets (iPads)
- programs that develop literacy or numeracy skills with ICT such as word processing, desktop publishing
- internet and information literacy skills
- Robotic toys- such as bee bots
- scanners
- Interactive whiteboards/data projectors

Management of the Family Day Care Service will:

- provide professional learning to educators in response to the ECA- *Statement on young children and digital technology*
- provide professional development, information to educators related to the [e-Safety Commissioner- Early Years Program](#)
- provide regular training for all FDC educators on reporting obligations (including mandatory reporting) and child safe practices
- report any breach of child protection legislation to relevant authorities- police, [enter child protection authority in State/Territory], regulatory authority through NQA ITS portal (*see: Child Safe Environment, Child Protection Policies*)
- identify technology training needs of FDC educators for provide professional development
- ensure risk assessments of FDC residence and/or venue reflect on the physical environment to ensure it supports child safe practices
 - consider the location of digital technology/equipment to ensure FDC educators can supervise children when children are using digital technologies
 - ensure all devices used in a FDC residence or venue are set up safety- with controls, filters and safe search settings
 - ensure all devices are password protected with access for FDC educator/educator assistant only
- ensure the Service *Privacy and Confidentiality Policy* is adhered to at all times by FDC educators
- ensure there is no unauthorised access to the FDC Service's technology facilities (programs, software program etc.)
- ensure all FDC educators have appropriate login details to provide secure usage
- ensure all technological devices have current virus protection software installed
- develop guidelines about how technology will be used by FDC educators in the residence/venue
- provide information to parents about technology use within the FDC Service
- seek permission from families to use digital documentation including photographs of children via social media and/or other forms of documentation platforms (*see: Social Media Policy*)
- ensure children, FDC educators and parents are aware of our service's complaints handling process to raise any concerns they may have about the use of digital technologies or any other matter (*see: Dealing with Complaints Policy*)
- discuss with educators terms regarding sharing personal data online; ensure children's personal information where children can be identified such as name, address, age, date of birth etc is not shared online
- must ensure that no breaches of copyright eventuate if screening/viewing DVDs

Families Day Care educators and educator assistants will:

- comply with current legislation and Service policies
- keep passwords confidential
- model appropriate use of digital devices and online services for learning purposes
- identify and minimise risks to children in physical and online environments
- only permit children to use devices in open areas of the service to ensure close monitoring and supervision
- log out of computer and software programs after each use
- only access and modify files and data for which they have authorisation
- not harass, slander, intimidate, embarrass, defame, or seek to offend another person, group of people, or organisation via technological devices
- not make copies of, transmit, steal, or loan copies to other persons of Service documents
- not use personal mobile devices to take photos, access social media whilst providing education and care to children or breach children and families' privacy
- ask permission before taking photos of children on any device so children begin an understanding of how photos of them can be used and where they will be published
- ensure they are aware of their mandatory reporting requirements and respond and report any concerns related to child safety including inappropriate use of digital technology to the Approved provider or nominated supervisor
- ensure privacy levels are set on electronic devices when in use by young children
- participate in professional development opportunities about online safety and digital technology
- ensure children's personal information where children can be identified such as name, address, age, date of birth etc is not shared online

In relation to children, educators and educator assistants will:

- support children's natural curiosity for technology
- provide children with access to age-appropriate technologies to help develop their computer literacy skills
- introduce concepts to children about online safety at age-appropriate levels
- only provide programs or apps that they have viewed and assessed prior to introducing to children
- build on children's learning and inspire the ongoing and enthusiastic acquisition of knowledge through technology
- use technology to build on current projects and document children's learning
- limit the amount of time spent on screens as per recommended screen times

- support children in turn-taking and learning to share when using digital technologies in collaboration with others
- provide a child safe environment to children- reminding them if they encounter anything unexpected that makes them feel uncomfortable, scared or upset, they can seek support from the FDC educator or educator assistant
- teach children to 'ask before they tap' or do anything new on a device
- limit experiences involving screen use to those which have an educational component or include movement and gross motor activity
- discuss with children the role of screen time in their lives and support them in making appropriate choices about their use of screen time for both education and recreation
- model appropriate screen behaviours and self-regulation to the children
- encourage productive sedentary experiences for rest and relaxation that are not technology reliant
- ensure that an appropriate balance between inactive and active time is maintained each day.
- ensure that under no circumstances the screen is used as a reward or to manage challenging behaviours
- educate and support children to begin to develop skills to critically evaluate sources of information on the internet.

Guidelines for use of technology within our FDC Service

- implement risk management strategies to ensure children are always supervised when using any digital device
- use of digital technologies are used to promote social interactions between children, peers and adults
- programs must be carefully selected and be suitable to the needs and development levels of each child using or watching various types of technology or media
- programs and apps will be chosen to support and promote children's cognitive investment
- all online devices have appropriate filtering and monitoring in place with safe settings activated
- all devices are password protected with access for educator/educator assistant only
- postural awareness will be promoted when using devices
- technology is used to assist in expanding the content of the daily program and appropriate current affairs (e.g. the Olympic Games, environmental resources).
- technology is predominantly used where play-based and 'hands-on' experiences cannot provide the same information (e.g. investigating planets or dinosaurs). It will not replace appropriate experiences nor professional pedagogy.
- programs are chosen that are engaging and age appropriate to children: Only 'G' rated television programs and movies will be viewed at the FDC residence or venue

- the use of TV and watching DVD's will be kept to a minimum. When used:
- programs depicting violence and/or inappropriate content (including graphic news reports) will not be shown
- TV programs or videos will only be shown that have positive messages about relationships, family and life
- information about programs to be viewed will be shared with families beforehand to ensure that they approve of the content. This may include:
 - title
 - synopsis of program
 - rating
 - length of program
- all content will be socially and culturally considerate and appropriate.
- timeframes for 'screen time' according to Australia's Physical Activity and Sedentary Behaviour Guidelines are:
 - Children birth to one year should not spend any time in front of a screen.
 - Children 2 to 5 years of age should be limited to less than one hour per day.
 - Children 5-12 years of age should limit screen time for entertainment to no more than 2 hours a day.
- children will be taught responsible concepts of digital use and citizenship as children are '*growing up digital*'
- only quality developmentally appropriate interactive media will be used.

In relation to families our service and educators will:

- create shared understandings between families and educators about digital technology use, by adults, in front of children
- provide information regarding online safety to families [eSafetyparents](#)
- provide families with information about the digital technology used by the Service and FDC educator
- request written consent from parents/families to collect and share personal information, images or videos of their children online (Website, Facebook, Instagram or [\[enter name of parent communication app\]](#))
- provide information to parents and families about how to make a complaint and what to expect from our complaints handling processes (*see: Dealing with Complaints Policy*)
- provide information and advice to families about the selection of digital media content, apps and games that are appropriate for use by young children
- provide information about the apps and programs used by the FDC educator

- support families to understand that negative effects of exposure to disturbing or arousing content and screens before sleep time.

SOURCE

Australian Government. Department of Education, Skills and Employment. (2009). *Belonging, being and becoming: The early years learning framework for Australia*.

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

Australian Government. eSafety Commissioner Early Years program for educators

<https://www.esafety.gov.au/educators/early-years-program>

Australian Government Department of Health. (2014). Australia's Physical Activity and Sedentary Behaviour Guidelines:

<https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-pubhlth-strateg-phys-act-guidelines>

Commission for Children and Young People. (2021). [Victoria's new Child Safe Standards](#)

Early Childhood Australia *Statement on young children and digital technologies*. (2018).

Education and Care Services National Regulations. (2011).

Fair Work Act 2009 (Cth).

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

Guide to the National Quality Standard. (2017).

NSW Department of Education. (2021). [Implementing the Child Safe Standards. A guide for early childhood education and care and outside school hours care services](#).

NSW Office of the Children's Guardian. (2020). [Guide to the Child Safe Standards](#)

Revised National Quality Standard. (2018).

The Australian Council on Children and the Media for the Australian Research Alliance for Children and Youth. (2011). *Television and young children: Quality, choice and the role of parents: What the experts and parents say*.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2021	NEXT REVIEW DATE	OCTOBER 2022
MODIFICATIONS	<ul style="list-style-type: none"> • policy reviewed to include recommendations for the implementation of the Child Safe Standards relating to the use of technology • additional related policies included • sources checked and updated 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2020	<ul style="list-style-type: none"> • Minor edits to introduction to policy • Related regulations amended • Added content to support ECA Statement on young children and digital technologies • Definition of terms and examples of technology 		OCTOBER 2021

	<ul style="list-style-type: none"> Additional section- Families Source- updated	
OCTOBER 2019	New policy drafted	OCTOBER 2020

2.53 ROAD SAFETY POLICY

Traffic related injuries remain one of the leading, preventable causes of death and serious injury for young children. Driveways, car parks, unfenced yards, private roads, and farms are particular danger areas and many young children, predominantly toddlers, are killed or injured each year in their own home driveway (Kids and Traffic, 2014; Kidsafe, 2018).

Our duty of care as an Early Childhood Education and Care Service, is to provide children with an adequate level of care and protection to safeguard their health, safety and wellbeing at all times. Our Service is committed to providing road safety education to help children become responsible road users as pedestrians, passengers and users of bikes, scooters and other wheeled toys.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursions
101	Conduct of risk assessment for excursions
102	Authorisation for excursions
102A	Transportation of children other than as part of an excursion
102B	Transport risk assessment must be conducted before service transports child

102C	Conduct of risk assessment for transporting of children by the education and care service
102D	Authorisation for service to transport children
136	First Aid Qualifications
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
s165	Failure to adequately supervise children
s167	Failure to take reasonable precautions to protect children from harm and hazards

RELATED POLICIES

<p>Arrival and Departure Policy</p> <p>Acceptance and Refusal Policy</p> <p>Child Safe Environment Policy</p> <p>Death of a Child Policy</p> <p>Delivery of children to, and collection from</p> <p>Education and Care Service Premises Policy</p>	<p>Excursion Policy</p> <p>Incident, Injury, Trauma and Illness Policy</p> <p>Safe Transportation Policy</p> <p>Supervision Policy</p>
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PURPOSE

Our Family Day Care Service will ensure best practice guidelines are implemented to ensure that children are kept safe whilst travelling as pedestrians, cyclists, and passengers in vehicles. We encourage families to participate in road safety education with their children to support them to become safe and responsible on and around roads.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Coordinator, educators, and educator assistants, children, families and visitors of the Family Day Care Service.

IMPLEMENTATION

To comply with National Law and National Regulations, Early Childhood Services are required to protect children from harm and hazards likely to cause injury. To ensure compliance, management and educators of the Family Day Care Service will ensure best practice is adhered to, maintaining children's health and safety at all times.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/COORDINATOR WILL ENSURE

- road safety education is embedded in the program supporting children's understanding and knowledge

- educators and educator assistants have access to regular professional development and training in road safety, complying with National Regulations and National Quality Standard
- road safety educational resources are available in all FDC residences/venues for educators and families
- a comprehensive written risk assessment is undertaken prior to excursions, including the safest route for travel, method of travel, type of vehicle, required restraints, proposed pick up and destination, process of embarking the means of transport including how each child is to be accounted for upon embarking and disembarking the vehicle [Reg. 101]
- a risk assessment is conducted for regular outings and regular transportation at least every 12 months or whenever the risks of that transportation change [Reg: 102C]
- educators only allow a child to participate in an excursion or regular transportation with the written authorisation of a parent/guardian, in accordance with National Regulations (*Refer to Excursion Policy and Safe Transportation Policy*)
- FDC educators accompany children at all times when transporting children (with approval from the Approved Provider, the Educator Assistant may stand in)
- FDC educators provide annual vehicle car restraint check and vehicle check if a vehicle is used whilst providing education and care for children
- FDC educators, coordinators and educator assistants receive training on how to correctly install and use child restraints and booster seats
- FDC educators correctly use seatbelts and the correct child restraints when using a bus or car to transport children
- road safety educational resources are available in all FDC residences/venues for educators and families
- there are visible signs for families to remind them about keeping children safe at all FDC residences/venues. For example, where to park their car safely around the Family Day Care residence,
- parents and guardians are provided with specific road safety information, including:
 - parking safely
 - locking their car and
 - local area speed limits
- parents are provided with general road safety information about transporting children to and from the Family Day Care Service, including:
 - driveway safety
 - child restraint information
 - using the kerb side door to access the car and
 - the importance of role modelling safe road and car park use.

- parents have a clear understanding about our policies in order to keep children safe
- a *Car park safety checklist* is carried out on a regular basis and items requiring attention promptly rectified
- children are adequately supervised at all times whilst being educated and cared for within the Family Day Care Service
- FDC educators provide helmets for children to be able to ride bikes and scooters in the outdoor environment safely
- helmets meet Australian/New Zealand Standard 2063 and are fitted correctly
- children are wearing an approved helmet before participating in riding bikes and/or scooters
- FDC educators are aware of their duty of care obligations and understand how to address a situation where they observe parents/families putting children at risk of harm or injury due to unsafe practices for road/car safety-
 - travelling in a car unrestrained
 - parent appears unfit to drive (intoxicated, drug affected)
 - children riding a bike without a helmet
 - parent not supervising children crossing roads
- children under 12 years of age do not travel in the front seat of a vehicle if there are rear seats available (parental consent is required for a child to travel in the front seat)
- notify the regulatory authority within 24 hours of becoming aware of a serious incident (Reg.12).
- maintain a register of vehicles and authorised drivers including:
 - motor vehicle registration
 - insurance and licence details
 - details of any driving offences

THE EDUCATOR/EDUCATOR ASSISTANT WILL:

- take every reasonable precaution to protect children from harm and from any hazard likely to cause injury when transporting children in their own car, by public transport or walking to a destination
- ensure their vehicle is locked and inaccessible to children when not in use
- provide annual child restraint check and vehicle checks to the approved provider for any vehicle used to transport children
- only transport the number of children that can be safely transported in the car
- ensure child restraints, booster seats and seat belts are properly fitted and adjusted
- ensure child restraints, booster seats are safe, clean and in good condition
- ensure any child under 12 years of age does not travel in the front seat unless parental permission is received and there are no other rear seats available

- ensure parents/guardians of children with a disability provide information from a health professional about the appropriate child restraint for their child if required
- children exit the vehicle using the 'safety door'
- conduct a comprehensive transport specific risk assessment at least annually for '*regular transportation*' of children to minimize and manage all potential risks for transporting children [Reg. 102B, 102D (4)].
- regularly assess and evaluate risk assessments to facilitate continuous improvement
- communicate excursion requirements with the Nominated Supervisor/Coordinator to ensure they have a clear understanding about expectations for children's safety and wellbeing
- ensure children's attendance is checked by the FDC educator before departure from the designated pick up location and marked as present as they disembark from the vehicle
- complete a new risk assessment to identify and assess any hazard that poses a risk to a child's health, safety and/or wellbeing for all excursions
- ensure they comply with first aid requirements of Regulation 136 at all times
- hold a current Australian driver's licence
- never leave children unattended in a vehicle at any time
- not refuel a car whilst educating and caring for children
- ensure the vehicle is locked and inaccessible to children when not in use
- maintain and fully insure the vehicle at all times
- have a comprehensive understanding of the National Regulations and Standards in regard to keeping children safe
- educate all children about the importance of road safety, obeying the rules, listening to families, holding hands, pedestrian safety, car safety etc.
- embed road safety guidelines into the program for children to gain a clear understanding and gain the knowledge required to stay safe around roads and traffic
- ensure bike helmets meet Australian/New Zealand safety Standard 2063
- set up helmets when bikes and scooters are made available to children, and ensure all children wear them when participating in this activity
- ensure helmets are fitted properly (remove any hats prior to wearing a helmet)
- discuss road safety expectations and guidelines with families, including making families aware of young children's limited capacity to judge distances and speeds of travelling vehicles
- adhere to their duty of care to protect children from harm and keep children safe
- follow guidelines/procedures for discussing concerns with parents/families or reporting this concern to the Approved Provider or Police (see below)
- follow appropriate procedures in the event of a vehicle accident including children, educators or families, including informing management at the earliest possible convenience

- notify the approved provider as soon as possible in the event of a vehicle crash involving any children whilst under the care of the FDC educator
- notify parents/guardians as soon as practicable but within 24 hours if their child is involved in an 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* and parents will be required to acknowledge the details upon collection of their child
- contact the approved provider, to notify the regulatory authority within 24 hours, 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).

FAMILIES WILL:

- read, sign and date permission forms prior to excursions to confirm they agree to the excursion conditions
- read, sign and date permission forms for regular transportation at least annually
- ensure their child/children travels in an appropriate and approved restraint suitable for their age and weight when arriving and departing the Family Day Care Service
- be aware of and comply with road and car park safety requirements when arriving and departing from the FDC residence/venue (see *Car park safety management sheet*)
- never leave a child/children and/or animal in the car alone at any time
- use the 'safety door' when arriving and departing the FDC Service
- be aware of the Service policy relating to the safe transportation of children to and from the Service. (see: Safe Transportation Policy)
- communicate any concerns relating to their child's wellbeing or safety to the FDC educator or approved provider.

DUTY OF CARE

FDC educators have a duty of care to ensure the safety of children at all times. Where a parent or guardian is observed demonstrating unsafe behaviour such as: not securing a child in a suitable restraint, parking incorrectly or driving erratically, not providing a bike helmet for the child to wear on a bike or scooter, crossing roads incorrectly, the FDC educator should-

- talk to the parent about their concerns calmly
- provide a copy of this policy to the parent
- provide information to the parent about safe transportation of their child
- provide information on car restraints and services to install these in the local area

- provide information about the use of helmets when riding to the parent
- inform the coordinator or Approved Provider of the FDC Service

If the parent/guardian arrives at the FDC residence and does not appear fit to take care of the child (intoxicated or under the influence of drugs), the FDC should:

- discuss their concerns with the parent
- suggest that another parent or authorised nominee collects the child
- contact an authorised nominee to collect the child
- notify the police or child protection if they have any concern for the child's safety
- contact the Approved Provider
- document the actions for evidence

(see: *Acceptance and Refusal Policy*; *Delivery of children to, and collection from Education and Care Service Premises Policy* ~~*Arrival and Departure Policy*~~)

CONTINUOUS IMPROVEMENT/REFLECTION

Our Road Safety Policy will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

USEFUL RESOURCES

Child Road Safety: www.childroadsafety.org.au

Kids and Traffic: <http://www.kidsandtraffic.mq.edu.au/>

[Kids and Traffic- Early Childhood Road and Safety Education Program](#)

Kidsafe Inc: www.kidsafensw.org/road-safety/

Road Safety Education Victoria Teaching Resources Early Childhood

<http://www.roadsafetyeducation.vic.gov.au/teaching-resources/early-childhood>

Transport for NSW Centre for Road Safety

<https://roadsafety.transport.nsw.gov.au/aboutthecentre/resources/index.html>

Transportation of children with Additional Needs ELAA <https://ela.org.au/wp-content/uploads/2016/10/Safe-transport-for-children-with-additional-needs.pdf>

SOURCE

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

Australian Government Department of Education *Skills and Employment*. (2009). *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

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

Early Learning Association Australia

Education and Care National Regulations. (2011).

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

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

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

Kids and Traffic: Early Childhood Road Safety Education Program. (2014): <http://www.kidsandtraffic.mq.edu.au/>

Kidsafe: Child Accident Prevention Foundation of Australia. (2018): <https://kidsafe.com.au/statistics-2/>

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V5.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy continuous improvement/reflection section added Sources checked for currency link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
DECEMBER 2021	<ul style="list-style-type: none"> re-arranged some dot points for better flow- The Approved Provider/Coordinator section reviewed policy against current Regulations resources and sources checked for currency 	DECEMBER 2022	
DECEMBER 2020	<ul style="list-style-type: none"> Additional regulations added (Safe Transportation of children) Written authorisation for regular transportation added Duty of Care section added Additional resources for Early Years educators added Sources checked for currency 	DECEMBER 2021	
DECEMBER 2019	Additions to policy introduction Modifications for Family Day Care specific needs Related policies added Additional resources added Transportation information/requirements for FDC educators	DECEMBER 2020	
DECEMBER 2018	New policy drafted for FDC	DECEMBER 2019	

2.54 CYBER SAFETY POLICY

Cyber safety means how to be safe and responsible during use of Information and Communication Technologies (ICT). It involves being respectful of other people online, using good 'netiquette' (internet etiquette), and above all, is about keeping information safe and secure to protect the privacy of individuals. Our Family Day Care Service is committed to create and maintain a safe online environment with support and collaboration with family day care educators, families and community. Nurture childcare and Education Services do believe that safe use of net is especially important part of FDC Industry. Any information exposed during providing care and Education to children may have big trouble for any family, children, or Educators themselves. (Nur) So All Educator should very careful when they are using internet regarding their FDC work.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
181	Confidentiality of records kept by approved provider
195	Application of Commonwealth Privacy Act 1988
196	Modifications relating to National Education and Care Services Privacy Commissioner and Staff

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook

RELATED POLICIES

CCS Data Policy	Fraud Prevention Policy
CCS Personnel Policy	Personnel Policy
CCS Governance Policy	Privacy and Confidentiality Policy
Code of Conduct Policy	Programming Policy
Dealing with Complaints Policy	Photography Policy Record Keeping and
Enrolment Policy	Retention Policy
Family Communication Policy	Technology Usage Policy

PURPOSE

To create and maintain a cyber safe culture that works in conjunction with our Family Day Care Service philosophy, and privacy and legislative requirements to ensure the safety of enrolled children, educators and families.

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

TERMINOLOGY	
ICT	Information and Communication Technologies
Cyber safety	Safe and Responsible use of the internet and equipment/device, including mobile phones.
Netiquette	The correct or acceptable way of using the internet

IMPLEMENTATION

Cyber Safety encompasses the protection of users of technologies that access the Internet, and is relevant to devices including computers, iPads and tablet computers, mobile and smart phones and any other wireless technology (including personal wearable devices- smart watches). With increasingly sophisticated and affordable communication technologies, there is a candid need for children and young people to be informed of both the benefits and risks of using such technologies. More importantly, safeguards should be in place to protect young children from accidentally stumbling upon or being exposed to unsuitable material or content.

Our Family Day Care Service ensures educators have demanding cyber safety practices and education programs in place, which are inclusive of appropriate use agreements for educators and families. **Our educational software program provides families with up to date information about their child's development in way of daily reports, observations, photos, portfolios and email communications.**

The cyber safety agreement includes information about the software program, the FDC Services' obligations and responsibilities, and the nature of possible risks associated with internet use, including privacy and bullying breaches. Upon signing the Service's agreement, families and educators will have access to the educational software program.

Educational software program

Our Family Day Care Service uses [Enter software program] which is a password protected private program for children, educators and families to share observations, photos, videos, daily reports, and portfolios. Families are able to view their child/children's learning and development and contribute general comments relating to their child or comment on an observation or daily report.

FDC educators are alerted [Enter mode of notification] and on their dashboard when a family member has added a comment. Likewise, families are notified via email when the FDC educator has posted about their child.

Access to a child's information and development is only granted to a child's primary guardians. No personal information is shared with any third party.

[Add a brief description about the software program the service may use – aim of the program, how children and educators' benefit]

CCS Software

Our Family Day Care Service uses [Enter software program] which is a third-party software system to access the Child Care Subsidy System (CCSS). The software is used to manage the payment and administration of the Child Care Subsidy (CCS).

Review of CCS software: The Approved Provider will ensure the CCS software has policies and procedures regarding safe storage of sensitive data before using the software, the Approved Provider will review the privacy policy of the CCS software on a yearly basis or as required. The Approved Provider will review any potential threats to software security on a **monthly/ yearly** basis. The Director/ Nominated Supervisor will advise the Approved Provider as soon as possible regarding any potential threat to security information and access to data sensitive information. Any breaches of data security will be notified to the Office of the Australian Information Commissioner (OAIC) by using the online [Notifiable Data Breach Form](#)

All Personnel using the software will have their own log in username and password. The Approved Provider will ensure all Personnel using the software will have their own log in username and password. Authorised users are encouraged to change their passwords every 6 months.

Each Personnel who is responsible for submitting attendances and enrolment notices to CCSS will be registered with PRODA as a Person with Management or Control of the Provider or as a Person with Responsibility for the Day-to-Day Operation of the Service. The Approved Provider will review staff log ins on a monthly/ yearly basis and ensure this procedure is followed by all staff who access CCS software to submit data to CCS. See: *Cyber Safety Procedure*

Review of CCS Software Procedure:

Review	How often	By Whom
All staff use an individual log-in to access CCS software	Upon employment, Yearly, As required	Approved Provider and Director/ Nominated Supervisor
Privacy policy of CCS software	Initial access to CCS software Yearly As required	Approved Provider
Any breaches of sensitive data relating to Enrolments	Upon notification	Approved Provider

Confidentiality and privacy:

- the principles of confidentiality and privacy extend to accessing or viewing and disclosing information about personnel, children and/or their families, which is stored on the Family Day Care Service's network or any device
- privacy laws are such that FDC educators or other employees should seek advice from FDC Service management regarding matters such as the collection and/or display/publication of images (such as personal images of children or adults), as well as text (such as children's personal writing)
- a permission to publish form must be signed by parents to ensure children's privacy, safety and copyright associated with the online publication of children's personal details or work
- **Department of Education NSW (enter your jurisdiction)** guidelines are followed regarding issues of privacy, safety, and copyright associated with the online publication of children's personal details or work
- all material submitted for publication on the FDC Service Internet/Intranet site should be appropriate to the Service's learning environment
- material can be posted only by those given the authority to do so by the FDC Service management
- the FDC Service management should be consulted regarding links to appropriate websites being placed on the Service's Internet/Intranet (or browser homepages) to provide quick access to sites.

THE APPROVED PROVIDER/MANAGEMENT WILL ENSURE:

- all FDC educators, families and visitors are aware of the Service's *Code of Conduct and Confidentiality and Privacy Policies*.
- the Family Day Care Service works with an ICT security specialist to ensure the latest security systems are in place to ensure best practice. Anti-virus and internet security systems including and firewalls can block access to unsuitable web sites, newsgroups and chat rooms. However, none of these tools are foolproof; they cannot be a substitute for active adult supervision and involvement in a child's use of the internet.
- backups of important and confidential data is made regularly (monthly is recommended)
- backups are stored securely either offline, or online (using a cloud-based service)
- software and devices are updated regularly to avoid any breach of confidential information
- families are referred to the *Dealing with Complaints Policy* and procedure when raising concerns regarding digital technologies and personal data
- all educators and staff are aware that a breach of this policy may initiate appropriate action including the termination of employment.

A NOMINATED SUPERVISOR/RESPONSIBLE PERSON/FAMILY DAY CARE EDUCATORS WILL:

- ensure to use appropriate netiquette and stay safe online by adhering to FDC Service policies and procedures
- keep passwords confidential and not share with anyone
- log out of sites to ensure security of information
- never request a family member's password or personal details via email, text, or Messenger.
- report anyone who is acting suspiciously or requesting information that does not seem legitimate or makes you feel uncomfortable (See 'Resources' section for where to report).
- obtain parent permission for children to use computers as part of the enrolment procedure
- ensure that children are never left unattended whilst a computer or mobile device is connected to the internet
- ensure personal mobile phones are not used to take photographs, video or audio recordings of children [FDC Educators should have a mobile phone that is for education and care use only]
- only use educational software programs and apps that have been thoroughly examined for appropriate content prior to allowing their use by children.
- provide parents and families with information about the apps or software programs accessed by children at the Service
- participate in professional development regarding online safety
- ensure that appropriate websites are sourced for use with children prior to searching in the presence of children

- ensure privacy filters and parental control settings are turned on and used when children are accessing digital technologies online
- use a search engine such as 'Kiddle' rather than Google to search for images or information with children (See 'Resources' section).
- notify the Office of the Australian Information Commissioner (OAIC) by using the online [Notifiable Data Breach Form](#) in the event of a possible data breach. This could include:
 - a device containing personal information about children and/or families is lost or stolen (parent names and phone numbers; dates of birth, allergies, parent phone numbers).
 - a data base with personal information about children and/or families is hacked
 - personal information about a child is mistakenly given to the wrong person (portfolios, child developmental report)
 - this applies to any possible breach within the Service or if the device is left behind whilst on an excursion

FAMILIES

- When sharing anything using technologies such as computers, mobile devices, email, or any device that connects to the internet it is important you and everyone else invited to your account understands about netiquette and staying safe online and ensures privacy laws are adhered to.
- When it comes to your own children, it is your choice what you share outside of the Service. Remember though that young children cannot make their own decisions about what gets published online so you have a responsibility to ensure that whatever is shared is in your children's best interests.
- Be mindful of what you publish on social media about your child as this may form part of their lasting digital footprint.
- Install Family Friendly Filters to limit access to certain types of content on devices such as mobile phones and computers.
- Install parental controls on streaming services to ensure children are not able to access inappropriate material.
- Consider developing a *Family Tech Agreement* to establish rules about use of devices at home.
- Sometimes other children in the Service may feature in the same photos, videos, and/or observations as your children. In these cases, never duplicate or upload them to the internet/social networking sites or share them with anyone other than family members without those children's parents' permission.
- Access further information about eSafety to help protect your children and be cyber safe.

RESOURCES

Australian Government 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>

eSmart Alannah & Madeline foundation www.esmart.org.au

Family Tech Agreement. eSafety Early Years Online safety for under 5s

https://www.esafety.gov.au/sites/default/files/2020-01/Our%20Family%20Tech%20Agreement_0.pdf

Kiddle is a child-friendly search engine for children that filters information and websites with deceptive or explicit content: <https://www.kiddle.co/>

Notifiable Data Breaches scheme (NDB) can be made through the Australian Government Office of the Australian Information Commissioner

Receive information on scams that can then be provided to the public. To report an online scam or suspected scam, use the form found here: <https://www.scamwatch.gov.au/report-a-scam>

More information on online fraud and scams can be found on the Australian Federal Police website:

<https://www.afp.gov.au/what-we-do/crime-types/cyber-crime>

SOURCE

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

Australian Government eSafety commission (2020) www.esafety.gov.au

Australian Government Department of Education ~~Skills and Employment~~. *Child Care Provider Handbook (2019) (2022)* <https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>
<https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook>

Australian Government Office of the Australian Information Commissioner (2019)

<https://www.oaic.gov.au/privacy/notifiable-data-breaches/about-the-notifiable-data-breaches-scheme/>

Australian Government Office of the Australian Information Commissioner (2019)

<https://www.oaic.gov.au/privacy/notifiable-data-breaches/about-the-notifiable-data-breaches-scheme/>

Early Childhood Australia Code of Ethics. (2016).

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

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

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

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

Privacy Act 1988.

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	MARCH 2023

MODIFICATIONS	<ul style="list-style-type: none"> Update of Department name from Department of Education, Skills, and Employment to Department of Education policy maintenance minor formatting edits within text hyperlinks checked and repaired as required link to Western Australian Education and Care Services National Regulations added in 'Sources' 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
MARCH 2022	<ul style="list-style-type: none"> Edits to ensure adherence to CCS data protection Addition of Dealing with Complaints Policy Parental controls- privacy filters added Sources checked 	MARCH 2023
AUGUST 2021	<ul style="list-style-type: none"> Sources checked and links updated Additional reference added for CCS Provider Handbook Updated Related legislation 	MARCH 2022
MARCH 2021	<ul style="list-style-type: none"> Policy reviewed to align to new 2021 schedule sources checked for currency 	MARCH 2022
OCTOBER 2020	<ul style="list-style-type: none"> Additional information added regarding CCS Software security policy reviewed 	MARCH 2021
MARCH 2020	<ul style="list-style-type: none"> Additional content added Additional information added to Family section Resources added 	MARCH 2021
OCTOBER 2019	<ul style="list-style-type: none"> Notifiable Data Breach Scheme information added Re-worded introduction Deleted irrelevant NQS Extra points added Resources section added Grammar, punctuation and spelling edited Sources checked for currency Sources alphabetised 	MARCH 2020
MARCH 2018	<ul style="list-style-type: none"> Policy created to comply with changes to the Australian Privacy Act 	MARCH 2019

2.55 IMMUNISATION POLICY

When groups of children are together, illness and disease can spread rapidly. Preventable diseases such as measles and whooping cough can have serious health consequences for children, and especially young children. Staff members who work in an early childhood education and care service are also at increased

risk of contracting certain infectious illnesses. Immunisation is a simple, safe and effective way of protecting people against harmful diseases. Our Service implements the Australian Government Department of Health, 'No Jab No Play' policy. Your child must meet immunisation requirements if **you get Family Tax Benefit (FTB) Part A or child care fee assistance**. Nurture Childcare and Education Services can only take the enrolment/s of Child/ren who are fully immunised and up to date. This is the condition to enrol into the service's FDC that parents must have to provider full immunisation History statement provided by the AIR and child must be immunised upto the date of enrolment. If any parents do not fulfill the condition of enrolment child/ren will be refused to enrol into any FDC. (Nur)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
88	Infectious diseases
90	Medical conditions policy
162	Health information to be kept in enrolment record
172(2)(g)	a notice stating that there has been an occurrence of an infectious disease at the premises
EDUCATION AND CARE SERVICES NATIONAL LAW	
174(2)(a)	Notification to the Regulatory Authority- (a) any serious incident at the approved education and care service

RELATED POLICIES

Control of Infectious Disease Policy COVID-19 Management Policy Enrolment Policy Family Communication Policy Incident, Injury, Trauma and Illness Policy	Orientation of New Families Policy Pregnancy in Early Childhood Policy Record Keeping and Retention Policy Sick Children Policy Work Health and Safety Policy
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PURPOSE

The purpose of this policy is to provide information to manage and prevent the spread of infectious illnesses and diseases. Our Family Day Care Service has a duty of care to ensure that all children, families, and Family Day Care educators are protected from infectious diseases whilst attending an education and care service. Along with maintaining a clean and hygienic environment, this also includes notifying families when an excludable illness or disease is present in a FDC residence/venue, maintaining a record of children’s and educators’ immunisation status, complying with relevant health department exclusion guidelines, and increasing educators’ awareness of cross-infection.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Immunisation is a reliable way to prevent many childhood diseases. Immunisation works by giving the person a vaccine (weakened or killed disease-causing bacteria or virus), against a particular disease. This makes the person’s immune system respond in a similar way to how it would respond if they actually had the disease, but with less severe, or possibly no symptoms. The vaccine therefore leads to the creation of antibodies that provide future protection if the person comes into contact with the disease.

Immunisation also protects other people who are not immunised, such as children who are too young to be immunised, or people whose immune systems did not respond to the vaccine. This is because the more people who are immunised against a disease, the lower the chance that a person will ever come into contact with someone who has the disease. The chance of an infection spreading in a community therefore decreases if a large proportion of people are immunised, because the immune people will not become infected and can protect the vulnerable people; this is known as ‘herd immunity’.

Children must meet the immunisation requirements to be eligible for Family Tax Benefit (FTB) Part A and Child Care Subsidy (CCS). As of January 2018, unvaccinated children due to their parent’s conscientious objection are no longer able to receive CCS benefits. be enrolled in childcare in NSW. Children who

cannot be fully vaccinated due to a medical condition or who are on a recognised catch-up schedule may still be able to receive CCS benefit enrolled upon presentation of the appropriate form signed by a medical practitioner.

THE APPROVED PROVIDER/COORDINATOR WILL:

- ensure information about immunisation, infectious diseases and exclusion periods is available to families at time of enrolment/orientation and is included in Family Handbook
- advise parents and families about the [National Immunisation Program \(NIP\)](#)
- ensure that evidence is provided for each child prior to enrolment that confirms the child is fully immunised for their age or has a medical reason not be immunised (Immunisation History Statement from the Australian Immunisation Register (AIR) as evidence) [Queensland approved ECEC services must amend this policy as required if necessary]
- provide FDC educators and other staff with information about vaccine-preventable diseases
- develop a staff immunisation record that documents each staff members' and approved FDC educators' previous infection and immunisations (include dates)
- require all new and current FDC educators and staff to complete the staff immunisation record
- update staff immunisation records as staff/educators become vaccinated
- take all reasonable steps to encourage non-immune staff and FDC educators to be vaccinated
- document advice given to FDC educators and other staff, and any refusal to comply with vaccination requests
- ensure all staff and visitors entering FDC Scheme principal office or FDC residence or venue (contractors, health professionals, volunteers, students) hold mandatory immunisation requirements as set by current Public Health Orders (including COVID-19 mandatory vaccination requirements). [Check your state/territory for further information].
- NSW FDC Services- ensure the FDC residence or venue is not open to provide education and care unless each adult residence has
 - evidence of 2 doses of a COVID-19 vaccination or
 - a medical contraindication certificate
- review children's immunisation regularly, updating the child's records kept at the FDC service, and sending reminder letters and emails to families as required
- provide updates to FDC educators for their own records
- provide wall charts about childhood immunisation schedules to FDC educators to display in their residence/venue
- notify families when an outbreak of a vaccine-preventable disease occurs through various channels of communication:

- verbally
- through a letter from the FDC educator or Approved Provider
- posting a note or sign at the entry of the residence
- via electronic message- text message or email
- notify the Regulatory Authority of any incidence of a notifiable infectious illness or disease [ACECQA](#)
[contact regulatory authority](#)
- exclude any child who is not immunised from the FDC Service if and when an outbreak of a vaccine-preventable disease occurs to protect that child and to prevent further spread of infection. In the instance of the child being immunised but the immunisation record has not been sighted by the FDC Service, the child is to be considered as not being immunised
- advise any staff members or FDC educators who fall pregnant to visit their GP immediately and have a test for Cytomegalovirus (CMV) to check their immunity. Pregnant FDC educators who are at a heightened risk will be required to double glove when coming into contact with any body fluids, including saliva

FAMILIES WILL:

- adhere to the Service's policies regarding *Control of Infectious Diseases, Immunisation, Sick Children* and exclusion requirements
- provide the FDC Service with a copy of one or more of the following documents:
 - An Australian Immunisation Register (AIR) Immunisation History Statement which shows that the child is 'up to date' with their scheduled vaccinations; or
 - An AIR Immunisation History Form on which the immunisation provider has certified that the child is on a recognised catch-up schedule; or
 - An AIR Immunisation Medical Exemption Form which has been certified by a GP
- provide the FDC service with an updated copy of their child's current immunisation record every 6 months, or when the next scheduled immunisation has been completed. A current AIR Immunisation History Statement can be accessed at any time by the parent/guardian through logging in to their Medicare online account: [myGov website](#).
- support their child's exclusion from the Service if there is an outbreak of a vaccine preventable disease at the Service or if they come into contact with a person with a vaccine preventable disease, even if there is no outbreak at the Service.

FDC STAFF AND VISITORS TO FDC RESIDENCES/VENUES WILL:

(Visitors including health professionals, volunteers, students, committee members)

- ensure they abide by any Public Health Orders enforced around mandatory immunisation and vaccinations (including COVID-19 mandatory vaccination requirements) (check state/territory for requirements)
- ensure they carry evidence of immunisation of the COVID-19 vaccination or a medical contraindication certificate, as per Public Health Order **[check state/territory for requirements]**

INFORMATION TO BE DISPLAYED IN EACH FAMILY DAY CARE RESIDENCE/VENUE AND PRINCIPAL OFFICE

INFORMATION	WEBSITE/INFORMATION	PHONE NUMBER
The National Immunisation Program (NIP) Service	https://beta.health.gov.au/initiatives-and-programs/national-immunisation-program	1800 020 103
Notification of an occurrence of an infectious disease/vaccine preventable disease	Notify local Public Health Unit Provide information to families about the infectious disease- Children unimmunised against vaccine preventable diseases must be excluded from care	1300 066 055
Australian Government Department of Health	In the event of a community spread virus- (COVID-19) publications from Government agencies will be displayed https://www.health.gov.au/resources/collections/corona-virus-covid-19-campaign-resources	1800 020 080

Australian Government Department of Health- Immunisation saves lives

Currently there are different immunisation requirements for early childhood education and care services across states and territories. Information on immunisation requirements are listed below.

[Please update this policy to reflect your service's requirements for immunisation prior to enrolment.]

Australian Capital Territory (ACT)
Families must provide information regarding children's immunisation schedule upon enrolment. However, children do not need to be fully immunised to attend early childhood education and care services.
The National Immunisation Program (NIP) Schedule TO BE DISPLAYED IN THE SERVICE can be accessed and downloaded from: https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portfolio Immunisation Program Australian Capital Territory Schedule can be accessed and downloaded from: http://www.health.act.gov.au/our-services/immunisation/babies-and-children

Immunisation is available by appointments at Early Childhood Immunisation Clinics across the ACT
 Your General Practitioner or the nurses in the CYWH Program can provide you and your family with all the information and support you require about the current immunisation schedule. Clients can access this service by phoning Community Health Intake on (02) 5124 9977 between 8am and 5pm weekdays.
 Immunise Australia National Hotline: 1800 671 811
 Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

New South Wales (NSW)

Children must be fully immunised to attend early childhood education and care services. A current Immunisation History Statement from the Australian Immunisation Register (AIR) must be provided to services.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portfolio>
 NSW Health Phone number: 02 9391 9000
 Local NSW Public Health Unit Contact Details:
<http://www.health.nsw.gov.au/Infectious/Pages/default.aspx>
 NSW Health Immunisation Schedule <https://www.health.nsw.gov.au/immunisation/Pages/schedule-changes.aspx>
 Immunise Australia National Hotline: 1800 671 811
 Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Northern Territory (NT)

Children do not need to be immunised to attend early childhood education and care services.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portfolio>
 The service will download and print the 'one page' immunisation schedule for the NT from the following website and attach it to this policy: <https://nt.gov.au/wellbeing/healthy-living/immunisation/child-vaccinations>
 Current Immunisation Recommendations for Adults in the Northern Territory
 The service will refer to, and encourage educators to participate in, the recommended immunisation program for adults – <https://nt.gov.au/wellbeing/healthy-living/immunisation/adult-vaccinations>
 For immunisation information including vaccination histories, contact the NT Immunisation Register on 08 8922 8315 (Top End) or 08 8951 6928 (Central Australia) or by fax on 08 89228897. The Help Desk is open from Monday to Friday 8 am to 4.20pm
 Families are required to provide one of the following recognised immunisation records
 Australian Immunisation Childhood Register (AIR) History Statement
 Northern Territory (NT) Immunisation Record

Immunise Australia National Hotline: 1800 671 811
Australian Government, Department of Human Services:
www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account

Queensland (QLD)

Early Childhood Education and Care services may refuse or cancel an enrolment if a child is not up to date with their immunisation schedule.

Children who are not immunised must be excluded if there is an outbreak of a vaccine preventable disease.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portfolio>

Queensland legislation does not make immunisation mandatory for children to be enrolled in approved ECEC services. Enrolment and/or attendance of children is at the discretion of the service.

Each Queensland ECEC service must adjust their policy to provide clear information to families.

<https://www.qld.gov.au/health/conditions/immunisation/childcare>

Queensland immunisation schedule: <https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/schedule>

Local QLD Public Health information can be found at:

<https://www.qld.gov.au/health/conditions/immunisation/>

Immunise Australia National Hotline: 1800 671 811

Australian Government, Department of Human Services:

<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

South Australia (SA)

Children must be fully immunised to attend early childhood education and care services.

A current Immunisation History Statement from the Australian Immunisation Register (AIR) must be provided to services. The AIR may include medical exemptions if the child is unable to receive vaccinations due to medical reasons.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portrait>
[Early childhood services and immunisation requirements No Jab No Play](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portrait)
Preschool and kindergarten services <https://www.sa.gov.au/topics/education-skills-and-learning/early-childhood-education-and-care/preschool-and-kindergarten>
Telephone: (08) 8226 6000
Immunise Australia National Hotline: 1800 671 811
Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Tasmania (TAS)

Children do not need to be immunised to attend early childhood education and care services. Children who are not immunised must be excluded if there is an outbreak of a vaccine preventable disease.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portrait>
National Immunisation program – Tasmania
http://www.dhhs.tas.gov.au/publichealth/communicable_diseases_prevention_unit/immunisation
[Funded Immunisation Schedule \(July 2020\)](http://www.dhhs.tas.gov.au/publichealth/communicable_diseases_prevention_unit/immunisation)
Immunise Australia National Hotline: 1800 671 811
Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Victoria (VIC)

Children must be fully immunised to attend early childhood education and care services. A current Immunisation History Statement from the Australian Immunisation Register (AIR) must be provided to services.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portrait>
Department of Health, Victoria Immunisation Program- children
<https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children>
Telephone - 1300 882 008
No Jab No Play <https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children/no-jab-no-play>
Immunise Australia National Hotline: 1800 671 811
Australian Government, Department of Human Services:
<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Western Australia (WA)

Children must be fully immunised to attend early childhood education and care services.
A current Immunisation History Statement from the Australian Immunisation Register (AIR) must be provided to services.

The National Immunisation Program (NIP) Schedule **TO BE DISPLAYED IN THE SERVICE** can be accessed and downloaded from: <https://www.health.gov.au/resources/publications/national-immunisation-program-schedule-portfolio>

Starting or moving child care, kindergarten or school- immunisation requirements
https://healthywa.wa.gov.au/Articles/S_T/Starting-or-moving-schools-immunisation-records

Western Australian Immunisation Schedule

<http://healthywa.wa.gov.au/Healthy-living/Immunisation>

For more information go to -

http://healthywa.wa.gov.au/Articles/A_E/Childhood-immunisation

Immunise Australia National Hotline: 1800 671 811

Australian Government, Department of Human Services:

<https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

RESOURCES

AIR General Enquiries line 1800 653 809

Australian Government Department of Health [Get the facts on childhood immunisation-help protect your community](#)

Australian Government Services Australia *Australian Immunisation Register*

<https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register>

[NSW Government Immunisation Enrolment Toolkit](#)

Sharing Knowledge About Immunisation. (2020). <http://talkingaboutimmunisation.org.au/>

[Time Out Keeping your child and other kids healthy!](#) (Queensland Government)

Time Out Brochure [Why do I need to keep my child at home?](#)

[Victoria State Government Immunisation enrolment toolkit for early childhood services](#)

SOURCE

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

Australia Childhood Immunisation Register:

<https://www.humanservices.gov.au/customer/services/medicare/australian-childhood-immunisation-register>

Australian Government Department of Education, Skills and Employment, (2020) *Child Care Subsidy immunisation requirements*

<https://www.servicesaustralia.gov.au/individuals/services/centrelink/child-care-subsidy/who-can-get-it/immunisation-requirements>

Australian Government – Department of Human Services: <https://www.humanservices.gov.au/individuals/online-help/medicare/getting-your-immunisation-history-statement-using-your-medicare-online-account>

Australian Government Department of Health National Immunise Program: <https://www.health.gov.au/initiatives-and-programs/national-immunisation-program>

Early Childhood Australia Code of Ethics. (2016).

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

Federal Register of Legislation *Privacy Act 1988*.

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

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

National Centre for Immunisation Research and Surveillance (NCIRS). No Jab No Play, No Jab No Pay: <https://www.ncirs.org.au/public/no-jab-no-play-no-jab-no-pay>

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

NSW Public Health Act- NSW Government October 2017: http://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx#15

Revised National Quality Standard. (2018).

Sharing Knowledge About Immunisation. (2020). <http://talkingaboutimmunisation.org.au/>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> Review of policy as per annual cycle No major edits 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	<ul style="list-style-type: none"> Additional information added to reflect mandatory COVID-19 vaccination requirements for NSW/VIC FDC residence in NSW must not open unless all adults in residence are fully vaccinated against COVID-19 state by state immunisation requirements for enrolment added updated sources (broken links updated) 	MARCH 2022	
MARCH 2021	<ul style="list-style-type: none"> addition related to CCS requirements for immunisation updates to reflect 'no jab no play' in each state/territory links to each state/territory immunisation schedules checked and edited as required further resources added 	MARCH 2022	

MARCH 2020	<ul style="list-style-type: none"> • additions to introduction • Additional information added to content • Resource section added • Jurisdiction specifications checked for currency 	MARCH 2021
MARCH 2019	<ul style="list-style-type: none"> • New immunisation requirements changed to past tense. • Grammar, punctuation and spelling edited. • Additional information added to points. • Sources checked for currency. • Sources/references corrected and alphabetised. 	MARCH 2020
MARCH 2018	<ul style="list-style-type: none"> • Policy created to comply with changes to immunisation requirements 	MARCH 2019

2.56 MEDICAL CONDITIONS POLICY

To support children’s wellbeing and manage specific healthcare needs, allergy or relevant medical condition Nurture Childcare and Education Services is working in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children’s health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise. It is particularly important for parents to inform to FDC Educator, Service nominated supervisor/Coordinator or Director about the medical condition if not informed into the enrolment of child or recently any changes into the health of Child. Medical condition examples are including but not limited are e.g., Anaphylaxis or same like symptoms in child, any type of allergy whether it’s from food, grass, weather etc., Asthma or asthma like condition, any heart murmuring, beating fast or any heart related condition etc.

Conditions sometimes diagnosed by doctor or some of them still under investigation or some of them are felt once but if Parents will communicate about any type of the condition, then Educator and Service can provide more care to child and can have special care and can check child time to time for the wellbeing and safety of child.

Nurture Childcare and Education Services will not responsible for any health or medical condition consequences if child got severe sick if Parents will hide any of child condition which is already existed or recently, they notice something unusual. Nurture’s main aim is to provide best care not to run from the situation but if parents will not support to service for best care of child, then service also need to pre inform about the consequences which might affect Nurture’s business. (Nur)

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	
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) (a)	The management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis
90 (1) (iv)	Medical Conditions Communication Plan
90 (2)	The medical conditions policy of the education and care service must set out practices in relation to self-administration of medication by children over preschool age if the service permits that self-administration
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication
136	First Aid qualifications
162(c) and (d)	Health information to be kept in enrolment record

168	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

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Administration of Medication Policy Anaphylaxis Management Policy Asthma Management Policy Celebrations Policy Child Safe Environment Policy Diabetes Management Policy	Enrolment Policy Epilepsy Management Policy Family Communication Policy Health and Safety Policy Incident, Illness, Accident and Trauma Policy Nutrition Food Safety Policy Privacy & Confidentiality Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions. We aim to efficiently respond to and manage medical conditions, health care needs or allergies of children and staff at the Family Day Care Service ensuring the safety and wellbeing of all children, staff, families and visitors

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

Our FDC 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:

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

IMPLEMENTATION

We will involve all FDC educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Family Day Care Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions. There are a number of concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the FDC Service. Key procedures and strategies must be in place prior to the child commencing care at a FDC residence or

venue to ensure their individual health, safety and wellbeing.

The Approved Provider/Coordinator/Educator will ensure:

- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- existing enrolment forms are reviewed, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents are provided with a copy of the Service's *Medical Conditions Policy*
- a child is not enrolled at, nor will attend the FDC 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] ~Any educator who will take care of child without medicine of medical condition plan will be responsible for breach of policy and will solely responsible for child/ren care negligence.
- FDC educators and educator assistants have a clear understanding of children's individual medical conditions enrolled in their service
- FDC educators, educator assistants and other staff have knowledge and access to this policy and relevant health management policies (*Asthma Management Policy/ Anaphylaxis Management Policy, Diabetes Management Policy*)
- medication will only be administered to a child: Educator will make sure and will read below information:-
 - if the medication is authorised in writing by a parent or authorised person
 - is administered in accordance to a child's Medical Management Plan or other instructions provided by a registered medical practitioner
 - as prescribed by a registered medical practitioner
 - is in the original container
 - has the original label clearly showing the name of the child
 - is before the expiry/use by date
 - after the educator has checked the child's identity and dosage of the medication against the written instructions provided
- an *Administration of Medication* Record is completed for each child and acknowledged by the parent at the end of each day
- to develop a communication plan in collaboration with the Nominated Supervisor/Responsible Person and FDC educator to ensure communication between families and educators is on-going and effective
- educators and educator assistants receive appropriate professional development and training in managing specific medical conditions and meeting children's individual needs

- FDC educators hold current accredited first aid and CPR qualifications, emergency asthma and emergency anaphylaxis management certificates (as approved by ACECQA)
- FDC educators and educator assistants have a clear understanding about their role and responsibilities when caring for children with a medical condition
- FDC educators and educator assistants adhere to practices and procedures in relation to safe food handling and consumption of food
- families provide required information on their child’s medical condition, including:
 - medication requirements
 - allergies
 - medical practitioner contact details
 - medical management plan
- a medical management plan has been developed in consultation with parents and the child’s medical practitioner and provided to the FDC service and/or
 - an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child’s medical practitioner eg: (ASCIA) or National Asthma Council of Australia
 - an individual Diabetes Management Plan is developed in consultation with parents and the child’s medical practitioner
- risk minimisation plan has been developed in consultation with parents and management prior to the child commencing at the FDC service
- FDC educators will be informed immediately about any changes to a child’s medical management plan, risk management plan
- to record any prescribed health information and retain copies of medical management plan, anaphylaxis management plan or asthma management plan and risk minimisation plan in the child’s enrolment folder
- FDC educators and educator assistants have access to emergency contact information for the child
- casual educators are informed of children (and any other staff-educator assistant) who have specific medical conditions or food allergies, the type of condition or allergies they have and the FDC Service’s procedures for dealing with emergencies involving allergies and anaphylaxis
- a notice is displayed prominently in the main entrance of the residence or venue stating that a child diagnosed at risk of anaphylaxis is being cared for or educated, and providing details of the allergen/s (regulation 173)
- a copy of the child’s medical management plan is visibly displayed in an area not generally available to families and known to educators and educator assistants in the residence/venue
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child’s parent or other responsible person named and authorised in the child’s enrolment record to make decisions about the administration of medication

In the event of a high-risk scenario where a child suffers from a reaction, incident, situation, or event related to a medical condition the FDC educator will:

- follow the child's medical management plan as per Regulation 90(1)(c)(ii)
- commence first aid measures/monitoring
- call an ambulance immediately by dialling 000
- contact the parent/guardian when practicable but as soon as possible
- contact the emergency contact if the parents or guardian can't be contacted when practicable but as soon as possible
- contact the Coordinator/Nominated Supervisor or Approved Provider of the FDC Service as soon as possible
- complete an *Incident, Injury, Trauma and Illness Record* as soon as possible
- request the approved provider/coordinator to notify the regulatory authority (within 24 hours) in the event of a serious incident.

Families will ensure:

They must have to provide the medicine of the child whenever child/ren with medical condition enters the FDC. Any parents without medicine will not allow to leave child in FDC facilities and will be charged even for the denial to take child/ren in care. It's solely parents responsibility to provide up to date details of child medical condition and medical plan.

- they provide the FDC Service management with accurate information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form
- they provide the FDC Service with a medical management plan prior to enrolment of their child
- they consult with Coordinator and FDC educator to develop a risk minimisation plan and communication plan
- the FDC Service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they acknowledge they have received a copy of the *Medical Conditions Policy and Administration of Medication Policy*
- they notify the FDC Service and educator if any changes are to occur to the medical management plan
- they notify the FDC Service and educator verbally when children are taking any short-term medications AND whether or not these medications may be self-administered (only applicable for a child over preschool age)
- they provide adequate supplies of the required medication and complete the *Administration of Medication Record*

- they provide an updated copy of the child’s medical management plan **annually** or evidence from a Medical Practitioner to confirm the plan remains unchanged
- they provide written consent for their child’s medical management plan to be displayed in the FDC residence/service.

Self-Administration of Medication

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

- a parent or guardian provides written authorisation with consent on the child’s enrolment form - administration of medication
- medication is stored safely by the FDC educator, who will provide it to the child when required
- supervision is provided by the FDC educator whilst the child is self-administering medication
- a recording is made in the medication record for the child that the medication has been self-administered
- parents will acknowledge the details in the medication record upon collection of their child with a signature and date

(See *Administration of Medication Policy* for further information)

MEDICAL MANAGEMENT PLAN

Any medical management plan provided by a child’s parents and/or registered medical practitioner should include the following:

- specific details of the diagnosed health care need, allergy or relevant medication condition
- supporting documentation (if required)
- a recent photo of the child
- current medication and dosage prescribed for the child
- if relevant, state what triggers the allergy or medical condition
- first aid/emergency response that may be required
- any medication that may be required to be administered in case of an emergency
- further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance
- contact details of the medical practitioner who signed the plan
- the date of when the plan should be reviewed
- a copy of the medical management plan will be displayed for FDC educators and educator assistants to see to ensure the safety and wellbeing of the child, whilst ensuring the child’s privacy by displaying only in an area generally only available to staff of the FDC Service and FDC educator
- the FDC Service must ensure the medical management plan remains current all times.

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place. (Regulation 90(1)(c))

A meeting will be arranged with the parents/guardian as soon as the FDC Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting a risk minimisation plan will be developed in consultation with the parent/guardian and FDC educator to ensure:

- that the risks relating to the child's specific health care need, allergy, or medical condition are assessed and minimised
- that practices and procedures in relation to the safe handling, preparation, serving, and consumption of food are developed and implemented
- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all FDC educators, educator assistants, 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 care without medication prescribed by the child's medical practitioner in relation to the child's specific health need, allergy or medical condition
- risk minimisation plan(s) are reviewed at least annually and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child's health and medical condition is communicated to parents at the end of each day by the educator
- parents are notified by the educator 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 the educator when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*.

COMMUNICATION PLAN

The communication plan explains how relevant staff members and volunteers are informed about the medical management and risk management plans and how the parent of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after the meeting with the parents/guardian to ensure:

- all relevant staff members, educators and volunteers are informed about the *Medical Conditions Policy*, the medical management plan and risk minimisation plan for the child; and
- an individual child communication document is created so that a parent can communicate any changes to the medical management plan and risk management plan for the child in writing.

At all times, families who have a child attending the FDC Service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child’s health management and communication plans.

Resources

[ASCIA anaphylaxis e-training for schools and early childhood education/care](#)

[ASCIA plans for Anaphylaxis](#)

[Coeliac Australia](#)

[Cystic Fibrosis Australia](#)

[Diabetes Australia](#)

[Epilepsy Foundation](#)

[National Asthma Australia](#)

[National Allergy Strategy](#)

SOURCE

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

Australian Children’s Education & Care Quality Authority (ACECQA). 2020. Policy and Procedure Guidelines. *Dealing with Medicals in Children Policy Guidelines*.

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National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.).

Occupational Health and Safety Act 2004.

Revised National Quality Standard. (2018).

Department of Education Victoria *Meeting children’s health needs* (2020).

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy 		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
	<ul style="list-style-type: none"> • minor formatting edits within text • hyperlinks checked and repaired as required 	
OCTOBER 2021	<ul style="list-style-type: none"> • Policy reviewed and included suggested guidelines from ACECQA Dealing with Medical Conditions in Children (June 2021) • Additional section added <i>Cook and Food Handlers</i> • National Allergy Strategy link added 	JUNE 2022
MAY/JULY 2021	<ul style="list-style-type: none"> • Duty of Care section added • minor edits as policy was reviewed in September 2020 following feedback from QLD regulatory authority • inclusion of staff annual ASCIA anaphylaxis e-training as best practice • resources added for management of medical conditions • communication plan information added • sources checked for currency 	JUNE 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> • additional regulations added • administration of medication regarding original container, prescribed dosage/authorisations added • minor changes to relate policy to Administration of Medication Policy • procedure for self-administration of medication added 	JUNE 2021
APRIL 2020	<ul style="list-style-type: none"> • additional information added to points • additional wording added to include diagnosed health care need, allergy or relevant medical condition 	JUNE 2020
JUNE 2019	<ul style="list-style-type: none"> • Some grammar, punctuation and spelling edited. • Some sentences reworded/refined. • Additional information added to points. • Sources/references added & alphabetised. • Related policies added. 	JUNE 2020
JUNE 2018	<ul style="list-style-type: none"> • Included the 'Related Policies' section and minor adjustments made to terminology. 	JUNE 2019
DECEMBER 2017	<ul style="list-style-type: none"> • Updated policy to comply with the changes to the National Quality Standard 	JUNE 2017
MAY 2017	<ul style="list-style-type: none"> • Modifications made for Family Day Care Services 	TBA

2.57 DIABETES MANAGEMENT POLICY

Diabetes in children can be a diagnosis that has a significant impact on families and children. It is imperative that the Family Day Care (FDC) educator and educator assistant at Nurture Childcare and Educationf Services understands the responsibilities of diabetes management to reduce the risk of

emergency situations and long-term complications. Most younger children will require additional support from the FDC educator/educator assistant to manage their diabetes whilst in attendance however, older school aged children may be working towards independence and learning to self-monitor blood glucose and insulin injecting. Nurture Childcare and Education Services will provide full support for the management of Diabetes if informed and medical plan will be provided by parents. Service supervisor may communicate with FDC Educator and with parents time to time about the health condition of child and if there is any special care required. (Nur)

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
12	Meaning of a serious incident
86	Notification to parents of incident, injury, trauma and 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

96	Self-administration of medication
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Administration of First Aid Policy	Incident, Injury, Trauma and Illness Policy
Administration of Medication Policy	Medical Conditions Policy
Enrolment Policy	Privacy and Confidentiality Policy
Family Communication Policy	Supervision Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for medical conditions including diabetes. Our Family Day Care (FDC) Service is committed to providing a safe and healthy environment that is inclusive for all children, educators/educator assistants, visitors and family members. The aim of this policy is to minimise the risk of a diabetic medical emergency occurring for any child whilst at our FDC Service by supporting young people with diabetes, working in partnership with families and health professionals, and following the child's medical management plan.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

DUTY OF CARE

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

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

Our FDC Service will ensure all educators, educator assistants and coordinators, including relief staff, have adequate training and knowledge about diabetes and know what to do in an emergency to ensure the health and safety of children (especially regarding hypoglycaemia and safety in sport).

DESCRIPTION

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

IMPLEMENTATION

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

A copy of all our *Medical Conditions Policy* and *Diabetes Management Policy* will be provided to all FDC educators/educator assistants, volunteers, and families of the FDC Service. It is important that communication is open between families and educators so that management of diabetes is effective.

Children diagnosed with diabetes will not be enrolled into the FDC Service until the child's medical management plan is completed and signed by their medical practitioner or diabetes medical team, and the relevant FDC educator/educator assistants have been trained on how to manage the individual child's diabetes. A risk minimisation and communication plan must be developed with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child.

It is imperative that all educators/educator assistants, coordinators and volunteers at the FDC 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/Coordinator will ensure that:

- before the child's enrolment commences, the family will meet with the FDC Service and FDC educator to begin the communication process for managing the child's medical condition in adherence with the registered medical practitioner or health professional's instructions
- parents/guardians of an enrolled child who is diagnosed with diabetes are provided with a copy of the *Diabetes Management Policy, Medical Conditions Policy and Administration of Medication Policy*
- each child with type-1 diabetes has a current individual diabetes medical management plan prepared by the child's diabetes medical specialist team, at or prior to enrolment
- discussions occur regarding authorisation for children to carry diabetes equipment with them and the self-administration of Blood Glucose testing and insulin injecting. Any authorisations for self-administration must be documented in the child's medical management plan and approved by the FDC Service, FDC educator, parents/guardian and the child's medical management team.
- a child's diabetes medical management plan is signed by a registered Medical Practitioner or Paediatrician and inserted into the enrolment record for each child. This will include all information on how to manage the child's diabetes on a day-to-day basis as well as the emergency management of the child's medical condition. Information may include:
 - blood glucose testing- BG meter
 - insulin administration
 - food, carbohydrate counting
 - how to store insulin correctly
 - how the insulin is delivered to the child- as an injection or via an insulin pump/
Continuous Glucose Monitoring CGM
 - oral medicine the child may be prescribed
 - managing diabetes during physical activities and excursions
 - permission for the child to self-administer blood glucose testing and insulin injecting
- a risk minimisation plan will be developed in collaboration with parents/guardian and the FDC educator and cover the child's known triggers and where relevant other common triggers which may lead to a diabetic emergency
- a Communication Plan is developed for the FDC educator and parents/guardians encouraging ongoing communication regarding the management of the child's medical condition, the current status of the child's medical condition, and this policy and its implementation within the service prior to the child starting at the FDC Service
- all educators and educator assistants, including volunteers, are provided with a copy of the *Diabetes Management Policy* and the *Medical Conditions Policy* which are reviewed annually

- a copy of this policy is provided and reviewed during each new educator’s induction process
- all FDC educators/educator assistants have completed first aid training approved by the Education and Care Services National Regulations at least every 3 years and that this is recorded, with a copy of each staff members’ certificate held on the FDC Service’s premises
- all FDC educators/educator assistants who have children with diabetes enrolled are trained to identify the symptoms of a diabetic emergency and are aware of the location of the diabetic medical management plan, required insulin/food as well as the risk minimisation plan
- when a child diagnosed with diabetes is enrolled, staff and the FDC educator and educator assistant will be provided with regular professional training on the management of diabetes and, where appropriate, emergency management of diabetes
- the FDC educator/educator assistant is appropriately trained to perform finger-prick blood glucose or urinalysis monitoring and is aware of the action to be taken if these are abnormal
- individual child’s medical management/action Plan will be displayed at the FDC residence **and/or approved venue** and copies kept at the FDC Service
- consideration is given as to how and where insulin is stored and the safety of sharps disposal
- the family supplies all necessary glucose monitoring and management equipment, and any prescribed medications prior to the child’s enrolment
- FDC educators/educator assistants accompanying children outside the FDC Service to attend excursions, or any other event carries the appropriate monitoring equipment, any prescribed medication, a copy of the diabetes medical management plan for children diagnosed with diabetes
- the programs delivered at the FDC Service are inclusive of children diagnosed with diabetes and that children with diabetes can participate in activities safely and to their full potential
- updated information, resources and support is regularly given to families for managing childhood diabetes
- meals, snacks and drinks that are appropriate for the child and are in accordance with the child's diabetes medical management plan are available at the FDC Service at all times
- eating times are flexible and children are provided with enough time to eat
- Diabetes Australia are contacted for further information to assist educators to gain and maintain a comprehensive understanding about managing and treating diabetes
- applications for additional funding opportunities are made if required to support the child and FDC educators.

Educators/Educator Assistants will:

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

- know which children are diagnosed with diabetes, and the location of their monitoring equipment, diabetes medical management plans and any prescribed medications
- perform finger-prick blood glucose or urinalysis monitoring as required and will act by following the child's diabetes management plan if these are abnormal
- communicate with parents/guardians regarding the management of their child's medical condition as per their communication plan
- ensure that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the FDC Service
- follow the strategies developed for the management of diabetes
- ensure a copy of the child's diabetes medical management plan is visible and known to FDC educators/educator assistants
- take all personal medical management plans, monitoring equipment, medication records and any prescribed medication on excursions and other events outside the FDC residence/approved venue
- recognise the symptoms of a diabetic emergency and treat appropriately by following the diabetes medical management plan
- administer prescribed medication if needed according to the medical management plan in accordance with the FDC Service's *Administration of Medication Policy*
- identify and where possible minimise possible triggers as outlined in the child's diabetes medical management plan and risk minimisation plan
- increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties and family days, as well as during periods of high-energy activities
- maintain a record of the expiry date of the prescribed medication relating to the medical condition to ensure it is replaced prior to expiry
- ensure the location is known of glucose foods or sweetened drinks to treat hypoglycaemia (low blood glucose), e.g., glucose tablets, glucose jellybeans, etc.

Families will ensure they provide the Family Day Care Service with:

- details of the child's health condition, treatment, medications, and known triggers
- their doctor's name, address and phone number, and a phone number for an authorised nominee and/or emergency contact person in case of an emergency
- written authorisation for their child over preschool age to self-administer medication (if applicable)
- a medical management plan following enrolment and prior to the child starting at the FDC Service is completed by their child's diabetes team (paediatrician or endocrinologist, general practitioner and diabetes educator). The plan should include:

- when, how, and how often the child is to have finger-prick or urinalysis glucose or ketone monitoring
- what meals and snacks are required including food types/groups amount and timing
- what activities and exercise the child can or cannot do
- whether the child can go on excursions and what provisions are required
- what symptoms and signs to look for that might indicate hypoglycaemia (low blood glucose) or hyperglycaemia (high blood glucose)
- what action to take in the case of an emergency
- an up-to-date photograph of the child
- the appropriate monitoring equipment needed according to the diabetes medical management plan- blood glucose meter with test strips, insulin pump consumables and hypo treatment foods/drinks
- an adequate supply of emergency insulin for the child at all times according to the medical management plan
- information regarding their child’s medical condition and provide answers to questions as required and pertaining to the medical condition and management of their condition
- any changes to their child’s medical condition including the provision of a new diabetes medical management plan to reflect these changes as needed
- all relevant information and concerns to staff, for example, any matter relating to the health of the child that may impact on the management of their diabetes

DIABETIC EMERGENCY

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

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

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

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

SIGNS and SYMPTOMS

HYPOGLYCAEMIA- (HYPO)

If a child is wearing a CGM device, it will sound an alert when they are below their target range.

Symptoms can vary between each young person.

If caused by low blood sugar, the child may:

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

HYPERGLYCAEMIA –(HYPER)

If caused by high blood sugar, the child may:

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

If a child suffers from a diabetic emergency the Family Day Care educator will:

- Follow the child's Diabetic medical management/action plan
- If the child does not respond to steps within the diabetic medical management plan, immediately dial 000 for an ambulance
- Continue first aid measures and follow instructions provided by emergency services
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Inform the Approved Provider as soon as practicable
- The Approved Provider will notify the regulatory authority within 24 hours

REPORTING PROCEDURES

Any incident involving serious illness of a child which requires urgent medical attention or hospitalisation is regarded as a serious incident. The following is required:

- the FDC educator involved in the situation will complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the coordinator/nominated supervisor ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- a copy of the *Incident, Injury, Trauma and Illness Record* will be placed in the child's file
- the Nominated Supervisor will inform management about the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours as per regulations
- opportunities for debriefing after each incident with the FDC educator and coordinator will be provided. The child's individual medical management plan and risk minimisation plan will be evaluated, including a discussion of the effectiveness of the procedure used.

For more information, contact the following organisations:

Diabetes Australia

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

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

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

State and Territory specific information

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

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

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

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

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

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

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

Source

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

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Guide to the National Quality Standard. (2020)

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

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

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

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text- Family Day Care Service abbreviated to FDC Service for consistency throughout policy • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JULY 2021	<ul style="list-style-type: none"> • Policy review includes ACECQA policy guidelines/components (June 2021) • rearranged some content within policy for better flow • additional section added: reporting procedures • sources checked for currency 		JULY 2022
JULY 2020	<ul style="list-style-type: none"> • additional related policies added • information regarding Risk Minimisation and Communication Plan added • Emergency Action Plan term used throughout policy • inclusions for the Medical Management Plan for diabetes • information regarding self-administration of medication • further information on diabetic emergency added • deleted repeated information • checked sources and links for currency • minor formatting editing 		JULY 2021
JULY 2019	<ul style="list-style-type: none"> • Grammar and punctuation edited. • Additional information added to points. • References checked & corrected re diabetes info. • 'For more information...' section – references updated/corrected. 		JULY 2020

	<ul style="list-style-type: none"> • New references added for each state. • Sources checked for currency. • Regulation 136 added. 	
JULY 2018	<ul style="list-style-type: none"> • New policy draft 	JULY 2019

2.58 HEALTH AND SAFETY POLICY

Family Day Care approved residences or venues can be high-risk environments for incidents and accidents to children, families, educators and visitors. Nurture Childcare and Education Services is committed to maintaining a safe and healthy environment in all residences, through comprehensive policies and procedures, managing risks and hazards appropriately and effectively. If anything notices by the supervisor of the service which might affect the health and safety of children, family or Educator themselves then Service supervisor will notify to FDC Educator not the spot and if required then written information will also provided so Educator can sort that problem in given time frame and if Educator will ignore and will not follow the provided guidelines then Service may put penalty on the Educator and may take the step to hire person or buy equipment for the safety of the children or may terminate to educator on immediate affect due to purposefully negligence or not working according to service policy and procedure and National law and regulation WA 2012.

NATIONAL QUALITY STANDARDS (NQS)

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

2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
2.2.3	Child Protection	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

73	Educational programs
74	Documenting of child assessments or evaluations for delivery of educational program
75	Information about the educational program to be kept available
76	Information about educational program to be given to parents
80	Weekly menu
86	Notification to parents of incident, injury, trauma and illness
99	Children leaving the education and care service premises
102	Authorisation for excursions
103	Premises, furniture and equipment to be safe, clean and in good repair
104	Fencing
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
109	Toilet and hygiene facilities
110	Ventilation and natural light
116	Assessments of family day care residences and approved family day care venues
117	Glass (additional requirement for family day care)
158	Children's attendance records to be kept by approved provider
168	Policies and procedures are required in relation to enrolment and orientation
171	Policies and procedures to be kept available

RELATED POLICIES

Administration of Medication Policy	Nappy and Toileting Policy
Arrival and Departure Policy	Nutrition and Food Safety Policy
Bottle Safety and Preparation Policy	Orientation of Families Policy
Child Protection Policy	Physical Environment Policy
Clothing Policy	Safe Storage of Hazardous Chemicals Policy
Control of Infectious Diseases Policy	Safe Transportation Policy
Delivery of, and collection from Education and Care Service Premises	Sick Children Policy
Emergency Evacuation Policy	Sleep and Rest Policy
Governance Policy	Sun Safety Policy
Hand Washing Policy	Water Safety Policy
Incident, Injury, Trauma and Illness Policy	Work Health and Safety Policy

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place to ensure the health, safety and wellbeing of children, staff educators and families. We aim to protect the health, safety and welfare of children, educators, families and visitors of the FDC Service who may be affected by our operation through everyday practice by complying with current health and safety laws and legislation.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

New work health and safety (WHS) laws have commenced in the following States and Territories, using consistent WHS legislation instead of previous OH&S laws:

- Commonwealth
- Australian Capital Territory
- New South Wales
- Northern Territory
- Queensland
- Tasmania
- South Australia

Victoria and Western Australia are yet to develop new legislation to reflect WHS terminology.

(Victoria- Occupational Health and Safety Regulations, 2017

Western Australia- Occupational Safety and Health Act and Regulations)

The National Quality Framework establishes the standards and learning frameworks to provide high quality inclusive education and care in early and middle childhood settings, which can only occur in a safe and healthy work environment. The NQF makes few references to work, health and safety legislation as it underpins this framework. *Quality Area 2.... reinforces children’s right to experience quality education and care in an environment that provides for their health and safety.”* p: 138, 2020.

Thorough work health and safety policies, procedures and practices ensure that:

- management and Coordinators fulfil their responsibility to provide a safe workplace, without any negative impact on the health and wellbeing of employees;
- employees meet their health and safety obligations and are safe in the workplace; and
- the work environment supports quality education and care.

We are dedicated to ensuring that all health and safety needs are met through the implementation of a high standard of hygiene practices to control the spread of infectious diseases, the prevention and management of injuries and illness, and to provide a safe and secure physical environment for children. In any occurrences where children show any signs of illness, accident, injury or trauma, educators will refer to the *Incident, Injury, Trauma and Illness Policy*.

Our FDC educators are committed to assist in infection prevention controls and have completed the COVID-19 infection control training.

The importance of children’s nutritional and physical health needs will be promoted by educating children about a healthy lifestyle which will be reinforced through the everyday routine and experiences.

Information on health, hygiene, safe food, and dental care principles and practices will be displayed at to provide families with further information.

We believe in quality education and care in an environment that provides for all children’s protection through adequate supervision, safe experiences and environments, and vigilance to potential risks.

Educators at the Service are dedicated to understanding their legal and ethical responsibility to protect the children enrolled at the Family Day Care Service.

The Approved Provider will ensure every reasonable precaution has been taken to protect children from harm and hazard likely to cause injury. An annual **risk assessment** is conducted on each FDC residence and/or approved venue to identify any potential hazard and implement risk minimisation actions.

Our *Work Health and Safety Policy* provides further detail about Hazard Reduction and Risk Minimisation.

CHOOSING APPROPRIATE RESOURCES AND EQUIPMENT

- Resources and equipment will be chosen to reflect the cultural diversity of the Family Day Service's community and the cultural diversity of contemporary Australia.
- All new equipment will be checked against Australian Safety Standards and added to the equipment and resources register.
- Children will be carefully introduced to new toys and pieces of equipment and taught how to use and care for them appropriately.
- Equipment that should only be used under supervision will be stored in a safe place out of children's reach.
- The use of pools and toys or equipment which involves the use of water will be used under the direct supervision of educators. All equipment will be emptied of water when not in use and stored in such a manner that it cannot collect water.
- Equipment will be checked regularly by the FDC educator to ensure it is in a clean and safe condition which will be recorded on the appropriate **indoor and outdoor safety checklist**.
- The Approved Provider will ensure an annual **risk assessment** is conducted on each FDC residence and/or approved venue.

THE CHILDREN'S LEARNING ENVIRONMENT

- The Family Day Care Service will keep a **record of any changes** that is made to the physical environment of the FDC residence, such as rearranging of rooms etc to show continuous improvement.
- The Family Day Care Service will ensure educators document the links between the arrangements and choice of resources and equipment and the children's learning in the program.

ON-GOING MAINTENANCE

- The Approved Provider/Coordinator will ensure educators reflect on the environment and establish a plan ensuring that the environment continuously complies with our philosophy of providing a safe and secure environment, that is stimulating and engaging for all who interact with it.
- The Approved Provider/Coordinator will also ensure that the family day care residence and its grounds comply with Local Government regulations, and regulations regarding fire protection, ventilation, natural and artificial lighting and safety glass as indicated in annual assessments.

SAFETY CHECKS

Prior to children arriving at the residence/or approved venue, a daily inspection of the premises will be undertaken which will include the:

- residence perimeters
- fences/fence Line
- gates
- paths
- buildings – including garages and sheds
- all rooms accessible by children
- fixed equipment
- sand pit/mud pit
- risk posed by any animals at the residence

This must be done to identify any dangerous objects in the grounds ranging from sharps to poisonous or dangerous plants and animals (including snakes). In the event of a sharp object being found (for example a syringe) the FDC educator will wear gloves and use tongs to pick up the object and place it in the 'sharp object box'. This box will be disposed of as per the recommendations of our local council.

Similarly, trees in the grounds must be checked regularly for overhanging, dead or dangerous looking branches as well as checked for any infestations or nests.

Non-fixed play equipment at the family day care residence will comply with current safety standards and regulations.

The family day care residence will have regular pest inspections carried out by an accredited pest control company. Documentation of these inspections will be kept and any findings from the pest control check will be carried out in line with the recommendation of the pest control company.

The *Indoor and Outdoor Daily Safety Checklists* will be used as the procedure to conduct these safety checks. A record of these will be kept by the educator and Approved Provider. Any required maintenance will immediately be reported to the Coordinator who is responsible to ensure the appropriate repairs are carried out within a given time frame (negotiated with the educator). Alternatively, the educator will make immediate arrangements for maintenance to be carried out and report completion to the Coordinator or Approved Provider. Any equipment that is not compliant or is a risk to any child's safety, cannot be used until appropriate repairs are made.

The following can be used as a guideline to produce *Checklists for the Family Day Care Residence* to be used by educators.

2.58.1 CHECKLIST: OUTDOOR

- Maintenance of residence/building** – regularly maintain and check for hazards. Check residence is in a safe, clean and hygienic condition. Records of any damages and subsequent repairs are kept on file at both the FDC residence and at the principal office of the Family Day Care Service
- Doors** – have finger jam protectors
- Fences** – securely and effectively fence all sides of outdoor play areas from roads, water hazards, and driveways and are of appropriate height and design so that children of preschool age or under cannot go through, over or under. Ensure childproof self-locking devices are installed on all gates.
- Garbage** – safe and prompt disposal. Use lidded secure bins that prevent child access and maintain in a clean and safe condition. Encourage recycling. Keep bins away from children’s play area at the residence.
- Garden** and debris removed. Regularly trim branches and bushes. Check mulch area for snakes or other vermin.
- Garages and sheds** – keep locked at all times.
- Heating, cooling, ventilation, lighting** – comfortable, safe, maintained, guarded. Ensure children cannot turn on any heating appliance.
- Non-slip** stairs, steps, and ground surfaces.
- Renovation** dangers e.g. lead, asbestos, holes and excavations – reduce risks. Notification must be made to the Approved Provider at least 2 weeks in advance, if any renovation/home improvements are to be made (including any trades visiting the residence)
- Pesticide** residue – dangerous chemicals should not be used to remove vermin.
- Safety glass** is installed according to the Australian Standards on all glass doors and windows accessible to children, and safety decals on both sliding doors and plate glass doors at child and adult eye level.
- Security** – minimising unauthorised access with appropriate fencing and locks.
- Under house access** (including buildings on stilts and footings) – lock or block access.
- Window fly screens** securely fitted, maintained and permanent.
- Hazards and driveways** – maintain fences, ensure correct height, install childproof self- locking devices on gates. Ensure children cannot access driveways without educator supervision.
- Bikes and wheeled toys** – it is recommended that correctly fitted helmets be worn every time children use ‘bikes’ and wheeled toys.

- ❑ **Car park area** – ensure family members are aware of pedestrian safety rules such as holding their child’s hand and alighting children from the safety door. Encourage families to always supervise their children in the car parking area or near the road, to prevent accidents and injuries, which could occur because of reversing vehicles.
- ❑ **CPR chart** – ensure chart is prominently displayed in outdoor area
- ❑ **Finger entrapment** – all holes or openings in playground equipment must be between 8-25 mm.
- ❑ **First aid kit is approved** – maintained, and accessible throughout outdoor play.
- ❑ **Hazardous Plants** – identify and remove or make inaccessible to children.
- ❑ **Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tools or machinery are stored securely and are inaccessible to children.
- ❑ **Pet and animal droppings** cleared or inaccessible to children in outdoor areas, exclude dogs from children’s play areas; finger proof pet enclosures; supervise pet interactions with children.
- ❑ **Pool safety, fencing and gate compliance** – paddling pools emptied immediately after use, turn upside down, disinfected if soiled.
- ❑ **Swimming pools** – ensure isolation barrier complies with Australian Standard. Barrier must be at least 1.8m high. Gates must be self-closing and self-latching and have a child resistant lock. Direct access from house to pool is not possible. Remove any objects that could be moved to help a child climb over a fence or open a gate. Remove ladder from above ground pools [check with state/territory regulations]
- ❑ **Certified safety certificate** –Legal requirements for pools, spas, paddling pools and inflatable pools vary across Australia. Educators and approved providers must check with local councils and regulatory authorities for safety standards/compliance certificates
- ❑ **Spas** – must be inaccessible to children with a locked pool cover when not in use or isolation barrier with self-closing and self-locking gate. Isolation barrier must be at least 1.2m high and without footholds that would allow a child to climb over
- ❑ **Safe play rules and adequate safe play areas** – talk with children about how to play safely. Maintain safe layouts for outdoor play areas to avoid collisions between children.
- ❑ **Sandpits** – cover when not in use, regularly clean, rake, and remove sand soiled by faeces or blood. Hose sandpits at end of day after removing contaminated sand and material.
- ❑ **Soft fall** – appropriate ground cover under outdoor climbing and play equipment, meets standards.
- ❑ **Sun protection** clothing, hats, and sunscreen, for unshaded areas - minimise play at peak sun exposure times. Install a sunshade over sandpits and play areas (can be portable)
- ❑ **Ensure children are visible and supervised at all times.** High-risk areas and climbing and other outdoor play equipment. Make hazardous equipment, machinery, chemicals, and any other materials inaccessible to children.

- ❑ **Water hazards** – cover and make inaccessible to children, e.g. ponds, dams, spas, creeks, nappy buckets, water features.
- ❑ **Water troughs** are to be used under adult supervision only and will not be used without a stand, keeping it off the ground. Children are to remain standing on the ground whilst using the water trough
- ❑ **Play equipment** that is higher than 50cm must have soft fall installed underneath at least 25cm in depth under and 1.9m from the perimeter of the equipment. Place outdoor play equipment away from paths and solid garden edging.
- ❑ **Swings** – check regularly for wear or sharp protruding parts. Ensure swing frames are well anchored into the ground and surfacing is provided under the swing frame
- ❑ **Surfacing** used underneath and around equipment complies with Australian Standard AS 4685 and is maintained regularly; materials may need to be raked, redistributed and checked weekly for spiders, sharp objects or animal litter.
- ❑ **Snakes or other reptiles** – grounds will be searched during the safety check- check garden sheds, mulch areas, logs, rocks and anywhere with long grass where snakes or other reptiles may be found

2.58.2 CHECKLIST: INDOORS

- ❑ **Access for children and adults with disability** - ensure safe access into, within and out of the family day care residence, security, toilet and washing facilities, and check for hazards for wheelchairs and people with impaired sight, hearing or mobility.
- ❑ **Barriers** – age appropriate, child proof, self-locking barriers to balconies, stairways, kitchen, bathroom, laundry, garage, other levels in the family day care residence, front and back garden.
- ❑ **Children at risk** – maintain extra security and supervision for children at special risk.
- ❑ **Choking hazards** – e.g. small toy parts, beads, nuts, blind and curtain cords, plastic bags, sandwich bags and balloons.
- ❑ **Decorations and children's artwork** – do not place near ceiling fans, air conditioners or heaters. Avoid use of tacks, pins, and staples.
- ❑ **Emergency evacuation** – develop an evacuation plan and emergency contact numbers display, inform families, and practice evacuation procedures. Ensure exit pathways are kept clear at all times.
- ❑ **Fire** – fire blanket, extinguisher, fire exits, smoke detectors, electrical switch are easily accessible and regularly serviced.
- ❑ **First aid** kit with approved contents is maintained and accessible. Ensure First Aid certificates are current for all educators and educator assistants.
- ❑ **Furniture and nursery equipment** – stable, maintained and meets Australian safety standards.

- Guard and make inaccessible to children** – heaters, coolers, fireplaces, stoves, microwaves, power points, and office equipment.
- Hazardous indoor and outdoor plants** – identify, remove or make inaccessible to children.
- Heaters** – ensure that children cannot meet hot surfaces. It is preferable to use heating where combustion products are ducted outside. If gas heating is used ensure there is adequate ventilation while the heater is operating. Ensure heaters are away from children’s cots.
- Hot water** – ensure the hot water supply is regulated so as to keep it below the temperature at which a child can be scalded (the current KidSafe recommendation is below 50°C 45°C for child care services).
- Machinery, tools and equipment** – ensure all engine operated or other hazardous equipment, tool or machinery are stored securely and are inaccessible to children.
- Noise** – reduce excessive exposure.
- Non-slip, non-porous** floors, stairs.
- Spills** – clean away as they occur.
- Pets and animals** – inform families of pets being kept on premises and plans to obtain new pets. Ensure pets are vaccinated, wormed, don’t have fleas, and are clean, and healthy. Keep pet accessories such as pet food, litter boxes, pet toys away from children. Exclude dogs from children’s play areas. Keep children-pet interactions minimal and supervise interaction times.
- Power points** – check for safety plugs in used electrical outlets/power points
- Record details** and notify parents of any child incident, accident or injury (including biting and scratching).
- Safe play rules and adequate play spaces** – discourage running indoors and safe furniture layout to avoid collisions.
- Safety glass used and installed** according to Australian Standards- AS 1288-2006 and Australian Building Codes on all glass doors and windows accessible to children, **safety decals** on sliding doors and plate glass doors at child and adult eye level.
- Security** – ensure all entry doors are locked at all times and place bells on doors.
- Smoke & drug free environment** in all areas at all times- including alcohol
- Educators personal items** – ensure personal items such as bags, sharp instruments, toiletries and medicines are kept secure and are inaccessible to children.
- Stairways**, ramps, corridors, hallway, external balcony must be enclosed to prevent a child falling.
- Stairs**, ensuring design of stairs and balustrades are in accordance to relevant building codes- and do not have openings larger than 125mm between vertical rails
- Store in locked cabinet** any unsafe items, e.g. chemicals, medicines, razors, knives and electrical equipment.

- ❑ **Supervision and visibility of children** – ensure children are visible and supervised at all times. High risk areas are children in highchairs, playpens and play areas, on change tables, and in nappy change and toilet areas.
- ❑ **Toys** – meet safety standards, age appropriate, maintained, and non-toxic.
- ❑ **Windows** – move chairs and furniture such as beds, cots or change tables away. Ensure all windows above 2 m above the ground have a lockable device to restrict opening or have permanent bars fixed to the window
- ❑ **Blinds and cords** – ensure any loose or looped cords are secured and are not a hazard to young children
- ❑ **Balconies** – move any furniture, pot plants or other climbable object away from edge of balcony, keep sliding doors to balcony locked

2.58.3 CLEANING OF PREMISES, FURNITURE AND EQUIPMENT

GENERAL CLEANING

The FDC educator will use a structured **cleaning schedule** to ensure that all cleaning in the family day care residence is carried out regularly and thoroughly to maintain a hygienic environment for children.

To minimise educator and children’s exposure to infectious diseases or viruses such as coronavirus (COVID-19) our Family Day Care Service will adhere to all recommended guidelines from the Australian Health Protection Principal Committee (AHPPC) and the National Health and Medical Research Council (NHMRC).

To ensure a high level of cleanliness, hygiene and safety, educators are recommended to:

- clean and disinfect high touch surfaces at least twice daily (door handles, light switches, taps)
- clean at the end of each day and throughout the day as needed
- clean up accidents and spills as quickly as possible
- vacuum or sweep floors daily
- clean and sanitise bathroom floors and nappy change areas at regular, schedules intervals during the day with hot soapy water
- clean toilets at regular, schedules intervals during the day
- empty and sanitise garbage bins
- clean and sanitise tables and eating areas between meals
- ensure kitchen benches are cleaned with warm soapy water
- clean fridge regularly with warm soapy water
- adhere to food safety requirements (*see Nutrition and Food Safety Policy*)

- clean and sanitise cots, highchairs, toys, cushions, chairs, tables and other furniture

When purchasing, storing and/or using any dangerous chemicals, substances, medicines or equipment, our Family Day Care Service will ensure educators:

- adhere at all times to manufacturer's advice and instructions when using products to clean furniture and equipment
- store all dangerous chemicals, substances and medicines in their original containers provided by the manufacturer. All labels and/or use by dates should be kept intact at all times
- not use any substance found to be stored in a different container than originally provided, or with destroyed labels and/or unknown use by dates where appropriate under any circumstances
- containers are disposed of correctly following local council guidelines, and not reused under any circumstance
- store all dangerous chemicals, substances and equipment in a locked place or facility which is labelled, secure and inaccessible to children. These materials may include, but are not limited to, all cleaning materials, detergents, poisonous or dangerous substances, dangerous tools and equipment including those with sharp and razor edges and toiletries
- follow the instructions of manufacturers, particularly of any product which may need to be stored in a refrigerated environment
- refrigerate substances that must be stored in a labelled, child resistant container, preferably in a separate compartment or in a part of the refrigerator inaccessible to children
- keep a record of the Safety Data Sheet (SDS) for all hazardous chemicals (formerly called a Material Data Safety Sheet). Our Family Day Care Service will adhere to the manufacturer's instructions for use, storage, and first aid instructions recorded on the SDS
- **keep a register of all hazardous chemicals**, substances and equipment used at the Service
- Information recorded should include where they are stored, their use, any risks, first aid instructions, and the current SDS. The register will be readily accessible
- appropriate personal protective clothing is worn in accordance with the manufacturer's instructions when using and disposing of hazardous substances or equipment
- seek medical advice immediately if poisoning or potentially hazardous ingestion, inhaled, skin or eye exposure has occurred, or call the Poisons Information Line on **13 11 26**, or call an Ambulance on 000
- use the **Poison Safety Checklist** to ensure requirements are adhered to at all times
- implement emergency, medical and first aid procedures
- notify the Approved Provider to ensure relevant notification is given to the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.

- call emergency services in any major emergency involving a hazardous chemical or equipment, a hazardous gas or a fire or explosion hazard by dialling 000 and also notifying the Approved Provider to notify the appropriate authority that administers workplace health and safety and any other person or authority as required by regulations or guidelines.

2.58.4 HAND WASHING

Effective handwashing is a vital strategy in the prevention of spreading many infectious diseases. Family Day Care educators will ensure [signs and posters](#) remind parents and visitors of the importance of handwashing to help stop the spread of COVID-19 and other infectious diseases. All adults and children should wash their hands thoroughly with soap and water or alcohol-based hand sanitiser:

- upon arrival at the FDC Service
- when hands are visibly dirty
- when coming inside from being outside
- before eating
- before putting on disposable gloves
- before preparing food items
- after touching raw meats such as chicken or beef
- before and after toileting children or coming into contact with any body fluids such as blood, urine or vomit
- before and after wearing gloves to change infant nappies
- after touching animals or pets
- after blowing your nose or sneezing and after assisting a child to blow their nose
- after meals
- after going to the toilet
- before and after administering first aid
- before and after administering medication
- before and after preparing children's bottles
- after removing protective gloves
- after using any chemical or cleaning fluid

2.58.5 MINIMISING POTENTIALLY DANGEROUS SUBSTANCES

Our Family Day Care Service minimises the use of potentially dangerous substances. Ordinary detergents will be used to help remove dirt from surfaces. Colour-coded sponges (e.g. pink for the kitchen, yellow

for the bathroom) will be used in order to eliminate cross contamination. Educators will ensure to wash and dry hands after using any dangerous substance.

2.58.6 DISINFECTANTS

Disinfectants are usually unnecessary as very few germs can survive exposure to fresh air and natural light. In an outbreak situation, such as gastroenteritis or other infectious virus (COVID-19), the Public Health Unit or SafeWork Australia, may specify the use of a disinfectant and increased frequency of cleaning. In this situation, for the disinfectant to work effectively, there still needs to be thorough cleaning using a detergent beforehand. Essentially, there is no ideal disinfectant. Disinfectants cannot kill germs if the surface is not clean. It is more important to ensure that surfaces have been cleaned with detergent and warm water than to use a disinfectant.

In the event of an outbreak of gastroenteritis, a disinfectant such as bleach solution may be used following the manufacturer's directions- e.g.: White King Bleach (sodium hypochlorite 42g/L) diluted part bleach (25mL) in 40 parts water (1L) to make 0.1% solution Gloves must be worn at all times when handling and preparing bleach.

To kill germs, any disinfectant needs:

- A clean surface to be able to penetrate the germ.
- To be able to act against those particular germs.
- To be of the right concentrate.
- Enough time to kill the germs, which is generally at least 10 minutes.

DETERGENTS

To work in accordance with *Staying healthy: Preventing infectious diseases in early childhood education and care services*, proper cleaning with detergent and warm water, followed by rinsing and air-drying kills most germs from surfaces as they are unable to multiply in a clean environment. Cleaning equipment should be stored and taken care of so it can dry between uses and not allow germs to multiply.

NAPPY CHANGE AREA

The nappy change area must be cleaned after each use and at the end of the day with detergent and warm water or detergent and warm water and dried with paper towel. Placing paper towel on the change mat and removing this after each nappy change is recommended. Refer to *Nappy Change and Toileting*

Policy and procedure. The FDC educator must always wash their hands after cleaning the nappy change area.

ARRANGEMENTS FOR LAUNDERING OF SOILED ITEMS

Soiled clothing will be returned to a child's home for laundering. The FDC educator will remove soiled content prior to placing clothing into a plastic bag and securely storing these items in a sealed container, not placed in the child's bag. For more information refer to the *Nappy change and toileting* procedure.

CLOTHING

Dress-up and play clothes should be washed once a week or more frequently if soiled.

Educators will ensure personal clothing is clean and respectful at all times.

Should children's clothing become soiled during the day, the FDC educator will use spare clothing supplied by the parent and place soiled clothing into a sealed plastic bag to take home.

Spare clothing may be used if the child has no change of clothes.

TOY CLEANING

FDC educators are required to clean the children's equipment and toys on a regular basis in order to minimise cross contamination and the spread of illnesses. FDC educators will wash a toy immediately if it has been sneezed on, mouthed, and/or soiled or if it has been discarded after play by a child who has been unwell. Toys and equipment must be cleaned more often in the event of an infectious disease or virus is present in the FDC service or community- (COVID-19).

- Most toys can be washed with normal dishwashing liquid and rinsed with clean water.
- Get into corners with a toothbrush and allow to air dry (if possible, in the natural sunlight).
- Leaving items such as LEGO and construction blocks to drain on a clean tea-towel overnight is ideal.

WOODEN TOYS

- Should be wiped over with a damp cloth – please do not immerse in water as this can destroy the equipment

PLAY DOUGH

Family Day Care educators will reduce the risk of the spread of disease when playing with play dough by:

- encouraging hand washing before and after using play dough
- storing the play dough in a sealed container in the refrigerator between uses
- making a new batch of play dough each week, and

- if there is an outbreak of vomiting and/or diarrhoea, discarding the playdough at the end of each day during the outbreak.

RATTLES AND BABY TOYS

- Must not be immersed in water as it can get inside, rendering the toy useless.
- Wipe thoroughly with hot water or a cloth with diluted detergent.

RIDE-ON VEHICLES AND OUTDOOR TOYS

- Must be cleaned (children can often help with this activity).
- Please take care not leave outdoor toys exposed to the elements as this reduces their lifespan.

PUZZLES AND GAMES

- Wooden puzzles as per 'Wooden Toys' above
- Cardboard puzzles should be wiped over with a slightly damp cloth.

2.58.7 SUN PROTECTION

Our Family Day Care Service will work in compliance with the NSW SunSmart Program to ensure children's health and safety is maintained at all times whilst at the FDC Service. SunSmart recommends that all early childhood education and care services have a SunSmart Policy to reduce UV damage to those in care, including Educators.



Our Sun Safety Policy has been accepted and approved by SunSmart.

OUTDOOR ACTIVITIES

Sun protection is required when UV levels reach level 3 or above. The Family Day Care Service will monitor UV levels daily through one of the following methods:

- using smart phone SunSmart app
- viewing Bureau of Meteorology website www.bom.gov.au
- visiting www.myuv.com.au

The Service will use a combination of sun protection measures whenever UV Index levels reach 3 and above.

- Care is taken during the peak UV radiation times and outdoor activities are scheduled outside of these times where possible.
- Minimising outdoor activities includes reducing both the number of times (frequency) and the length of time (duration) children are outside.

- All sun protection measures (including recommended outdoor times, shade, hat, clothing and sunscreen) will be considered when planning excursions and incursions.

SHADE

The Family Day Care educator will provide and maintain adequate shade for outdoor play at their residence. Shade options can include a combination of portable, natural and built shade. Regular shade assessments should be conducted to monitor existing shade structures and assist in planning for additional shade. Play experiences will be monitored throughout the day and moved as required to remain in the shade.

HATS

FDC educators, educator assistants and children are required to wear sun safe hats that protect their face, neck and ears. A sun safe hat is:

- legionnaire hat- the flap should cover the neck
- bucket hat with a deep crown and angled brim that is size of at least 5cm (adults 6cm) and must shade the face, neck and ears
- broad brimmed hat with a brim size of at least 6cm (adults 7.5cm).

Please note: Baseball caps or visors do not provide enough sun protection and therefore are not recommended. Children without a sun safe hat will be asked to play in an area protected from the sun (e.g. under shade, veranda or indoors) or can be provided with a spare hat.

CLOTHING

When outdoors, FDC educators and children will wear sun safe clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible. This includes wearing:

- loose fitting shirts and dresses with sleeves and collars or covered neckline
- longer style skirts, shorts and trousers
- Children who are not wearing sun safe clothing can be provided with spare clothing.

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

SUNSCREEN

As per Cancer Council Australia recommendations: educators and children will apply SPF30+ or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors and reapply every 2 hours or more frequently if wiped or washed off. Sunscreen is stored in a cool, dry place and the use-by-date monitored.

BABIES

Recommendations for babies from the Cancer Council Australia include:

- babies under 12 months will not be exposed to direct sunlight and are to remain in dense shade when outside
- they will wear sun safe hats and clothing

If babies are kept out of the sun or well protected from UV radiation by clothing, hats and shade, then sunscreen need only be used occasionally on very small areas of a baby's skin. The widespread use of sunscreen on babies under 6 months old is not recommended.

ROLE MODELLING

FDC educators will act as role models and demonstrate sun safe behaviour by:

- wearing a sun safe hat (see Hats)
- wearing sun safe clothing (see Clothing)
- applying SPF30 or higher broad-spectrum water-resistant sunscreen 20 minutes before going outdoors.
- using and promoting shade
- wearing sunglasses that meet the Australian Standard 1067 (optional)
- Families and visitors are encouraged to role model positive sun safe behaviour

DELIVERY AND COLLECTION OF CHILDREN

The following procedure must be adhered to at all times to ensure the safety of the children. (See *Delivery of, and collection from Education and Care Service Premises Policy* ~~Arrival and Departure~~)

ARRIVAL

- All children must be signed in by their parent or person who delivers the child to our Service
- The educator will check the sign in sheet ensuring families have signed their child in. If families have not signed the child in, the educator will sign the child in, complying with Regulation 158. (date, time, signature, name)
- A locker, hook or shelf space will be made available to children and their families. A sign is posted above the lockers nominating a symbol for each child.

DEPARTURE

- All children must be signed out by their parent or person who collects the child from the Service. If the parent or other person forgets to sign the child out, they will be signed out by the FDC educator or

Coordinator.

- Children can only be collected by a parent, an authorised nominee named on the child's enrolment record, or a person authorised by a parent or authorised nominee to collect the child. Children may leave the premises if a parent or authorised nominee provides written authorisation for the child to leave the premises.
- Children will not be released into the care of a person not authorised to collect the child e.g., court orders concerning custody and access. If an unauthorised person is not willing to leave the premises without the child, the educator will call the police.
- The FDC educator, educator assistant and Coordinator will ensure that the authorised nominee pick-up list for each child is kept up to date
- It is our policy that we do not allow anyone **under the age of 16** to collect children.
- No child will be released into the care of anyone not known to the FDC educator or educator assistant.

Parents must give prior notice where:

- the person collecting the child is someone other than those mentioned on the enrolment form (e.g., in an emergency) or
- there is a variation in the persons picking up the child, including where the child is collected by an authorised nominee who is unknown to educators.
- If the educator does not know the person by appearance, the person must be able to produce some photo identification. If the educator cannot verify the person's identity, they may be unable to release the child into that person's care.
- If the person collecting the child appears to be intoxicated, or under the influence of drugs, and the educator feels that the person is unfit to take responsibility for the child, the educator will:
 - discuss their concerns with the person, if possible, without the child being present
 - suggest they contact another parent or authorised nominee to collect the child
 - follow procedures to protect the safety of children and staff of the education and care service as per Child Protection Law and Child Protection Policy
 - contact the Police and other regulatory authorities (Child Protection Hotline 132 111)
 - the FDC educator will also inform the Approved Provider/Coordinator of the incident

SCHOOL AGED CHILDREN

The FDC educator is responsible for ensuring:

- school aged children are signed 'out' of care upon dropping children at school and signing children 'in' care when they are collected from school
- they have the contact numbers for each child's school
- they know the safest way to school if the child is permitted to walk to school by the parent (written permission is required)
- they have the contact details of the bus operator if the child is using School bus transportation

- they follow steps should the child not arrive at the FDC residence at the expected time- contacting parents, the school, notifying the Approved Provider, police and making a serious incident report if required (notifying the regulatory authority)
- they adhere to the *Safe Transportation Policy* and procedure at all times when transporting children to and from school.

VISITORS

To ensure we can meet Work Health and Safety requirements and ensure the safety of our children, individuals visiting FDC residences, must sign in when they arrive and sign out when they leave in a Visitor Register. The Educator and Coordinator are responsible for ensuring this record is maintained and stored securely. Refer to our *Arrival and Departure Delivery of, and collection from Education and Care Service Premises Policy* and procedure for more detailed information.

KITCHENS

- Children must not gain access to any harmful substance, equipment or amenity
- **The kitchen has a barrier to prevent unsupervised entry by children into the kitchen.**
- The preparation of bottles for children under the age of 2 years is both safe and hygienic at all times and separate from nappy change area (See *Bottle Safety and Preparation Policy*)
- Children should only be permitted in the kitchen under supervision of the FDC educator

HAZARD IDENTIFICATION

A hazard is a source of potential harm or a situation that could cause or lead to harm to people or property. Workplace hazards can be physical, chemical, biological, mechanical or psychological.

CONTROLLING OR MANAGING HAZARDS

Controlling or managing hazards refers to controlling the risk in the workplace. Work health and safety legislation identifies a Hierarchy of Control that ranges from hazard elimination to hazard management.

MONITOR AND REVIEW HAZARDS

Risk management is an ongoing process. Risks must be systematically monitored, and management strategies reviewed to ensure that they continue to be effective and contribute to a safe and healthy work environment. New hazards can emerge over time resulting in control strategies becoming ineffective and therefore may require updating.

Hazard identification, Risk Management and Hazard Reduction is specifically addressed within our *Work Health and Safety Policy*.

WATER SAFETY

To stop accidents and illnesses relating to swimming pools, wading pools, water troughs and other water situations FDC educators will:

- conduct risk assessments to identify potential hazards, assess risks, and implement risk mitigation strategies and control measures to minimise any risk
- ensure risk assessments are developed in collaboration with the Approved Provider/Nominated Supervisor before any water-based activity is approved
- make sure no child swims in any water without:
 - written permission from a family member to learn water safety and swimming
 - appropriate educator/child ratios are in place
 - sufficient numbers of educators present who have first aid or recognised water safety and rescue procedures
- conduct risk assessments prior to any outing identifying possible hazards and risks, including water hazards. Approved Provider must approve the outing before parents are notified. Parent written permission must be obtained before an outing can take place.
- Educator to child ratios must be included in the risk assessment. For children who are 3 years or under- 1 adult for each child; for children who are at least 3 years but not yet 6 years of age: 1 adult for each 2 children; for children who are 6 years of age or over: 1 adult for each 4 children.
- ensure children are closely supervised at all times near water including when on outings near beaches, rivers, canals, waterways, ponds. A child will never be left unattended near any water
- Annual inspections of the FDC residence will occur as part of the annual review process. Any areas of non-compliance or safety issues regarding water safety (swimming pools, spas, dams) may result in a suspension of approved operation of the service.
- Compliance certificates from local government/councils must be provided to the approved provider at time initial approval and subsequent annual reviews
- remove any items or objects that could be used to climb into the fenced area of a pool, trough, or water storage unit e.g., chairs, bins, bikes, any overhanging trees
- ensure that all water containers are made inaccessible to children and make sure children's play areas are safely fenced off from water hazards such as rivers, dams, creeks, lakes, irrigation channels, wells etc.

- immediately empty all wading pools/water troughs etc. after every use, storage should prevent the collection of water e.g. upright/inverted, also check grounds after rain or watering and empty water that has collected in holes or containers.
- ensure wading/water trough are hygienically cleaned, disinfected and chlorinated appropriately:
 - daily remove leaves and debris, hose away surface dirt and scrub inside with disinfectant.
 - wash away disinfectant before filling trough.

BACK CARE AND MANUAL HANDLING

- Manual handling is any activity requiring the use of strength used by the person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person or object.
- Manual handling injuries may be caused by the activities listed above. Injuries can include back strains, similar strains and sprains in parts of the body such as the neck, arm, shoulder and knee.
- Manual handling injuries also include overuse injuries or, because of falling during manual handling, bruising or laceration.

(See our *Work Health and Safety Policy* for further information and recommendations for back care and manual handling).

FURTHER RESOURCES

ACT: WorkSafe ACT provides information for work health and safety

<https://www.worksafe.act.gov.au>

Northern Territory: NTWorkSafe assists businesses and workers understand their obligations under work health and safety. <https://worksafe.nt.gov.au/home>

NSW: SafeWork NSW administers the Work Health and Safety legislation, and has several codes of practice on specific work safety issues which are available online at <https://www.safework.nsw.gov.au/>

Queensland: Workplace Health and Safety Queensland oversees the Queensland Work Health and Safety Act 2011 <https://www.worksafe.qld.gov.au/>

South Australia: SafeWork SA provides work health and safety services across South Australia

<https://www.safework.sa.gov.au/>

Tasmania: WorkSafe Tasmania is the state's health and safety regulator:

<https://worksafe.tas.gov.au/home>

Victoria: WorkSafe Victoria is the state's health and safety regulator see:

<https://www.worksafe.vic.gov.au/early-childhood-education-and-care-safety-basics>

Western Australia: WorkSafe Western Australia regulates and promotes occupational safety and health regulations in the workplace <https://www.commerce.wa.gov.au/worksafe>

For further information see: <https://www.safeworkaustralia.gov.au/>

Source

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[Western Australian Education and Care Services National Regulations](#)
Work Health and Safety Act 2011

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JULY 2022	NEXT REVIEW DATE	JULY 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
JULY 2021	<ul style="list-style-type: none"> minor edits to policy as highlighted minor formatting changes references and sources checked for currency 		JULY 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> edits to ensure policy relates to FDC requirements additions and edits to checklists for outdoor/indoor environments specific information for operational requirements for FDC educators to provide a hygienic environment for children added section on school aged children- arrival and departure Risk assessments related to water safety 		July 2021

JULY 2020	<ul style="list-style-type: none"> • COVID-19 information added to cleaning/ handwashing sections • Removal of Hazard Identification, Risk Management, Hazard Reduction and Hazardous Materials sections, Maintenance of Fire Equipment and Back care and Manual Handling (moved to Work Health and Safety Policy) • additional related policies 	JULY 2021
MARCH 2020	<ul style="list-style-type: none"> • Regulations checked and additions • Amendments to Sun Safety policy inclusion • Rearranged information about 'soiled items' to relate to nappy and toileting area • Additional information added re: fire extinguisher testing • Specific state/territory contacts added 	JULY 2020
JULY 2019	<ul style="list-style-type: none"> • New section added – 'Visitors'. • New section added – 'Recommendations' (in manual handling). • Heading added – 'Further resources' • Grammar and punctuation and edited. • Additional information added to points. • Removed points where irrelevant to the section. • Sources checked for currency. • Sources corrected & alphabetised. 	JULY 2020
JULY 2018	<ul style="list-style-type: none"> • New policy draft 	JULY 2019

2.59 SAFE STORAGE OF HAZARDOUS CHEMICALS POLICY

By maximising awareness of the potential hazards of chemicals and equipment, we aim to minimise the risk of harm to educators, children, and families by ensuring hazardous products are safely stored, handled, and controlled. It is the condition of registration that Educator will make a separate space to store their hazardous products and must not expose to children in any condition. They must not left open in bathroom, Laundry or in Toilet or any place where children can easily approach to those products and can have any accident. Service supervisor will send written warning in first two incidents and after that Educator will face fine and even after Educator will be terminated due to regular negligence and putting children's health and safety in danger and will be informed to Department of Education for further actions.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
Section 167	Offence relating to protection of children from harm and hazards
82	Tobacco, drug and alcohol-free environment
85	Incident, injury, trauma and illness policies and procedures
97	Emergency and evacuation procedure
106	Laundry and hygiene facilities
116	Assessments of family day care residences and approved family day care venues
168	Education and care service must have policies and procedures
169	Additional policies and procedures – family day care service
170	Policies and procedures to be followed

RELATED POLICIES

Administration of First Aid Policy Administration of Medication Policy Assessment and Re-assessment of Approved FDC Residences and Venue Policy Environmentally responsible policy	Health and Safety Policy Incident, Injury, Trauma and Illness Policy Work, Health, and Safety Policy
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PURPOSE

Our Family Day Care Service aims to protect children, families and visitors from hazard and harm at all times. We promote the use of environmentally friendly products where possible and ensure we provide a safe environment where chemicals and hazardous products and equipment are safely stored and managed away from children and are handled appropriately.

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, **students, volunteers, visitors (including contractors)**, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

THE APPROVED PROVIDER/COORDINATOR WILL ENSURE:

- that every practical measure is taken to protect children from harm and any hazard likely to cause injury whilst being educated and cared for by Family Day Care educators in an approved residence and/or venue (National Law - section 167)
- all dangerous goods and hazardous substances are identified within the FDC residence or venue, and included in the chemical register
- a smoke free environment is provided to children, families and visitors at all times
- Poison Hotline number is clearly displayed in each FDC residence/venue
- a risk assessment has been conducted in consultation with the Coordinator/Approved provider, prior to using any potentially dangerous or hazardous substance at the FDC residence/venue including pesticides and herbicides
- annual assessments, including risk assessments are conducted at least annually of each FDC residence or venue to ensure the health, safety and wellbeing of children
- educators adhere to the Family Day Care Service procedures for dealing with and handling chemicals
- the use of sustainable practices and eco-friendly products is promoted in all FDC approved residences/venues
- Safety Data Sheets (SDS) and the Chemical Register is readily available at the FDC residence or venue and regularly updated
- as per Work Health and Safety (WH&S) requirements, this information must be kept up to date at all times, with a review of the folder annually. No SDS is to be more than 5 years old.
- appropriate training and Personal Protective Equipment (PPE) is used by employees, educators/educator assistants who may be exposed to dangerous goods and/or hazardous substances
- relevant signage is displayed highlighting the hazardous nature of chemicals used or stored in the FDC residence or venue- (e.g., Caution- Chemical Storage Area; Danger; Hazardous Chemicals)
- laundry facilities are located and maintained in a way that prevents unsupervised access by children
- all products/chemicals used for laundry purposes are locked in a cupboard inaccessible to children
- there are emergency procedures and practices for accidental spills and/or contamination and corresponding first aid plans for all dangerous goods handled and stored in the FDC residence or venue
- action is taken to remove any pests or vermin by a licensed exterminator, who will provide a certificate of currency for record keeping by the FDC educator. Initially, using non-chemical methods such as physical removal of pests, maintaining a clean environment, and use of any non-toxic products will be implemented

- that every FDC educator and educator assistant have current ACECQA approved first aid qualifications
- all visitors/students are made aware of correct storage and usage procedures for potentially hazardous materials during their initial orientation at the FDC service/residence
- there are appropriate and lockable storage facilities in each FDC residence/venue in which dangerous products are stored
- lockable storage facilities are clearly marked with signage to indicate chemicals/hazardous materials
- dangerous products will be stored in areas that are not accessible to children or in cupboards fitted with key or childproof locks
- a hazardous substances register is used and regularly updated by all FDC Educators
- a risk assessment for any dangerous materials stored in bulk has been carried out and is regularly updated by the FDC educator
- any chemical used by a FDC educator in spray bottles must ensure these are clearly labelled with contents and are not used with children in the immediate vicinity
- in the event of any incident involving accidental exposure to chemicals or other hazards, an *Incident, Injury, Trauma and Illness Record* will be completed by the FDC educator and provided to the Approved Provider
- if a serious incident occurs involving the need for medical intervention or emergency services, notification will be made to the Regulator Authority within 24 hours

THE EDUCATOR/EDUCATOR ASSISTANT WILL:

- seek medical advice if needed by contacting the **Poisons Information Line (13 11 26)** or by calling 000
- wear Personal Protective Equipment (PPE) when handling dangerous substances or materials
- not use spray bottles containing chemicals in the immediate vicinity of any child or children
- read the label before using any cleaning material, sprays or chemicals and strictly adhere to the *'Directions for use'* and be aware of appropriate first aid measures
- store all dangerous products in well-labelled and original containers that preferably have child resistant lids and caps in a secure and locked place/cupboard, inaccessible to children
- ensure all chemicals and cleaning products are returned to their designated location immediately upon completion of cleaning tasks
- **ensure** laundry facilities have lockable cupboards for cleaning products/detergents
- not mix cleaning products as there is the potential for harmful chemical reactions to occur endangering all persons on the premises
- dispose of all products safely, in accordance with the manufacturer's instructions on the product label, Work Health and Safety regulations, and Council by-laws
- be encouraged to attend professional development sessions to maximise their awareness of dangerous products and potential hazards

- source chemical free methods to reduce possible hazards at residence or venue
- ensure cleaning and hazardous products are not stored close to food products
- consider minimising the use of dangerous products at the FDC residence/venue and use alternate 'green cleaning' options
- complete daily and quarterly WHS checklists to ensure that any dangerous products used at the FDC residence/venue have current Safety Data Sheets (SDS) and are stored appropriately
- only administer children's medications with family authorisation and in accordance with medical directions (see *Administration of Medication Policy*)
- ensure medication is stored in an area inaccessible to children
- ensure any medications or dangerous substances that require refrigeration, be placed in a labelled childproof container, preferably in a separate compartment of the fridge
- keep all button batteries and all other batteries out of reach of children
- check that all remotes, toys and products containing button batteries have a screw to secure them
- dispose of or recycle used button batteries immediately at a battery disposal centre near to the FDC residence
- in the event of any incident involving accidental exposure to chemicals or other hazards, an *Incident, Injury, Trauma and Illness Record* will be completed by the FDC educator and provided to the Approved Provider

POISONING

Many products and materials that are used and kept in the FDC residence are potentially poisonous to children. Poisonings can happen quickly. Toddlers are most at risk due to their tendency to put objects in their mouths.

Poisonous substances may include medication, household cleaners, garden products, paint, alcohol, cosmetics, toiletries, chemicals, pool equipment, batteries, petroleum products, e-cigarette cartridges.

Poisonous plants and trees can also cause safety risk to children and should be identified in any risk assessment conducted at the FDC residence or venue and risk mitigation strategies implemented.

FDC educators will display a notice detailing the Poison information hotline in a visible position within the residence or venue.

POISON INFORMATION HOTLINE 13 11 26

CONTINUOUS IMPROVEMENT/REFLECTION

Our Safe Storage of Hazardous Chemicals Policy will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

- ACECQA- (2018). Assessments of family day care residences and venues. <https://www.acecqa.gov.au/media/25931>
- Australian Children’s Education and Care Quality Authority (ACECQA). (2019). Approved First Aid Qualifications: <https://www.acecqa.gov.au/qualifications/nqf-approved>
- Australian Children’s Education & Care Quality Authority, 2014.
- Early Childhood Australia Code of Ethics. (2016).
- Education and Care Services National Law Act 2010. (Amended 2018).
- [Education and Care Services National Regulations](#). (2011).
- Frith, J., Kambouris, N., & O’Grady, O. (2003). Health & safety in children’s centres: Model policies & practices (2nd Ed.)
- Guide to the National Quality Framework. (2017). (Amended 2020).
- Guide to the National Quality Standards. (2017).
- Kidsafe Family Day Care Guidelines. 7th edition. (2020).
- NSW Government: Workcover. (n.d.) (current). Storage and handling of dangerous goods: Code of practice 2005. https://www.safework.nsw.gov.au/_data/assets/pdf_file/0005/50729/storage-handling-dangerous-goods-1354.pdf
- Occupational Health and Safety Act, 2000*. Occupational Health and Safety Regulations, 2001.
- The NSW Work Health and Safety Act, 2011*
- Revised National Quality Standards. (2018).
- [Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2022	NEXT REVIEW DATE	OCTOBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy hyperlinks checked and repaired as required minor formatting edits within text link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> Minor edits to policy additional regulations added sources checked for currency 		OCTOBER 2022
OCTOBER 2020	<ul style="list-style-type: none"> minor edits to reflect FDC residence/venues records to be kept and notification to regulatory authority 		OCTOBER 2021

	<ul style="list-style-type: none"> information related to the danger of button batteries added references checked Poison section added 	
OCTOBER 2019	<ul style="list-style-type: none"> Related policies added. Minor punctuation and wording edits. URLs checked – obsolete URLs replaced. Sources edited. 	OCTOBER 2020
OCTOBER 2018	<ul style="list-style-type: none"> References corrected, added &/or updated. Incorrect links deleted and replaced with correct ones. Sources/references alphabetised. Additional information added to points. Rearranged the order of points for better flow 'MSDS' replaced with 'SDS' 	OCTOBER 2019
SEPTEMBER 2018	<ul style="list-style-type: none"> New policy drafted 	OCTOBER 2019

2.60 CHILD SAFE ENVIRONMENT POLICY (EXCLUDING S.A & VIC)

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

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

NATIONAL QUALITY STANDARD (NQS)

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

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.
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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.
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EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW

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	Facilities designed to facilitate supervision
116	Assessments of family day care residence and approved family day care venues
117	Glass
123A	Family day care co-ordinator to educator ratios- family day care service
124	Number of children who can be educated and cared for by family day care educator
136	First aid qualifications
155	Interactions with children
162	Health information to be kept in enrolment record
165	Record of visitors
168 (h)	Providing a child safe environment
169 (2)g	Additional policies and procedures- family day care services
170	Policies and procedures to be followed

274	Swimming pools
S162 (A)	Persons in day-to-day charge and nominated supervisors to have child protection training
S165	Offence to inadequately supervise children
S167	Offence relating to protection of children from harm and hazards

RELATED POLICIES

Assessment, Approval and Re-assessment of Approved Family Day Care Residence/Venue Policy Arrival and Departure Policy Child Protection Policy Code of Conduct Policy Cyber Safety Policy Delivery of Children to, and Collection from Education and Care Service Premise Policy Emergency Evacuation Policy Excursion Policy Furniture and Equipment Safety policy Governance Policy Injury, Incident, Trauma and Illness Policy Interactions with Children, Families and Staff Policy	Medical Conditions Policy Nutrition and Food Safety Policy Photograph Policy Physical Environment Policy Privacy and Confidentiality Policy Probation Induction and Orientation Policy Safe Storage of Hazardous Chemicals Policy Safe Transportation of Children Policy Sleep and Rest Policy Staffing Arrangements Policy Student and Volunteer Policy Sun Safe Policy Supervision Policy Tobacco Drug Alcohol Free Policy Water Safety Policy Work Health and Safety Policy
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PURPOSE

Our Family Day Care Service has a legal and ethical responsibility to ensure our educators 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 and young children from harm, ensuring healthy and safe environments. Our robust risk assessments ensure approved Family Day Care residences/and or venues provide children and visitors with an environment that helps to make children feel safe and provides a sense of belonging. We ensure all our FDC educator's residences are free from the use of tobacco, alcohol and illicit drugs.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations the approved provider must ensure that policies and procedures are in place for providing a child safe environment and take reasonable steps to ensure those policies and procedures are followed. (Regulation 168, Regulation 170). The National Law requires management to ensure all children being educated and cared for are adequately supervised and every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

KEY TERMS – DEFINITIONS

Child Safe Standards	A list of ten standards that organisations can use to keep children safe from harm and abuse as recommended by the Royal Commission into Institutional Responses to Child Sexual Abuse
Code of Conduct	Lists of dos and don'ts which describe acceptable and non-acceptable behaviour
Disclosure	The process where a child or young person conveys or attempts to convey that they are being or have been abused.
Information sharing	Refers to sharing or exchanging information, including personal information about or related to, abuse in organisational contexts. The terms refer to sharing information between (or within) organisations, as well as sharing information with professionals who provide key services for children.
Mandatory reporter	A person who is required to report known and suspected cases of child abuse and neglect to a nominated government department or agency.
Mandatory reporting	The legislative requirement for selected classes of people to report suspected cases of child abuse and neglect.
Reportable conduct	Certain organisations or entities have legal obligations under Reportable Conduct Schemes to notify and investigate certain allegations of abuse involving a child, when the allegation is against someone they employ, engage or contract in circumstances outlined in the legislation.
Rights of the Child	Human rights belonging to all children, as specified in the United Nations Convention of the Rights of the Child.
Wellbeing	Sound wellbeing results from the satisfaction of basic needs.
Working with Children / working with vulnerable people check (WWCC/WWVP)	A notice, certificate or other document granted to, or with respect to a person under a working with children law. The person has been assessed as suitable to work with children; there has been no information that if the person worked with children the person would pose a risk to the children; or the person is not

prohibited from attempting to obtain, undertake or remain in child-related employment.

Definitions sourced from

ACECQA. (2021). Policy and procedure guidelines. *Providing a Child Safe Environment*.

NSW Department of Education (2021). [Guide to the Child Safe Standards for early childhood education and care and outside schools hours care services](#)

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

NATIONAL PRINCIPLES FOR CHILD SAFE ORGANISATIONS

[or state/territory Child Safe Standards legislation]

Our Family Day Care Service is committed to being a child safe organisation and endorse the National Principles of Child Safe Organisations, placing the protection of children as a priority of our responsibilities and obligations. This focus is reflected in our Service policies and procedures and understood and practiced by all educators in their own homes/or venues.

Our Family Day Care Service takes a 'zero' tolerance approach to child abuse and are committed to raise awareness about the importance of child safety in our environment and the community. Our FDC educators are trained to identify signs and behaviours that may indicate child abuse and thoroughly understand their obligations and responsibilities to respond to incidents, disclosures or suspicions of harm as mandated reporters.

We are dedicated in promoting cultural safety for Aboriginal children, cultural safety for children from culturally and/or linguistically diverse backgrounds and to providing a safe environment for children with a disability. Our FDC Service will not tolerate bullying or harassment. Our priority is to ensure the safety and wellbeing of children and encourage positive relationships.

COMMUNICATION (National Principles 2 and 3)

We aim to build and maintain positive and respectful relationships with children, families and educators of our Service and prioritise a child safe environment. We communicate regularly and clearly with all stakeholders and ensure our policies and procedures are available to employees, volunteers, families and children and young people. (Reg. 170). Feedback and evaluation of our policies and procedures is welcomed through surveys, feedback or discussions with management.

CODE OF CONDUCT (National Principles 4 and 6)

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

- adhere to our *Child Safe Environment Policy, Child Protection Policy* at all times
- provide adequate supervision of children at all times
- take reasonable action to protect children and young people for risk of harm
- ensure the service premise is free from the use of tobacco, illicit drugs and alcohol
- be responsible for their own, and others health and safety
- be a positive role model to children and young people
- respect children's privacy and dignity at all times
- listen and respond appropriately to the views and concerns of children and young people
- report any allegations of child abuse to the Approved Provider and/or CARL as mandatory reporter
- notify the approved provider and/or the regulatory authority within 24 hours of any serious incident or complaint as per the National Regulations
- encourage children and young people to 'have a say' on issues that are important to them.

FDC educators, educator assistants, coordinators, staff 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.

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

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

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

- policy and procedure review
- child protection
- allegations/grievance procedures
- sun safety
- written authorisations- parenting orders
- code of conduct
- inclusivity and supporting children with diverse needs.

We promote a respectful, child safe culture where children concerns are always responded to, and children feel empowered to participate in decisions and provide feedback to educators and staff.

[Primary policies – Interactions with Children Families and Staff]

RECRUITMENT PROCESS AND WORKING WITH CHILDREN CHECK (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 Family Day Care Service and community. All staff and engaged educators, undergo an extensive recruitment screening and assessment process including consideration of their suitability for working and caring for children, clearance for a Working with Children Check and checking their criminal history before engagement with the Service. All educators, educator assistants and any family members over the age of 18 living in the residence are required to hold a current Working with Children Check (WWCC). [Enter your state/territory requirement.]

All educators, educator assistants and family members are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked. The Approved Provider is responsible for the periodic review and maintenance of up-to-date records of Working with Children Check, including the Working with Children Check number and the date on which each clearance expires. WWCC information will be placed in the individual's file and continue to be updated as required.

The Approved Provider is responsible for ensuring all students and volunteers working with a FDC educator, hold a current Working With Children Check (WWCC).

[Primary policies – Probation Induction and Orientation; Staffing Arrangements, Visitors to Family Day Care Residences]

CHILD PROTECTION- REPORTABLE CONDUCT SCHEME (National Principle 6)

Children and young people always have a right to be safe and protected. All FDC educators and management have a legal and moral duty to protect children from harm. It is essential when working with children to be aware of indicators of harm and be able to recognise and report concerns regarding suspected harm or protection concerns. Coordinators, educators and educator's assistants, understand their roles and responsibilities in protecting children from abuse and neglect and maintain up-to-date knowledge of child protection law (Reg 84).

FDC educators:

- will take all reasonable steps to protect children from abuse
- ensure children are never left alone with visitors, volunteers or students
- must be contactable by telephone whilst children are in attendance at the FDC service

- must be available to children at all times they are educated and cared for at the FDC service
- are aware they must not consume alcohol or be affected by alcohol or drugs (including prescription medication) that may impair their capacity to provide education and care

Coordinators or responsible persons in day-to-day charge must complete a course in child protection approved by the Regulatory Authority on an annual basis. All educators must refresh their knowledge about mandatory reporting each year. The Approved Provider will ensure all educators and educator assistants are familiar with the Reportable Conduct Scheme and the types of reportable conduct.

[insert any additional Child Protection requirements your Service implements]

Child protection- Allegations Against Employees

To protect children and ensure their safety, welfare and wellbeing, the Approved Provider must report allegations or convictions of child abuse and child related misconduct by any educator, staff member or visitor or volunteer to the Child Protection Hotline **(or reporting authority within your state/territory)** as part of the Reportable Conduct Scheme.

Any allegation will be treated seriously and acted upon by management.

[Primary policy – Child Protection Policy]

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. Our FDC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker
- The right to have the decision based on relevant evidence.

[Primary policy – Dealing with Complaints]

SAFETY CHECKLISTS- ANNUAL ASSESSMENTS

Regular safety checks maintain basic standards of safety within FDC residences or venues. FDC educators will complete the following 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:

[Insert safety checks conducted within by Family Day Care educators. For example: indoor safety checklist, outdoor safety checklist, fence/gate checks etc]

Any findings that require attention will be either dealt with immediately or submitted into the maintenance book depending on priority. Coordinators must be notified of any areas that need immediate attention within the residence or venue.

Annual Risk Assessment

The Approved Provider/Coordinator will conduct an annual risk assessment of each family day care residence and approved venue to ensure that the health, safety and wellbeing of children are protected. The assessment will ensure the FDC residence and approved venue adheres to all regulatory requirements and all equipment, furniture uphold the Australian Safety Standards.

The premises and all equipment and furniture used within the FDC educator's residence is audited to ensure all aspects are safe, clean and in good repair. FDC 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 FDC residence to ensure that all toys, furniture and equipment are in good condition and working order. These checks include:

[Include all equipment and maintenance records used within your Service. Maintenance Record, toys register, toy cleaning register etc]

Records of all assessments will be kept at the FDC principal office and the FDC educator's residence.

[Primary policies – Health and Safety Policy, Equipment Safety Policy and Assessment, Approval and Re-assessment of Approved FDC Residence and/or Venue Policy]

SUPERVISION (National Principles 5 & 7)

Children's safety is embedded in our day-to-day practices. FDC educators will provide effective and adequate supervision of children at all times. FDC Educators will employ 'active supervision' strategies within the FDC environment and when 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 and will always be within sight and hearing distance of the FDC educator so a child's breathing, and the colour of their skin can be monitored.

To ensure compliance with regulations, educator to child ratio is 1:7. FDC educators are only permitted to provide education and care to a maximum of 4 children preschool age or under.

RISK ASSESSMENT & RISK ASSESSMENT TOOL (National Principle 8)

It is a legislative requirement that all services implement a risk management system where they identify and manage hazards and risks within the workplace to ensure a child safe environment. Strategies are in place to make sure child safety (through the National Principles for Child Safe Organisations) and Education and Care National Regulations are embedded across our Service. The key principles of risk management include:

1. Identifying all hazards or potential hazards in the service/residence/venue
2. Assess the risk of harm or potential harm for each hazard
3. Control or manage the risk – Risk Rating Matrix
4. Monitor and improve safety – Risk Assessment Action Plan
5. Evaluate and Review

It is the responsibility of the Approved Provider and/or Coordinators to ensure risk assessments are completed where children's safety may be jeopardised and whenever the FDC educator may be organising an excursion/incursion.

Children's safety must be incorporated into everyday practice within the FDC residence and/or venue.

Common hazards which may require a risk assessment include:

- cross-Infection and infectious disease
- administration of medication
- anaphylaxis procedures and management
- building and equipment (including storage)
- inadequate space for conducting activities and experiences
- hazardous chemicals
- electrical appliances
- food preparation and storage
- environmental influences such as shade, noise etc
- sun safety
- children's behaviours
- safe rest and sleep practices
- nappy change facilities
- water safety- swimming pools, spas, water
- fire equipment
- pets and/or animals
- supervision of children
- safe transportation of children
- children's activities and experiences

- Work Health and Safety such as manual handling (e.g., safe lifting children from cots and highchairs)
- non-compliance risk
- hot drinks

To maintain a child safe environment, FDC educators will adhere to Service policies and procedures and conduct the following checklist and audits:

[Insert checklists and audits used, this may include risk assessment, maintenance record, excursion risk assessment etc]

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

EMERGENCY AND EVACUATION PROCEDURES

FDC educators will ensure a copy of the emergency and evacuation floor plan is displayed in a prominent position near each exit at the premises. Copies of emergency phone contacts will be readily available.

Educators will rehearse emergency and evacuation procedures at least once every 3 months and ensure all children are involved. **Records will be kept for all rehearsals.**

[Primary policy- Emergency Evacuation]

STORAGE OF HAZARDOUS SUBSTANCES

We reduce the risk of harm to children and educators by using eco-friendly products. FDC educators will endeavour to provide a safe environment ensure necessary chemical and hazardous equipment are safely stored away from children and handled appropriately. FDC educators will keep a register of hazardous chemicals used within their residence, including Safety Data Sheets.

To maintain a safe environment for children, the following audits and checklists are conducted:

[Insert safety checks and audits used within your Service. Safe Storage of Hazardous Chemicals audit, Poison audit, Medication storage audit, etc]

[Primary policy – Safe Storage of Hazardous Chemicals; Administration of Medication]

ARRIVAL AND DEPARTURE AUTHORISATION

National Regulations require FDC educators to keep an accurate record of children's and visitor's arrival and departures with the signatures of the person responsible for verifying the accuracy of the record and the identity of the person collecting the child.

FDC educators will work in collaboration with our **Arrival and Departure Delivery of children to and Collection from Education and Care Premises Policy** and *Student and Visitors Policy* to ensure children are safe and secure at all times.

To ensure children's safety, FDC educators have a clear understanding of their legal obligation to check identification when a person is collecting a child from their residence/venue. To maintain compliance, parents will provide written authorisation if a person who is not named as an emergency contact on the enrolment form to collect a child from the FDC service.

FDC educators will ensure court orders are strictly adhered to and protect children from any potential harm.

[Primary policy - **Arrival and Departure Delivery of children to and Collection from Education and Care Premises**]

ONLINE SAFETY (**National Principle 8**)

Our FDC Service is committed to create and maintain a safe online environment with support and collaboration with FDC educators, families, and community. 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.

Families are provided with information about the software program which is password protected and used to share observations, photos, videos, daily reports and portfolios. Passwords are not to be shared with others as per our written agreement. [Amend as required for your FDC service]

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

FDC educators will not use their personal mobile phones to take photos or video of children at the FDC service.

Only educational software programs and apps that have appropriate content and have been examined prior to allowing their use are used. Children are always supervised using any technology.

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

CONTINUOUS REVIEW (**National Principle 9**)

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

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

Any updates or revisions will be communicated to all stakeholders. **Our Child Safe Environment Policy will be reviewed on an annual basis.**

CHILDCARE CENTRE DESKTOP - RELATED RESOURCES

Child Safe Environment Commitment Statement	Child Safe Standards Checklist NSW
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SOURCE

- Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines. *Providing a Child Safe Environment*.
 Australian Government. Department of Education **Skills and Employment**. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).
 Australian Government Department of Education **Skills and Employment**. (2011). *My Time, Our Place: Framework for School Age Care in Australia*.
 Australian Human Rights Commission (2020). *Child Safe Organisations*. <https://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 2018).
 Education and Care Services National Regulations. (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2018). (Amended 2020).
 NSW Department of Education (2021). [Guide to the Child Safe Standards for early childhood education and care and outside schools hours care services](#)
 NSW Government Office of the Children’s Guardian *A guide to the Child Safe Standards*. (2020).
 Revised National Quality Standard. (2018).
[United Nations Convention of Rights of the Child, \(1989\)](#). (UNCRC)
[Western Australian Education and Care Services National Regulations](#)
 Work Health and Safety Act, (2011).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Policy updated to include Child Safe Standard Principles • Policy sections rearranged to align with Child Safe Policy template suggestions from NSW (OCG) • Additional related policies added • Key Terms/Definitions added • Links to SA legislation/requirements removed • link Western Australian Education and Care Services National Regulations added in ‘Sources’ 		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
NOVEMBER 2021	<ul style="list-style-type: none"> Additional law/regulations added- ACECQA Guidelines to Policy and Procedure document (June 2021) additional information re: supervision, online safety and continuous review sources checked for currency 	NOVEMBER 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> rewrite of policy to meet regulatory requirements new sections added: National Principles Child Safe Organisations, annual assessments, risk assessments, excursions, Code of Conduct 	NOVEMBER 2021
NOVEMBER 2019	New policy created for Family Day Care services	

Disclaimer

Childcare Centre Desktop does not guarantee that the examples provided within this policy are sufficient for early childhood services' compliance with the Child Safe Standards within each state/territory. Please check your own state/territory for implementation of Child Safe Standards.

2.61 CYSTIC FIBROSIS MANAGEMENT POLICY

Cystic fibrosis is a genetic disorder that predominantly affects the lungs and digestive system (Cystic Fibrosis Australia, 2017). Our Family Day Care (FDC) Service will make every effort to fully include children/babies with cystic fibrosis in our program and provide a safe and healthy environment for them.

NATIONAL QUALITY STANDARD (NQS)

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

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
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
95	Procedure for administration of medication
136	First aid qualifications
162	Health information must be kept in enrolment record
168	Education and care service must have policies and procedures

RELATED POLICIES

Administration of First Aid Policy Control of Infectious Disease Policy Hand Washing Policy Incident, Injury, Trauma and Illness Policy	Medical Conditions Policy Nutrition and Food Safety Policy Supervision Policy
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PURPOSE

We aim to create and maintain a safe and healthy environment for all children enrolled at the Family Day Care Service. This policy aims to provide a basic understanding and awareness of the possible needs of children with cystic fibrosis. It does not constitute a replacement for medical advice or instructions provided by an individual child's family or health care professionals.

SCOPE

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

DUTY OF CARE

Our Family Day Care Service has a legal responsibility to provide;

- o. a safe environment, and
- p. adequate Supervision for all children at all times.

FDC educators, including relief educator assistants, must have adequate knowledge of cystic fibrosis and the individual needs of a child/children in attendance with cystic fibrosis.

BACKGROUND

Cystic fibrosis is a genetic disorder present at birth that affects cells in the body that make mucus, sweat, and digestive fluids, causing the lungs and digestive system to get clogged with mucus. This frequently results in recurrent infections. Different people exhibit symptoms to different degrees and while there is no known cure, treatment can help manage the condition (Cystic Fibrosis Australia, 2020). A child with cystic fibrosis is likely to have many health professionals working with him/her which may include:

- Clinical nurse
- Gastroenterologist
- Dietitian
- Physiotherapist
- Respiratory physician
- Social worker

Symptoms of cystic fibrosis include:

- A phlegmy persistent cough
- Wheezing
- Constantly runny nose
- Sinusitis
- Repeated lung infections
- Foul-smelling, greasy and/or bulky stools
- Diarrhoea and/or constipation
- Poor growth and low body weight (despite a healthy appetite)
- Inability to engage in physical play or exercise.

TREATMENT

The treatment for cystic fibrosis is ongoing and lifelong and varies from child to child. However, it generally involves:

- daily physiotherapy to clear the lungs
- exercise to assist in clearing the airways and build core strength
- the use of a nebuliser to assist in opening the airways
- a nutritious diet high in calories, salt and fat: In some cases, extra calories/salt/fats are required, but not always – the dietitian and families will provide individual information of dietary requirements.
- medications including (as required):
 - Enzyme replacement microspheres or capsules taken with food to aid digestion: Children/babies with cystic fibrosis vary in their ability to digest food naturally – some may need these while others will not.
 - Antibiotics as required to treat lung infections
 - Anti-inflammatory medication to prevent airway passage inflammation
 - Mucus thinners to assist the child in coughing up mucus and decreasing the risk of lung infection
 - Bronchodilators to open up and relax the muscles around the bronchia (lungs).

DEHYDRATION

If a child/baby is lacking in salt they can quickly become dehydrated. Signs of dehydration include:

- fewer wet nappies than normal
- dark sunken eyes
- dry lips or skin
- crying without tears
- dark yellow urine
- rapid breathing
- drowsy and/or lethargic
- salt crystals on the skin

EARLY WARNING SIGNS OF A LUNG INFECTION

As children with cystic fibrosis are likely to frequently develop lung infections it is important to be aware of the early warning signs, which include:

- coughing more than normal, or a 'different' sounding cough
- coughing up more mucus than normal or a change in the colour of coughed-up mucus

- wheezing sounds while breathing, or unable to breathe while feeding
- reduced appetite
- decreased energy
- fevers

INFECTION CONTROL

Minimising the risk of infection for children with cystic fibrosis is imperative for their ongoing health.

Precautions to take include:

- frequent and thorough hand washing
- encouraging the child to wash hands after coughing, and at all other usual times (after toileting, before eating etc.)
- keeping a child/baby with cystic fibrosis away from other children with a cold or are otherwise ill
- ensuring children's immunisations are up to date
- cleaning and drying all medical equipment thoroughly
- not allowing the child with cystic fibrosis to share cups or eating utensils
- not leaving containers of water lying around where germs that cause lung infections can breed
- keeping the classrooms dry and well-aired.

IMPLEMENTATION

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

Management and Nominated Supervisor will ensure:

- upon employment and engagement at the FDC Service all staff and FDC educators will read and be aware of all medical condition policies and procedures, including the *Cystic Fibrosis Management Policy*
- any child enrolled at the FDC Service with cystic fibrosis will require a Medical Management Plan completed by the child's medical practitioner/ specialists before commencing at the FDC Service
- all staff and FDC educators are aware of the Medical Management Plan and have procedures in place for ensuring the child's safety, health and wellbeing
- a risk minimisation plan has been developed in consultation with the parents of the child
- a communication plan is developed in consultation with the parents of the child
- the FDC educator primarily responsible for caring for the child participate in specific training about cystic fibrosis and are aware of strategies to support children and manage their CF

- FDC educators preparing food are trained in food preparation and food requirements for the child with cystic fibrosis
- families of all children with cystic fibrosis provide all necessary medications/treatments showing the expiry date and clearly labelled with the child's name
- the immunisations of all children attending the FDC Service are kept up to date
- areas occupied by children are kept dry and well ventilated
- that all FDC educators and staff adhere to high levels of hygiene at all times
- that all FDC educators maintain written records of medications/treatments administered to a child with cystic fibrosis
- communication between management, educators, staff and parents/guardians regarding the FDC Service's *Cystic Fibrosis Policy* and strategies are reviewed and discussed regularly to ensure compliance and best practice reflecting latest research
- all FDC educators are able to identify the early warning signs of lung infection for children with cystic fibrosis attending the FDC Service
- children with cystic fibrosis are not discriminated against in any way
- children with cystic fibrosis can participate in all activities safely and to their full potential
- to communicate any concerns with parents/guardians regarding the management of children with cystic fibrosis at the FDC Service.

FDC Educators will ensure:

- they are aware of the FDC Service's *Cystic Fibrosis Management Policy* and Medical Management Plan for each individual child with cystic fibrosis
- they complete education and training to learn about how cystic fibrosis affects children and the best ways to support them whilst at the FDC Service
- they are able to identify the early warning signs of a lung infection
- they are able to identify the signs of dehydration
- children/babies with a cold or other illness are isolated from children/babies with cystic fibrosis while waiting to be collected from the FDC Service by their parent/guardian
- that children's personal enzymes treatments are taken on excursions or other offsite events, including emergency evacuations and drills
- to adhere strictly to the child's cystic fibrosis Medical Management Plan and the *Administration of Medication Policy*
- to adhere to the highest levels of hygiene when dealing with a child/baby with cystic fibrosis. For example, high levels of hand hygiene, close supervision during meal and snack times to prevent sharing of cups etc.

- extra hygiene precautions are taken when there is an outbreak of an illness, including the common cold, such as additional cleaning of surfaces, door handles, tables, toys, and equipment and wearing of face masks
- to consult with the parents/guardians of children with cystic fibrosis in relation to the health and safety of their child, and the supervised management of the child's condition
- communicate any concerns to parents/guardians if a child's cystic fibrosis is limiting his/her ability to participate fully in all activities.
- that children with cystic fibrosis are not discriminated against in any way
- that children with cystic fibrosis can participate in all activities safely and to their full potential, ensuring an inclusive program, whilst ensuring a high level of supervision to ensure children with cystic fibrosis do not over-exert themselves
- families are advised of any early warning signs of a lung infection as soon as practicable.

Families will:

- ensure all details on their child's enrolment form are completed prior to commencement at the FDC Service
- read the FDC Service's *Cystic Fibrosis Management Policy*
- inform FDC educators and staff, either on enrolment or on initial diagnosis, that their child has cystic fibrosis
- provide a copy of their child's Medical Management Plan to the FDC Service, ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- consult with management to develop a risk minimisation plan and communication plan to assist in managing their child's medical condition
- provide an adequate supply of cystic fibrosis medications/treatments (as required)
- notify staff and FDC educators in writing of any changes to their child's Medical Management Plan (medications, actions)
- communicate regularly with FDC educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's cystic fibrosis
- encourage their child to learn about their cystic fibrosis, and to communicate with FDC Service staff if they are experiencing discomfort or difficulty in breathing

FURTHER RESOURCES

Cystic Fibrosis Australia. (2014). A guide to cystic fibrosis for early childhood educators:

https://www.cfw.org.au/wp-content/uploads/2019/10/CFWA098-A-Guide-to-CF-Early-Childhood-Booklet-Update-2019_WEB.pdf

CFSmart- cystic fibrosis education program. e-learning modules <https://cfsmart.org/elearning/>
 Cystic fibrosis: Infection control in schools: <https://cfsmart.org/app/uploads/2021/06/Cross-infection-in-schools-.pdf>

Starting school with CF: <https://www.cysticfibrosis.org.au/CysticFibrosis/media/Shared-content/Brochures/CF-Fact-Starting-School-with-CF.pdf>

Cystic fibrosis: Current Treatments <https://www.cysticfibrosis.org.au/about-cf/current-treatments>

SOURCE

CF Smart: Cystic fibrosis education program: <https://cfsmart.org/>

Children’s Hospital Foundation for Sick Kids: <https://www.childrens.org.au>

Cystic Fibrosis Australia. (2014). A guide to cystic fibrosis for early childhood educators

Cystic Fibrosis Australia. (2017). Infection control in schools

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

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	DECEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> New Policy developed for FDC Services 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	

2.62 OUT OF HOURS BABYSITTING POLICY

The approved provider and management will not responsible for any action or activities in that parents will offer and FDC Educator is accepting due to FDC setup is not a Service’s own business place where 24 hours supervision is provided by us. All Educators and families been informed about the Educator’s working hours for Service and if any Parents offer money or other favour to care their children will be considered act as Educator’s own work and Service can’t provide supervision and believed educator is doing their own work as they cook food after hours, or washing their laundry are some of the examples but not limited.

Outside of operation hours are Educators personal hours which are not controlled or governed by Nurture Childcare and Education Services or any govt. body and considered their own business which is not related to service’s. Any educator found doing any private work during working hours or after or before hours will be reported to Department of Education for further action and will not take any

responsibility for their Ethics or Conduct due to limited supervision or body approved by Govt.

Termination is definite and Educator will need to pay fine and further legal actions may be take due to defaming the service and not obeying the policy and procedure of Nurture Childcare and Education Services

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
145	Staff record
147	Staff members
168	Education and care service must have policies and procedures

RELATED POLICIES

<p>Arrival and Departure Policy</p> <p>Child Protection Policy</p> <p>Code of Conduct Policy</p> <p>Delivery of children to, and collection from Education and Care Service Premises Policy</p>	<p>Privacy and Confidentiality Policy</p> <p>Supervision Policy</p>
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PURPOSE

We aim to provide clear guidelines to Family Day Care educators and families regarding babysitting enrolled children of the Service out of approved hours for education and care and which is a separate arrangement to the care and education we provide as a Service. (i.e.: Not part of our complying written agreement- CWA).

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, educators, and educator assistants, children, families and visitors of the Family Day Care Service.

IMPLEMENTATION

We work to develop a positive and supportive relationship with children and families. We understand that families may request their child's Family Day Care educator to babysit or nanny for them outside the Service hours of operation. We pride ourselves on engaging Family Day Care educators of a high standard and conduct annual risk assessments to ensure the approved residence protects the health, safety and wellbeing of children who are educated and cared for by the educator. However, engaging FDC educators in a private agreement for babysitting is **not** part of the service agreement between our Family Day Care Service and families. Families engaging a Family Day Care educator in private babysitting are not eligible to claim additional Child Care Subsidy (CCS) for this care, Accidental calim which happened during out of hours care which parents has contracted with service, Service or any service director will not responsible for any type of the mishappening which is hide from service by the parents and are not part of the complying written arrangement and is mutual understanding mere in between Educator and parents will not entertain as part of any Govt. or private claim from service or govt. body because the arrangement is private and hidden for which parents will be purely responsible for any consequences.

Due to possible legal implications, child protection legislation and privacy, we strongly discourage educators from babysitting children outside of usual work hours. However, we acknowledge the educator's right to financial expansion. Therefore, Family Day Care educators undertaking babysitting or nanny positions in their personal time must ensure the following:

- Family Day Care educators must advise the Coordinator and Management of the FDC Service that a request has been made by a family
- babysitting must not interfere with the Family Day Care educator's availability
- confidentiality must be adhered to at all times
- educators will ensure favouritism does not result in external relationships with children and families outside of the Service
- families must be made aware that other adults who may visit the FDC educator's residence whilst babysitting, may not have the relevant working with children checks, which may render them inappropriate persons to care for children (all persons over the age of 18 who reside at the approved FDC residence, must have WWCC clearance and be 'fit and proper' persons to comply with National Law and National Regulations).

- the FDC Service will not be made accountable for any health and safety issues that may arise within the private arrangement being made
- families understand that our Service has a duty of care to protect children whilst being educated and cared for within an approved Family Day Care residence during operational hours only. This duty of care does not extend to private arrangements between educators and families outside of the Service. Educators do have a duty to report any health, safety, and/or wellbeing concerns in and outside of work, including child protection concerns
- Family Day Care educators must understand that an incident whilst babysitting could have an impact on their suitability to continue to be engaged by our FDC Service
- Family Day Care educators will complete a private agreement with families in regard to expectations and use of personal mobile phones and devices, and photography to ensure privacy and confidentiality is maintained whilst babysitting
- Family Day Care educators and families will complete the 'Out of Hours Babysitting Agreement Waiver' acknowledging that they waive the right to hold the Service liable and/or accountable should a child be harmed whilst an educator is in their employment outside of the Service.

BABYSITTING EXCEPTION

If an employee has a pre-existing relationship prior to the child's enrolment at the Family Day Care Service (relative, family friend, etc.) babysitting is not discouraged. However, to ensure the children's health and safety, FDC educators will:

- disclose the relationship to management
- understand that the Service will not be held responsible for any health, safety, or wellbeing issues that may arise from private arrangements.

THE COORDINATOR/MANAGEMENT WILL:

- keep a record of the babysitting arrangement on the Family Day Care educator's staff file.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Out of Hours Babysitting Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP - RELATED RESOURCES

Out of Hours Babysitting Agreement Waiver

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Care for Kids <https://www.careforkids.com.au/child-care-articles/article/59/an-overview-on-babysitting>
 Education and Care Services National Law Act 2010. (Amended 2018).
 Education and Care National Regulations. (2011).
 NSW Office of the Children’s Guardian [https://www.kidsguardian.nsw.gov.au/Privacy Act 1988](https://www.kidsguardian.nsw.gov.au/Privacy-Act-1988).
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V4.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy Additional section added for Continuous Improvement Childcare Centre Desktop - related resources section added- (Appendix deleted) 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
DECEMBER 2021	<ul style="list-style-type: none"> Policy reviewed as part of Annual review cycle No major changes 	DECEMBER 2022	
DECEMBER 2020	<ul style="list-style-type: none"> minor punctuation edits additional source added Appendix added: Out of Hours Babysitting Agreement Waiver 	DECEMBER 2020	
DECEMBER 2019	New policy drafted for FDC services	DECEMBER 2020	

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3 PHYSICAL ENVIRONMENT

3.1 ENVIRONMENTALLY RESPONSIBLE POLICY

Nurture Childcare and Education Services encourages the awareness of environmental responsibility and implement practices that contribute to a sustainable future. Family Day Care educators support children to become environmentally responsible and show respect for the environment. We practice and promote

sustainability through reducing waste, minimising consumption, and protecting and conserving wildlife and natural habitats.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 3: PHYSICAL ENVIRONMENT		
3.2	Use	The service environment is inclusive, promotes competence and supports exploration and play-based learning.
3.2.1	Inclusive Environment	Outdoor and indoor spaces are organised and adapted to support every child's participation and to engage every child in quality experiences in both built and natural environments.
3.2.2	Resource support play-based learning	Resources, materials and equipment allow for multiple uses, are sufficient in number, and enable every child to engage in play-based learning.
3.2.3	Environmentally responsible	The service cares for the environment and supports children to become environmentally responsible.

RELATED POLICIES

Animal and Pet Policy Educational Program Policy	Physical Environment Policy
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PURPOSE

Our Family Day Care Service believes in educating children about being environmentally responsible which is promoted and supported through daily practices, resource and interactions. Sustainable practice is encouraged within the Service and community, assisting children and families to become advocates for a sustainable future.

SCOPE

This policy applies to the Approved Provider, Coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Teaching and learning about being environmentally responsible starts with everyday practice. We believe being environmentally responsible should be embedded into the operations of the Family Day Care Service, rather than being a tokenistic 'theme' that is investigated every now and then. Our Service is committed to protecting our environment to ensure a sustainable future for our children. This involves the Family Day Care Coordinator, educator and educator assistants, children and families working

together to protect our environment as we educate children about the importance of being environmentally responsible within our everyday practice.

The Approved Provider/Coordinator will:

- network with the local community to keep up to date with current practices and ideas for being environmentally responsible. This may include encouraging FDC educators to install water tanks, grey water system, convert toilet cisterns to dual flush, and convert to water saving taps at the residence/venue
- encourage FDC educators, educator assistants, and families and children to engage in sustainable practices and appreciate the natural environment
- provide professional development opportunities for FDC educators to learn about integrating environmentally sustainable education into all areas of their program
- review the development of a sustainable Quality Improvement Plan (QIP) development using environmentally principles
- ensure the Service and FDC educators join a preferred provider e.g., *the NSW Early Childhood Environmental Education Network (ECEEN)* (or State equivalent) to liaise with other education and care services and maintain currency on practices and ideas for being environmentally responsible
- where relevant, review policies and procedures within the FDC Service to achieve more sustainable outcomes (e.g., using individual hand towels instead of paper towel to dry hands)
- use electronic communication where possible to reduce paper use within the principal office and between families for newsletters, billing, and other communication needs
- conduct environmentally responsible audits to ensure consistency and continuous improvement
- source resources and materials from **Reverse Garbage** or second-hand stores to use within the FDC service and in residences/venues

Educator / Educator Assistants will:

- incorporate recycling as part of everyday practice at the FDC residence/venue. Recycled containers will be provided throughout mealtimes and experiences
- role model environmentally responsible practices
- discuss environmentally responsible practices with the children and families as part of the curriculum
- provide information to families on environmentally responsible practices that are implemented at the FDC Service and encourage the application of these practices in the home environment
- share ideas between other FDC educators and educator assistants of the [**enter name of FDC service/scheme**] children, and families about environmentally responsible ideas, implementation, and

resources. This will be supported through our communication strategies, including parent meetings, emails, newsletters, and informal conversations.

- use a worm farm/composting bin/ to reduce food waste at the FDC residence/venue. Children will be encouraged to place food scraps into separate containers for use in the worm farm or composting bin. The FDC educator will provide visual guides and discuss with the children and families which scraps worms can eat, which foods can be composted, and which food scraps must go in the bin. The children will be involved in maintaining the worm farm and compost bin.
- role model energy and water conservation practices: For example, turning off lights and air-conditioning when a room is not in use, emptying water play containers onto garden areas.
- seek to purchase equipment that is environmentally friendly where possible. FDC educators will reduce the amount of plastic and disposable equipment they purchase and select materials that are made of natural materials.
- use the concept of ‘reduce, re-use and recycle’, which will become part of everyday practice for both children and educators to build lifelong attitudes towards environmentally responsible practices
- use ‘green cleaning’ products to replace chemicals where possible
- collaborate with families and the community for involvement in potential quality practice for the Service. For example: [Take 3 for the Sea](#), [Food wise](#), [Planet Ark](#)
- provide colour coded bins for Landfill only, Organic waste, Paper recycling, Mixed recyclables.

Sustainable practices may include:

SUSTAINABLE PRACTICE	IDEAS
RECYCLING	<ul style="list-style-type: none"> • Provide bins and signage for waste and recycled materials • Recycle paper and all other recyclable rubbish • Use recycled water (e.g. for watering gardens)
GARDENING	<ul style="list-style-type: none"> • Plant vegetables, herbs, and fruit trees • Establish a worm farm • Give food scraps to worms or service pets, or to a staff/ family member to take home for their pet/s • Provide education to children about activities such as ‘garden to plate’ activities • Provide opportunities for children to participate in experiences such as seed sprouting, vegetable gardening, cooking with what is grown, and provide education about weeds
ENERGY CONSERVATION	<ul style="list-style-type: none"> • Install LED lighting where possible • Turn off non-LED lights when not in use • Turn off electrical appliances at the outlet when not in use • Use natural ventilation and insulated blinds/drapes rather than air conditioning when temperatures are not extreme

WATER CONSERVATION	<ul style="list-style-type: none"> Using half flush on the toilet Turn off the taps and ensure leaking taps are fixed immediately Encourage shorter showers Teach children to turn off tap when brushing teeth Collect rainwater and use in the garden and for water/sand play Use water play water on the garden rather than tipping out at the end of the day
NATURE AND WILDLIFE	<ul style="list-style-type: none"> Use natural materials – trees, blocks, boxes etc. in arts and crafts and play Educate children about the natural decomposition cycle through exposure and participation in worm farms and composting food scraps Educate children in how to care for pets, letting them actively participate in caring for any FDC service pets Plant ‘bird attracting’ plants and install a birdbath Plant ‘butterfly attracting’ plants Create a lizard lounge Collaborate with wildlife educators to assist in educating children
COMMUNICATE	<ul style="list-style-type: none"> Display the FDC service’s sustainability journey in the foyer area for families and visitors to view, provide feedback and offer suggestions Provide families with hints and tips in newsletters about how they can become sustainable at home Use scrap paper for art and craft Use both sides of paper for drawing

SOURCE

Australian Association for Environmental Education (AAEE): www.aeee.org.au

Department of Environment and Energy: www.environment.gov.au

Education and Care Services National Regulations. (2011).

Kearns, K. (2017). The Business of Childcare (4th Ed.).

NSW Early Childhood Environmental Education Network (ECEEN): www.eceen.org.au

Queensland Early Childhood Sustainability Network (QECSN): www.qecsn.org.au

Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> Policy reviewed as per annual review cycle Sources checked for currency 		
POLICY REVIEWED	MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2021	<ul style="list-style-type: none"> minor edits to reflect FDC residence/venue moved FDC educator/educator assistant roles within policy sources checked and broken links edited 		FEBRUARY 2022

FEBRUARY 2020	<ul style="list-style-type: none"> • Additional information added to points. • small wording edits • additional links added for information 	FEBRUARY 2021
FEBRUARY 2019	<ul style="list-style-type: none"> • Additional information added to points. • Irrelevant information deleted. • Points added (Highlighted). • Department names corrected in Sources (due to departmental name changes). • Sources/references corrected, updated, and alphabetised. 	FEBRUARY 2020
AUGUST 2018	New Policy Created for Family Day Care Service to support best practice	FEBRUARY 2019

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4 STAFFING ARRANGEMENTS POLICY

Nurture Childcare and Education Services aims to engage educators, educator assistants and coordinators who have the qualifications and experience to develop warm, nurturing, and respectful relationships with children. We are committed to ensuring that children’s health, safety, and wellbeing is protected at all times through providing appropriate and effective supervision according to legislated ratios and best practice. Our educators, with support from the coordinator, will design and implement programs that support children’s participation and engagement, interests, learning, and development. Service will also hire equivalent educated professionals who can support and care our service, Educators, parents, and children. Service will also outsource the support for the children documentation, giving time to time reminders to complete educator’s pending work if any, chasing educators for children’s health and safety documentation, maintaining professional trainings and recording educators’ professional development and or will support in other needs of Educators. To outsource any person no personal information will be given to third party such as date of birth, email address, home address or any other confidential information so our all stakeholder will be safe and secure.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children’s learning and development.

4.1.1	Organisation of Educators	The organisation of Educators across the Service supports children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of Educators at the Service.
4.2	Professionalism	Management, Educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, Educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
4 (1)	Definitions
10	Meaning of <i>actively working towards</i> a qualification
84	Awareness of child protection law
85	Incident, injury, trauma and illness policies and procedures
90	Medical conditions policy
93	Administration of medication
94	Exception to authorisation requirement- anaphylaxis or asthma emergency
95	Procedure for administration of medication
99	Children leaving the education and care services premises
100	Risk assessment must be conducted before excursion
101	Conduct risk assessment for excursion
102	Authorisation for excursions
102- B,C,D	Transport risk assessments/authorisations
124	Number of children who can be educated and cared for – family day care educator

127	Family day care educator qualifications
128	Family day care co-ordinator qualifications
136	First Aid qualifications
143A	Minimum requirements for a family day care educator
143B	Ongoing management of family day care educators
144	Family day care educator assistant
149	Volunteers and Students
153	Register of family day care educators, coordinators and educator assistants
154	Record of staff engaged or employed by family day care service
169	Additional policies and procedures-family day care service
243	Persons taken to hold an approved diploma level education and care qualification
244	Persons taken to hold an approved certificate III level education and care qualification
358	Working with children check to be read (VIC)
359	Criminal history record check to be read and considered (VIC)

RELATED POLICIES

Code of Conduct Policy Child Protection Policy Child Safe Environment Policy Dealing with Complaints Policy Emergency and Evacuation Policy Excursion/Incursion Policy Governance Policy Incident, Injury, Trauma and Illness Policy	Keeping A Register of Educators, Coordinators, Educator Assistants Policy Privacy and Confidentiality Policy Professional Development Policy Responsible Person Policy Safe Transportation Policy Sleep and Rest Policy Supervision Policy Student and Volunteer Policy
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PURPOSE

To ensure our FDC Service adheres to the Education and Care Service National Regulations we engage Family Day Care (FDC) educators, educator assistants, coordinators and staff who are suitably qualified and adhere to regulated educator to child ratios. We ensure that all our educators engaged by the FDC service are assessed and their residence/venue is assessed at least annually to ensure they are able to

provide a high standard of care and education. Our Family Day Care service engages and employs staff to support educators with the delivery of high-quality education and care for children.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

Our Family Day Care Service will comply with the Education and Care Services National Regulations and National Quality Standard to ensure our Family Day Care service engages staff, educators and coordinators who are suitably qualified and experienced.

4.1.1 Staffing Arrangements

The approved provider of the Family Day Care Service engages and employs a range of staff to assist in the operation of the service and ensure the provision of quality education and care to children.

We engage or employ staff in the following positions:

- administration staff
- a person designated as the educational leader
- nominated supervisor/responsible person
- coordinator/s
- educators
- educator assistants

4.1.2 Staff Record and Registers

[Insert name of Family Day Service] must keep information about approved FDC educators, educator assistants, and the coordinator/s engaged or registered with the service. Details must include evidence of educators' qualifications, training and Working with Children Checks. A register is kept at the principal office of the Family Day Care Service and is maintained by the approved provider.

Additionally, a record is kept of every staff member engaged by the service who is not an educator, coordinator or educator assistant. This record also includes information about the educational leader, nominated supervisor, information about students and volunteers. A record of Working with Children Checks or equivalent (if applicable) is also recorded. This record is to be kept at the principal office of the Service.

Details regarding staff PRODA registrations will be kept in each staff record, including RA number and evidence of fit and proper checks.

4.1.3 Immunisation requirements

Our FDC Service will ensure all staff, educators and visitors (contractors, health professionals, volunteers, students, committee members) are fully vaccinated against COVID-19 or hold a medical contraindication certificate, as per the current Public Health Order. *[adjust to suit your state/territory]*. Additionally, our FDC Service will ensure a FDC educator does not open unless all adults in the FDC residence are fully vaccinated against COVID-19. *(NSW services)*.

Family Day Care educator and coordinator qualifications:

- FDC educators must have, or be *actively working towards*, at least an approved certificate III level education and care qualification (R 127)
- *In South Australia*, a FDC educator must hold at least a certificate III level of education and care qualification
- Family Day Care Coordinator must have an approved diploma level education and care qualification (R 128)

'Actively working towards' definition:

A FDC educator who is enrolled in a course for an approved Early Childhood qualification.

- The FDC educator is required to provide documentary evidence of their course, training plan and progress towards completion of the course.
- Individuals actively working towards an approved qualification may be counted towards qualification requirements.
- The Approved Provider/Coordinator will communicate with the educator's RTO to ensure the educator successfully completes their qualification.
- The Approved Provider/Coordinator will support the educator in completing their qualification through mentoring and assistance.

Family Day Care coordinator to educator ratios

- For the first 12 months after the FDC educator commences providing education and care to children as part of the Family Day Care Service, there must be 1 full-time equivalent family day care coordinator for every 15 family day care educators.
- After the end of that 12-month period, there must be 1 full-time equivalent family day care coordinator for every 25 family day care educators.

Engaging Family Day Care Educators

The Approved Provider must ensure that a FDC educator is not registered or engaged unless:

- reasonable steps have been taken to ensure that the person has adequate knowledge and understanding of the provision of education and care to children
- the educator's history of compliance with the National Law and other relevant laws is taken into account

- any decision under the National Law to refuse, suspend, refuse to renew or cancel a licence, approval, registration, certification or other authorisation granted to the person under National Law and other laws Management of family day care educators is taken into account
- a criminal history record check has been read and considered (VIC)
- Working with children check has been read (VIC)

The Approved Provider will take reasonable steps to ensure that:

- each FDC educator maintains an adequate knowledge and understanding of the provision of education and care to children
- any serious incident that occurs while a child is being educated and cared for by a FDC educator is adequately addressed and the regulatory authority is notified within 24 hours
- any complaints against a FDC educator will be addressed and actioned.

Engaging Family Day Care educator assistants

The Approved Provider may approve a person as a Family Day Care educator assistant to assist a FDC educator provide education and care to children as part of the FDC service.

A person will not be approved unless the FDC educator provides written consent of each parent of each child being educated and cared for by the educator to the use of the family day care educator for specific circumstances-

- in the absence of the FDC educator, to transport a child between the family day care resident or venue and-
 - a school, or another education and care service or children's service or the child's home or
- in the absence of the FDC educator in emergency situations or
- in the absence of the FDC educator to enable the educator to attend an appointment (other than a regular appointment) in unforeseen or exceptional circumstances if the absence is for less than 4 hours and the approved provider has approved that absence and notice of that absence has been provided to the parents of the child or
- while the educator is educating and caring for children as part of the FDC service.
- educator assistants must be at least 18 years old and
- are considered to be a 'fit and proper person'

Engaging Family Day Care Coordinators

The Approved Provider must ensure that FDC coordinators hold an approved diploma level education and care qualification. Coordinators are required to develop and maintain deep knowledge of the National Law and National Regulations, Early Years Learning Framework and My Time Our Place Framework.

Coordinators are employed to monitor and support FDC educators. The mandatory minimum coordinator to educator ratio is implemented to ensure a high standard of quality education and care is maintained.

Coordinator to FDC educator ratios are:

- 1:15 for the first 12 months the service is operating
- 1:25 after the first 12 months of operation.

Register of Family Day care educators, coordinators and educator assistants

A register must be kept in relation to each FDC educator, coordinator, educator assistant engaged or registered by the service. This register is kept at the principal office of the family day care service and maintained by the Approved Provider. The register inclusions are detailed in the *Keeping A Register of Educators, Coordinators, Educator Assistants Policy*.

Evidence that the FDC educator is adequately monitored and supported by the Coordinator must be recorded in this register. This should include:

- dates and times of any visits by the coordinator to the residence
- dates and times of any telephone calls
- details of any correspondence or written materials to the educator by the coordinator

Information held on the register must be kept until the end of 3 years after the date on which the family day care educator, educator assistant or coordinator ceased to be employed or engaged by or registered with the service.

4.1.4 Approved First Aid qualifications

- FDC educators and educator assistants are required to hold ACECQA approved training in
 - first aid qualification
 - anaphylaxis management training, and
 - emergency asthma management training. (Approved qualifications are published on the ACECQA website).
- If the coordinator is providing education and care to children, first aid qualification, anaphylaxis management and emergency asthma management training must also be completed.
- It is the responsibility of the FDC educator, educator assistant and coordinator to ensure they maintain current First Aid, Asthma, and Anaphylaxis Training certificates and provide the service with a copy of the certificates. All staff must ensure they participate in training prior to the expiration date on their certificates.

4.1.5 Working with Children Check/Clearance

A Working with Children Check (WWCC) is a requirement for people who work or volunteer in child-related work. It involves a national criminal history check and a review of findings of workplace

misconduct. The result of a Working with Children Check is either a clearance to work with children for five years (NSW & VIC. SA), three years (WA, QLD, TAS, & ACT), or two years (NT), or a bar against working with children. Cleared applicants are subject to ongoing monitoring and relevant new records may lead to the clearance being revoked.

- To comply with National Regulations for those undertaking paid or voluntary child-related work all employees of the FDFC Service will acquire a Working with Children Check.
- The Approved Provider will verify all Working with Children Checks to ensure the children are protected.
- The Approved Provider will keep a record of the expiry date of the Working with Children Check for all staff and educators.
- Services in Victoria will read the person's working with children check before the person is engaged by the service.
- Any adult residing in the Family Day Care residence, or person who visits the residence regularly, must also hold a current Working With Children Check [or state/territory equivalent- Blue Card (QLD) ...]
- Management will ensure any notifications or concerns regarding a person's Working With Children Check are recorded and steps taken immediately to ensure the person is not working directly with children in accordance with directions from the Office of the Children's Guardian [NSW] or related authority in each state/territory

Adequate Supervision

Adequate supervision is a critical consideration for all FDC educators in the residence or venue where children are educated and cared for and is part of every educator's Duty of Care. FDC educators are required to ensure that children are in sight and/or hearing at all times, demonstrating that the best interest of children is being provided for. This includes toileting, sleep, rest, nappy changing, transition routines and whenever the educator provides or arranges transport for children.

Our FDC Service will comply with educator to child ratios outlined in National Legislation and National Quality Standard for Family Day Care educators.

- FDC educators and educator assistants are required to adhere to the Service's *Supervision Policy* to maintain effective supervision
- FDC educators will always be able to observe each child, respond to individual needs and attend to children as necessary
- FDC educators will adjust their level of supervision depending on the area where children are playing, and the skills, age, dynamics, and size of the group of children being supervised

- When supervising outdoors, FDC educators will position themselves so as to be able to see as much of the play area as possible
- Where there are water activities or high-risk experiences, FDC educators will ensure close supervision is maintained
- Infants and toddlers who are sleeping in other rooms will be closely monitored and checked/inspected every 10 minutes to assess a breathing and the colour of their skin
- Older children will be supervised whilst sleeping or resting
- Children will be supervised when hand washing and during toileting/nappy change times.

4.1.6 Volunteers and Students

- The Approved Provider will ensure that volunteers and students meet any requirements for Working With Children Checks/Clearance, or teacher registration [check state/territory requirements]
- At no time will volunteers and/or students be left alone with a child or group of children or be included in the educator to child ratio.
- All volunteers and students will be inducted into the Service to ensure they adhere to the Service policies and procedures and Statement of Philosophy and Code of Conduct
- Induction will ensure volunteers and students are aware of how to manage medical conditions and to respond to a child in case of illness, injury or suffers trauma, awareness of privacy laws (including social media, photography) and behaviour guidance procedures.

Privacy

- Educators and educator assistants will adhere to the Service's *Privacy and Confidentiality Policy* and Privacy Law in relation to children and their families, or matters relating to the Service and will at no time take part in inappropriate or unlawful conversations or discussions.
- The educator will ensure that students and volunteers are made aware of the services' *Privacy and Confidentiality Policy* and Privacy Law during their initial induction.
- All staff, educators, educator assistants, volunteers and students are provided with information about the ECA Code of Ethics.

Staff Recruitment

- Our Family Day Care Service will ensure a rigorous recruitment process is followed to select the best educators and staff possible based on skills, qualifications, experience and suitability for the position available.
- All potential educators and staff will participate in robust interviews and have reference checks completed before an offer of engagement or employment is presented. Reference checks will take into consideration the suitability of the applicant for the role, previous experience and their commitment to child safe practices.

- All potential educators and staff are subject to Police Checks [dependent on state/territory jurisdictions], maintenance of a valid Working With Children Card (WWCC) and appropriate qualification. Valid first aid, asthma and anaphylaxis management, immunisation status -including mandatory COVID-19 vaccination requirements, [Check your state/territory] or food safety qualification may also be required.
- All new educators and staff will undergo a probation period of three (3) months, during this time they will participate in an induction and orientation program and hold regular discussions regarding their performance with a coordinator/or mentor
- Staff induction includes provision of the FDC Service’s policies and procedures, Child Safe Standards, code of conduct, child protection, Work Health and Safety guidelines, behaviour guidance, service routines, human resource documentation, physical environment, communication with families’ processes, Family Assistance Law and Child Care Subsidy [adjust for your FDC Service].

Educator to Child Ratios

Our FDC Service will meet the minimum child ratio requirements as stated below:

Age	Educator to Child Ratio
A maximum of 4 children preschool age or under Ratio includes educator’s own children younger than 13 years of age if there is no other adult to care for them	1 :7

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 ACECQA. (2021). Policy and procedure guidelines. Staffing Guidelines.
 Department of the Officer of the Privacy Commissioner: www.privacy.gov.au
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
 Education and Care Services National Regulations. (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2018). (Amended 2020).
 Office of the Children’s Guardian: <https://www.kidsguardian.nsw.gov.au/child-safe-organisations/working-with-children-check>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2021/ FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023

MODIFICATIONS	<ul style="list-style-type: none"> • Additional law/regulations added- ACECQA Guidelines to Policy and Procedures document-(August 2021) • Additional information re: COVID-19 vaccination requirements for each state/territory. Services to delete information that is not relevant to their service. • Checked and updated links used within policy • Updated Related Policies 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
FEBRUARY 2021	<ul style="list-style-type: none"> • minor edits • addition SA qualification for FDC educators • probation time amended to adhere to Recruitment Policy 	FEBRUARY 2022
OCTOBER 2020	<ul style="list-style-type: none"> • Additional information related to records and registers required under regulations • information about staffing at FDC service added • additional section added for engaging educator assistants, coordinators • inclusions of register of educators, coordinators deleted as this is found in <i>Keeping A Register of Educators, Coordinators, Educator Assistants Policy</i> • additional section on recruitment and probation periods added • additional sources added 	FEBRUARY 2021
FEBRUARY 2020	<ul style="list-style-type: none"> • Information about supervision condensed to avoid repetition • Revision of approved first aid qualifications • Register requirements for coordinators • evidence of monitoring FDC educators 	FEBRUARY 2021
FEBRUARY 2019	New policy created	FEBRUARY 2020

4.2 PERFORMANCE MANAGEMENT POLICY

Nurture Childcare and Education Services is committed to supporting the performance of staff members and engaged educators. We aim to build the capacity of educators to care and educate children enrolled in our FDC Service. We believe that Performance Management has significant benefits for our FDC Service as it leads to inspired and enhanced performance from each educator, co-ordinator, and staff member. Performance Review meetings are viewed as an opportunity for each staff member or educator to plan proactively for the year ahead.

This policy will provide guidance for our management team on how to monitor performance, plan and review work objectives and understand staff and educator achievements. FDC educators are engaged by the FDC service as an independent contractor and are required to adhere to our FDC service policies and procedures, including Performance Management. Where there is underperformance, we will work to resolve this promptly and effectively in accordance with an individual *Performance Improvement Plan* developed in conjunction with the staff member or FDC educator.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.3	Development of professionals	Educators, co-ordinators and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

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
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
168(2)(i)	Policies and procedures are required in relation to a code of conduct for staff members
169	Additional policies and procedures- family day care services
170	Policies and procedures to be followed

RELATED POLICIES

Assessment of FDC educators, FDC educator assistants and persons residing at FDC residence Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints FDC Monitoring, Support and Supervision of FDC educators and assistants Governance Policy	Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Probation and Induction Orientation Policy Professional Development Policy Recruitment Policy Responsible Persons Policy Staffing Arrangements Policy Work Health and Safety Policy
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PURPOSE

We aim to provide an effective Performance Management process to assist FDC educators, educator assistants, coordinators and staff members to assess their work performance against their job description, whilst establishing a positive work culture and professional workplace.

SCOPE

This policy applies staff, FDC educators, educator assistants, nominated supervisor and management at the Family Day Care Service.

IMPLEMENTATION

Performance Management plays an important role in linking staff performance goals and expectations through balanced feedback and reviews and help meet organisational objectives.

Through the Performance Review, management can acknowledge and identify the individual strengths, talents and interests of each staff member and FDC educator whilst supporting the diverse knowledge and skills each person brings to the role and FDC Service.

Each staff member and FDC educator will participate in a Performance Review every 12 months. The review process will assist staff and FDC educators develop an understanding and expectation of their role, reflect on achievements and challenges and plan goals that may assist in accomplishing performance outcomes and expectations in the future. At all times of the Performance Management process, confidentiality and sensitivity shall be maintained to a high standard.

4.2.1 Induction, Orientation and Probation program

Management will ensure each staff member and FDC educator undertakes an induction and orientation program upon employment or engagement at the Service. Staff members and FDC educators will receive a job description as part of the appointment of employment or engagement of the FDC Service, and this will assist to set expectations and requirements of the position. Staff members and FDC educators will participate in *Probationary Meetings* that are scheduled within the first week of employment or engagement of service and at the end of the three-month probationary period. Feedback will be provided to the staff member or FDC educator regarding performance and management will provide support and opportunities for setting professional development goals.

4.2.2 Staff Performance Review

Performance Reviews are best completed on a regular and systematic manner to allow management to provide feedback on a staff member or FDC educator's work performance and for staff and FDC educators to reflect on their own performance. A *Performance Review* meeting will be conducted every 12 months with each staff member and FDC educator to review their work performance, outline expectations and responsibilities and set professional goals. The *Performance Review Form* can be used to assess staff member or FDC educator's goals and objectives, areas of strength, responsibilities and discussion as to what extent these have been met.

4.2.3 Managing Underperformance

Appropriate management of underperformance plays a key role of Performance Management. Should the Nominated Supervisor/Coordinator identify any performance issues or concerns the *Underperformance Management Procedure* should be initiated including the implementation of a *Performance Improvement Plan* if required.

Indicators of poor or underperformance or unsatisfactory behaviour include:

- the staff member or FDC educator not performing tasks associated with the role according to the job description
- the staff member or FDC educator not carrying out the work to the standard as set by the job description
- the staff member or FDC educator displaying unacceptable, disruptive or negative behaviour either at the workplace (principal office) or residence/approved venue
- the staff member or FDC educator not following policies and procedures of the FDC Service.

Management will review past Performance Review reports to identify any previous concerns and review the staff member or FDC educator's job description to identify any concerns or responsibilities that are not being met. Identification of the underperformance or unsatisfactory behaviour will consider the seriousness of the issue, how long the issue has existed and the staff member or FDC educator present performance and how this varies to what is expected of the staff member or FDC educator.

A Performance Management Meeting will be arranged with the staff member or FDC educator once underperformance or unsatisfactory behaviour has been clearly identified. Management will provide clear communication with staff and FDC educators to clarify:

- performance indicators (why there is an issue)
- expectations around ethics, values and behaviour
- how their underperformance or behaviour impacts the workplace environment and
- why there is a concern from management.

Staff members and FDC educators will be informed of expectations and performance standards and requested to participate in a *Performance Improvement Plan* if required.

4.2.4 Performance Improvement Plan

A *Performance Improvement Plan* will be developed with the staff member or FDC educator outlining actions and goals to be implemented. Performance expectations and what is to be achieved over a specific period will be discussed and documented with the staff member or FDC educator.

During the *Performance Improvement Plan* process the staff member or FDC educator will be supported to address and resolve instances or patterns of underperformance or unsatisfactory behaviour. If the staff member or FDC educator has not taken reasonable steps to address or resolve their performance or unsatisfactory behaviour and the *Performance Improvement Plan* has not been followed, the staff member or FDC educator will be advised of the next steps in the Performance Management process which may include:

- extension of the *Performance Improvement Plan* time frame
- provision of extra support, guidance or mentoring
- issuing of formal warnings and ultimately if the issue cannot be resolved, termination of employment.

A review of the *Performance Improvement Plan* is to be conducted to discuss the staff member or educator's progression and to provide feedback of the goals and outcomes set. If the staff member or educator is showing satisfactory improvement of the identified issue the *Performance Improvement Plan* will be resolved and processes implemented to ensure improvements will be maintained.

Performance Improvement Plan

If a staff member or FDC educator's performance or behaviour does not improve to the required standard, termination of their employment or engagement of service may be an option. A staff member or FDC educator cannot be dismissed in circumstances that are '*harsh, unjust or unreasonable.*' It is vital to be fair to staff members and FDC educators, giving reasons for dismissal, and an opportunity to respond to those allegations. If the staff member or FDC educator's performance does not improve following formal Performance Management Meetings and the implementation and completion of a *Performance Improvement Plan*, then it may be appropriate to issue a formal warning or consider dismissal of employment or engagement contract.

Following a decision to terminate employment or engagement of service management will provide the staff member or FDC educator with written notice of the day of termination when ending their employment or engagement. The written notice must provide details of the staff member or FDC educator's last day and a reason why the employment or engagement of service was terminated. In relation to staff members, employment notice periods will be determined in accordance with the appropriate award. Please note the *Educational Services (Teachers) Award 2020* provides a greater minimum period notice than that required under the *National Employment Standards*. FDC educators should refer to their service contract or arrangement regarding notice periods of termination of engagement of contract.

4.2.5 Serious Misconduct – Termination of employment

Employers are required to adhere to the Fair Work Act when terminating a staff member or an FDC educator's employment or engagement of service due to the engagement in 'serious misconduct'.

Serious misconduct involves a staff member or FDC educator deliberately behaving in a way that is inconsistent with continuing their employment or engagement of service, it may include the following:

- causing serious and imminent risk to the health and safety of another person or to the reputation or profits of their employer's business

- theft, embezzlement, tax evasion
- fraud, misapplication, corruption
- assault, taking of bribes
- being intoxicated at work
- refusing to carry out a lawful and reasonable instruction that is part of the job
- criminally prosecutable offences directly related to employment (child abuse or neglect)

A meeting is to be arranged with the staff member or FDC educator regarding the termination of employment or engagement contract due to serious misconduct. A support person should be offered to the staff member or FDC educator for the meeting. The manager is to explain the reasons for the termination of employment or engagement of contract and the staff member or FDC educator provided with a letter explaining the terms of the termination of employment or engagement of contract. (See: *Termination of Employment Procedure*).

Management/Nominated Supervisor will:

- follow the *Performance Review Procedure* for regular and systematic review of work performance and behaviour
- ensure all staff and educators comply with the *Code of Conduct* at all times
- provide FDC educators, coordinators and staff with a comprehensive *Probation, Induction and Orientation program*
- provide all staff members and FDC educators with a clear and concise job description upon employment or engagement of service
- conduct Performance Review meetings with staff members and FDC educators every 12 months
- prepare accordingly before any Performance Review meeting with staff members or engaged FDC educators
- provide time to discuss the process of the review meeting, duration of meeting and provide points for discussion which may include:
 - self-reflection of performance
 - identifying highlights during the year
 - achievement of professional development goals
 - personal characteristics
 - job knowledge and work output
 - motivation
 - leadership
 - family relationships
 - administration skills
 - people management skills

- career aspirations
- identifying challenges
- set a mutually convenient time to meet and conduct the *Performance Review*
- provide feedback to each staff member and FDC educator articulating areas of strength and weaknesses and identifying new goals and/or Quality Improvement Plan (QIP) areas to be a focus of the staff member or educator during the next 12 months
- highlight and discuss any areas where underperformance is identified
- maintain confidentiality and uphold professional integrity at all times
- ensure the staff member or educator and manager signs the Performance Review document
- provide a copy of the document to the staff member or FDC educator

In the case of underperformance,

- provide staff member or FDC educator with 24 hours' notice of any Performance Management meeting and offer a silent support person to support the staff member or FDC educator
- be specific with any concerns or issues to be raised during the Performance Management meeting
- document any Performance Management meetings using appropriate forms and templates
- develop and implement a *Performance Improvement Plan* with the individual staff member or FDC educator and adhere to the *Managing Staff Underperformance Procedure* if required
- identify outcomes and appropriate goals to assist the staff member or FDC educator to improve performance within an agreed timeline
- take appropriate action when performance does not meet the agreed outcomes and goals
- provide an *Official Performance Warning Letter* to the staff member or FDC educator formally as part of the *Managing Staff Underperformance Procedure* as required
- adhere to the *Termination of Employment Procedure* when terminating employment of a staff member or engagement of a FDC educator
- provide the staff member or FDC educator with a *Termination of Employment letter* upon termination of employment or engagement of service
- adhere to the *Termination of Employment (serious misconduct) Procedure* when terminating employment or engagement of contract of a staff member or FDC educator due to serious misconduct
- provide the staff member or FDC educator with a *Termination of Employment letter* upon termination of employment or engagement of service due to serious misconduct.

FDC educators, coordinators and staff members will:

- perform work to the standard as expected as identified within their job description
- participate collaboratively in annual *Performance Review* meetings as a condition of their employment or engagement of service
- reflect on any achievements or challenges that have occurred within the past 12 months to contribute to the *Performance Review*
- address any concerns or issues regarding work performance and highlight areas for improvement or development
- consider any circumstances or events that may have affected performance. e.g., periods of ill health, excessive workloads
- assist to develop goals and expectations during the *Performance Review* process
- complete any training or professional development identified as part of a *Performance Improvement Plan*.

SOURCE

ACECQA (2017). *Family Day Care Compliance Guide*. <https://www.acecqa.gov.au/sites/default/files/2019-06/FDC-ComplianceGuide-ApprovedProvider.pdf>

Early Childhood Australia Code of Ethics. (2016).

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

Fair Work Ombudsman: Best Practice Guide: [Managing underperformance Best Practice Guide \(2020\)](#)

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

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

Revised National Quality Standard. (2018).

Work Place Law <https://www.workplacelaw.com.au/posts/better-safe-than-sorry-best-practice-dealing-poor-performance>

Workplace Relations Act 1996 (Cth).

Victoria Government. Business Victoria. (2020). Review staff performance <https://business.vic.gov.au/business-information/staff-and-hr/staff-management/review-staff-performance>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
SEPTEMBER 2021	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
SEPTEMBER 2021	New policy DRAFT for LDC		MAY 2022

4.3 BULLYING, DISCRIMINATION AND HARASSMENT

Nurture Childcare and Education Services is committed to creating a workplace with vision and meaningful direction, adhering to our code of conduct and practicing ethical behaviour to ensure a productive work environment free from bullying, discrimination, and/or harassment.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional standards	Professional standards guide practice, interactions and relationships.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

168	Education and care services must have policies and procedures
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RELATED POLICIES

Code of Conduct Policy Cyber Safety Policy Dealing with Complaints Policy (General) Family Communication Policy Health and Safety Policy Interactions with Children, Family and Staff Policy	Multi-Cultural Policy Privacy and Confidentiality Policy Respect for Children Policy Staffing Arrangements Policy Student and Volunteer Workers Policy Work Health and Safety Policy
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PURPOSE

We are committed to providing a safe and equitable workplace for all staff and Family Day Care (FDC) educators. Bullying, discrimination, and harassment will not be tolerated under any circumstances. As part of this commitment, we aim to prevent workplace bullying by adhering to the Early Childhood Code of Ethics, Fair Work requirements, and our Service statement of philosophy, ensuring a safe workplace and the wellbeing of all staff and educators employed or engaged by the FDC Service.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

Everyone has a right not be bullied or harassed at work. Workplace bullying occurs when a person or group of people repeatedly behave unreasonably towards a worker or a group of workers, creating a risk to health, safety, and wellbeing.

Bullying may involve any of the following types of behaviour:

- aggressive or intimidating conduct
- making belittling or humiliating comments
- spreading malicious rumours
- teasing, practical jokes or initiation of, or participation in 'initiation ceremonies'
- exclusion from work-related events
- unreasonable work expectations
- displaying offensive material, and/or
- pressure to behave in an inappropriate manner.

Bullying does not include management action carried out in a reasonable manner including:

- making decisions about poor performance
- taking disciplinary action
- directing and controlling the way work is to be carried out.

Discrimination occurs when someone is treated less favourably than others because of a particular characteristic (such as age, disability, or gender), or belong to a particular group within the population (due to, for example, religion, culture, or sexual orientation).

Harassment involves unwelcome behaviour that intimidates, offends or humiliates a person because of particular characteristics as listed above.

There are a number of anti-discrimination, equal employment, workplace relations, and human rights laws which make it illegal to discriminate or harass a person in the workplace. Australia's federal anti-discrimination laws are contained in the following legislation:

[Age Discrimination Act 2004](#)

[Disability Discrimination Act 1992](#)

[Racial Discrimination Act 1975](#)

[Sex Discrimination Act 1984](#)

Our FDC Service philosophy, code of conduct and the [Early Childhood Australia \(ACA\) Code of Ethics](#) will guide educator behaviours and interactions and adhere to best practice by providing a vision and a purposeful and meaningful direction to ensure a safe working environment for all staff.

Our Family Day Care Service will ensure:

- a thorough induction process for new employees, **and engaged FDC educators** is conducted at the commencement of employment **or contract**
- all staff **and FDC educators** have a comprehensive understanding of the FDC Service's Code of Conduct, **Grievance- Dealing with** *Complaints Policy* and the *Early Childhood Code of Ethics*
- the *Bullying, Discrimination and Harassment Policy*, and all related policies are reviewed annually
- FDC educators are informed that inappropriate behaviour, including bullying and harassment will not be tolerated, and will be advised of potential consequences of this behaviour
- all staff and educators are aware of the Service's *Bullying, Discrimination and Harassment* procedure
- inappropriate behaviour is addressed in a timely manner
- all staff and FDC educators are aware of appropriate interactions through professional development and training
- staff and FDC educators are aware of their job roles and responsibilities which will be clarified through job descriptions, team meetings, performance appraisals and clear management expectations
- they are encouraged to embrace the uniqueness and diversity of their colleagues
- constructive feedback is provided to staff and FDC educators
- communication practices are reviewed frequently to ensure best practice
- all staff and FDC educators are treated equally and fairly
- meetings are documented accurately and appropriately
- an understanding and compliance with discrimination law is communicated with all employees.

Families Day Care Educators and Educator Assistants will:

- be involved in decision making with a clear understanding of their roles and responsibilities, outlined in each individual job description
- embrace the uniqueness and diversity of their colleagues
- respect the skills, strengths and opinions of all educators in order to create team cohesion based on professionalism
- comply with discrimination law
- be responsible for their own actions in the workplace
- raise matters of concern to management at an early stage
- provide management with specific information regarding the perceived bullying and be prepared to have the complaint made known to the person, to allow for fair management and rectification
- maintain confidentiality and not discuss or release information relating to bullying allegations

- follow the FDC Service’s Bullying, Discrimination and Harassment procedure
- evaluate the effectiveness of strategies implemented to discourage and eradicate bullying, discrimination, and/or harassment.

SOURCE

Anti-Discrimination Act: See <https://raisingchildren.net.au/disability/disability-rights-the-law/law/anti-discrimination-laws> for Acts for specific Australian states and territories.

Australasian Legal information institute: www.austlii.edu.au

Australian Human Rights Commission: <https://www.humanrights.gov.au/employers/good-practice-good-business-factsheets/quick-guide-australian-discrimination-laws>

Australian Human Rights Commission. (2019). Reform of discrimination law: <https://www.humanrights.gov.au/>

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

Early Childhood Australia Code of Ethics. (2016).

Education and Care National Regulations. (2011).

Fair Work Act 2009 (Cth).

Fair Work Ombudsman. (2019). Managing performance & warnings: <https://www.fairwork.gov.au/employee-entitlements/managing-performance-and-warnings>

Fair Work Ombudsman. Rights and obligations: <https://www.fairwork.gov.au/how-we-will-help/templates-and-guides/fact-sheets/rights-and-obligations/workplace-discrimination>

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

Guide to the National Quality Standard. (2017).

OSHC Code of Professional Standards: <http://networkofcommunityactivities.org.au/wp-content/uploads/2013/03/OSHC-Code-Standards.pdf>

Safe Work Australia. (2019). Bullying: <https://www.safeworkaustralia.gov.au/bullying>
[Western Australian Education and Care Services National Regulations](https://www.safeworkaustralia.gov.au/bullying)

Work Health and Safety Act 2011 (Cth).

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
AUGUST 2021	minor edits references to related procedures added sources checked for currency		AUGUST 2022
AUGUST 2020	related legislation acts linked for ease of reference minor editing		AUGUST 2021

	sources checked for currency	
AUGUST 2019	New policy created for Family Day Care	AUGUST 2020

4.4 DEALING WITH COMPLAINTS POLICY (Staff)

Nurture Childcare and Education Services do Believe that Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Family Day Care Service working towards the highest standard of care and education. It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our FDC Service’s procedures for receiving and managing informal and formal complaints from engaged educators and employed staff. FDC educators, educator assistants and staff can lodge a grievance with management with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development.
4.1.2	Continuity of Staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other’s strengths and skills.

LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
Sec. 172	Offence to fail to display prescribed information
Sec.174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
168(2)(o)	Education and care service must have policies and procedures... for dealing with complaints
169	Additional policies and procedures- family day care
170	Policies and procedures must be followed

171	Policies and procedures to be kept available
173(2)(b)	Requires an approved provider to make the name and telephone number of the person to whom complaints may be addressed clearly visible at the service
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy (Family) Dealing with Complaints Policy (General) Enrolment Policy Family Communication Policy Governance Policy	Incident, Injury, Trauma and Illness Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Respect for Children Policy Responsible Person Policy Student and Volunteer Workers Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for dealing with complaints (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170). Our Family Day Care Service aims to investigate all complaints and grievances with a high standard of equity and fairness. We believe in team collaboration to ensure a safe, healthy and harmonious work environment.

We will ensure that all persons making a complaint are guided by the following policy values:

- procedural fairness and natural justice
- code of ethics and conduct
- culture free from discrimination and harassment
- transparent policies and procedures
- opportunities for further investigation
- adhering to our FDC service philosophy

Procedural fairness and natural justice

Our FDC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker

- The right to have the decision based on relevant evidence

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

Grievances and complaints can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. *Our Dealing with Complaints Policy* ensures that all persons are presented with procedures that:

- value the opportunity to be heard
- promote conflict resolution
- encourage the development of harmonious partnerships
- ensure that conflicts and grievances are mediated fairly
- are transparent and equitable.

DEFINITIONS

Complaint: Expression of dissatisfaction made to or about an organisation related to its products, services, staff or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required. [AS/NZS 10002:2014 Complaint Management Standard]

Complaints and Grievances Management Register: Records information about complaints and grievances received at the FDC Service, along with the outcomes. This register includes documents that must be kept in a secure file, accessible only to management and the Regulatory Authority. The register can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. A *workplace grievance* is a complaint raised towards an employer by an employee due to a violation of legalities (workplace policies, employment contract, national standards).

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Education and Care Services National Law and Regulations, National Quality Standard or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider or Nominated Supervisor to the Department of Early Childhood Education and Care within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Approved Provider, Nominated Supervisor or Coordinator is unsure whether the matter is a notifiable complaint, it is good practice to contact the **Regulatory Authority** for confirmation. Written reports must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of Family Day Care Service
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the centre in contravention of the Regulations or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* as soon as possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183. The Approved Provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the FDC service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the FDC service.

We acknowledge that conflict is a natural part of the work environment. It is important that all conflict is resolved as unresolved conflict can lead to tension; stress; low productivity; bitter relationships; excess time off; ill health; anxiety and many other destructive emotions. When conflict is addressed and handled constructively the outcomes are feelings of relaxation; openness; high productivity; vitality; good health, empowerment; a sense of achievement etc.

Positive communication between educators is vital to the smooth running of the FDC Service and to ensure a positive environment for children. Educators are expected to treat other educators with respect, accept differences and share ideas. It is every staff member's responsibility to contribute to the development of an open, healthy and constructive work environment. All grievances and complaints, whether considered minor or not, are to be dealt with promptly, professionally and thoroughly.

The FDC Service's employees and engaged staff are expected to look at conflict in a positive way, ready to learn something new, reflect on good quality practice, improve work relationships and ultimately provide better care and education for children.

Employees are also to be aware of their responsibility to be a good role model for children, and appropriately and professionally handle conflict with work colleagues, children, parents, and other associates.

Employees should regularly reflect on *Early Childhood Australia's Code of Ethics* for guidance of appropriate behaviour when dealing with conflict. The Code of Ethics states that all team members should "*make every effort to use constructive methods to resolve differences of opinion in the spirit of collegiality.*"

Privacy and Confidentiality Management of the FDC Scheme, FDC educators, and educator assistants will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances and complaints. However, if a grievance or complaint involves a staff member or child protection issues, a relevant government agency will need to be informed. (see: Reportable Conduct Scheme in *Child Protection Policy*) [Responding to incidents, disclosures and suspicions of child abuse or harm NSW](#)

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process

Should a conflict of interest arise during a grievance or complaint that involves the Approved Provider or Nominated Supervisor, other Management will be nominated as an alternative mediator.

Our FDC Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is adhered to.

The Approved Provider/Nominated Supervisor/Coordinator will:

- ensure staff and FDC educators are aware of the person to whom complaints can be made and the processes required
- treat all grievances or complaints seriously and as a priority.
- ensure grievances or complaints remain confidential.
- ensure grievances or complaints reflect procedural fairness and natural justice.
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint.
- investigate and document the grievance or complaint fairly and impartially
- comply with legislation for any allegations or convictions of child abuse or child related misconduct of any staff member, volunteer or contractor and notify the **Office of the Children's Guardian (OCG)** as part of the Reportable Conduct Scheme [or reporting authority within your state/territory] with 7 business days. 7-day notification form

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond
- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity).
- providing the employee with a clear written statement outlining the outcome of the investigation.
- advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - management will provide a written response outlining the outcome and provide a copy to all parties involved

- if a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflects the resolution and sign in agreeance
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant.
- keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- monitor ongoing behaviour and provide support as required
- ensure the parties are protected from victimisation and bullying
- request feedback on the grievance or complaint process using a feedback form
- track complaints to identify recurring issues within the FDC Service
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised. Notification must include any allegation that sexual or physical abuse of a child has occurred or is occurring at the service. [insert details of your state/territory contact]

Family Day Care Educators and Educator Assistants will:

- be aware of the possible ramifications of their actions when dealing with staff issues
- raise the grievance or complaint directly with the person they have grievance with, in a professional manner and at an appropriate time. Both parties should try to resolve the issue and develop solutions to ensure the problem does not happen again. Discussions should be based on the principles of privacy, confidentiality, respect and open-mindedness, will not involve other educators, staff, volunteers or visitors (e.g., parents) and will take place away from children.
- if the person is unable to resolve the issue or feels uncomfortable raising the matter directly with the person concerned, the grievance or complaint must be raised with the Approved Provider/Coordinator/Management. The Approved Provider or Coordinator (or other manager) may ask for the issue to be put in writing
- provide all relevant information, outlining the issue, identifying any other person involved in the problem, and any suggested solution
- communicate openly about the issue with the relevant parties
- raise any grievance involving suspected or actual unlawful activity (including bullying) with the Approved Provider or Coordinator immediately and privately
- maintain confidentiality at all times
- maintain professionalism at all times

When the persons involved cannot resolve the grievance between them in a constructive and professional way the following steps will be taken:

The aggrieved person is to contact their immediate supervisor (Educator, Approved Provider or Coordinator) who will act as Mediator.

The Mediator will have an interview with the persons involved and clarify the facts, work out whether advice is needed from other sources, discuss options available, and help to formulate a plan of action. If an employee does not feel comfortable in approaching their supervisor, or the conflict is with their immediate supervisor, they can contact the next level of management to act as Mediator.

If an amicable resolution does not occur at this meeting the Mediator is to present a report to the next level of management outlining:

- the nature of the grievance or complaint
- the procedures followed to date
- the solution(s) sought
- the recommended plan of action or resolution.

If an agreement is reached the mediator is to present a report to the next level of management outlining:

- the nature of the grievance or complaint
- the procedures followed to date
- the solution(s) agreed upon
- the plan of action to reach this solution and review time if warranted.
- a copy of this report is to be provided to all persons involved in the grievance or complaint, and a copy is to be retained at the workplace.

Grievance/Complaint Procedures

Harmonious staff relations within the Family Day Care Scheme largely depend on staff feeling satisfied that their professionalism is being acknowledged by their involvement in appropriate decision-making processes. The quality of industrial relations is likely to be substantially better in a workplace if the decision-making processes adopted permit staff to have input into decisions that affect the nature and quality of their professional work.

Management and staff within the organisation will work together to develop and implement appropriate strategies to facilitate consultative and collaborative decision-making processes within the workplace. Where staff feel these processes have failed and are in conflict with decisions made by Management, the following procedure is to be followed:

- the aggrieved person(s) will discuss the grievance with their immediate supervisor
- the supervisor is to report the grievance to the Nominated Supervisor/Director

- the Mediator will seek advice as necessary from other sources, (e.g.: unions, Work Cover and funding bodies).
- the Mediator will then advise Management of the possible solutions.

Meetings are to be arranged with the aggrieved person(s) as necessary throughout the process. The outcome of the grievance must be reported to the aggrieved person within a week of the decision.

Resolution of Grievances

Grievances are considered resolved when all persons involved agree to a solution, when the cause of the grievance has been removed or resolved, and when arrangements have been made, if appropriate, to repair any damage and distress suffered by the persons involved. Strategies agreed upon by both parties are to be put in place to help avoid further conflict.

Unresolved Conflict

If resolution of the conflict is unsuccessful after all procedures in the *Dealing with Complaints-Policy* have been followed it may then be necessary to take disciplinary action.

Confidentiality

Mediators are to use discretion and do their utmost to maintain confidentiality. Any breach of this confidentiality could result in a charge of misconduct. However, confidentiality cannot be guaranteed in the following situations: if it is considered that someone is in danger, if disciplinary action or criminal investigation might be necessary; or if employer liability might be involved.

No action will be taken against the person about whom a formal complaint is lodged until they are made aware of any allegations so that they may respond.

Support Person

Educators and staff members are able to nominate a support person to attend any meetings with them. This person may be a union representative, impartial friend, or family member.

Educators, educator assistants, staff, volunteers and visitors will not:

- become involved in complaints or grievances that do not concern them
- raise complaints with an external complaints body, such as a court or Tribunal, without exhausting the FDC Services' grievance procedures.

Continuous improvement/evaluation

Complaints provide our FDC Service with opportunities for learning and improvement. We encourage regular and ongoing feedback from staff, children and families and the community. Our FDC Service is committed to resolving complaints through prompt investigation, open communication, and transparent

To ensure complaints and grievances are handled appropriately, the Coordinator/Approved Provider will:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Management Register* to assess that a satisfactory resolution that has been achieved
- review complaints and grievances as recorded in the *Complaints and Grievance Management Register* to ensure a pattern of similar grievances is not occurring
- review the Dealing with Complaints Policy (Staff) and other related policies annually
- review the effectiveness of the FDC Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally.
- Consider feedback from staff, FDC educators and families regarding the policy and procedure.

SOURCE

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

ACECQA-[Using Complaints to support continuous improvement](#). (2018).

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Commonwealth Ombudsman. (2009). Better practice guide to complaint handling:

<https://www.ombudsman.gov.au/publications/better-practice-guides>

Education and Care Services National Regulations. (2011).

Fair Work Australia: <https://www.fairwork.gov.au/>

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

National Quality Standard. (2017).

Ombudsman NSW [Effective Complaint Handling Guidelines](#) (2017)

Queensland Government- Guide for effective complaints management

<https://earlychildhood.qld.gov.au/legislationAndGuidelines/Documents/effective-complaints-management-guide.pdf>

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance • additional section added- ‘Continuous Improvement/Evaluation’ • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		

	<ul style="list-style-type: none"> • minor formatting edits within text • hyperlinks checked and repaired as required 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
FEBRUARY 2022	<ul style="list-style-type: none"> • additional information regarding allegations against a staff member, volunteer or contactor included- Reportable Conduct Scheme. 	AUGUST 2022
AUGUST 2021	<ul style="list-style-type: none"> • Policy name changed to meet ACECQA guidelines- <i>Dealing with Complaints Policy (Staff)</i> • additional related legislation added • related policies added • definition of 'complaint' amended to align with ACECQA's definition • inclusion of terminology- complaint added where required • notification requirement for physical or sexual abuse added • sources checked for currency and updated where required 	AUGUST 2022
AUGUST 2020	<ul style="list-style-type: none"> • Minor editing changes • reference to Reportable Conduct Scheme added • related policies added • links to Regulatory Authority added 	AUGUST 2021
JUNE 2019	New policy created for Family Day Care	AUGUST 2020

4.5 RESPONSIBLE PERSON POLICY

As per *Education and Care Services National Law and Regulations*, the Approved Provider of the Family Day Care Service must ensure that support is provided to family day care educators and educator assistants at all times education and care is provided to children by the approved provider (if the provider is an individual or a person with management or control of the service); a nominated supervisor or a person in day-to-day charge of the service.

Approved Providers are responsible for appointing a responsible person who is aged 18 years or older, has adequate knowledge and understanding of the provision of education and care to children, and have the ability to effectively supervise and manage an education and care service (ACECQA, 2017)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS

4.1	Staffing Arrangements	Staffing arrangements enhance children's learning and development
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills
4.2.2	Professional standards	Professional standards guide practice, interactions and relationships.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP

7.1	Governance	Governance supports the operation of a quality service
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS

Section 162	Offence to operate education and care service unless responsible person is present
Section 169	Offence relating to staffing arrangements
117A	Placing a person in day-to-day charge
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor
146	Nominated supervisor
154	Record of staff employed at family day care service
168	Policies and Procedures
169	Offence relating to staffing arrangements
173	Prescribed information to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider

RELATED POLICIES

Code of Conduct Policy	Respect for Children Policy
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Health and Safety Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy	Staffing Arrangements Policy Supervision Policy Work Health and Safety Policy
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PURPOSE

Our FDC Service is committed to meeting our duty of care obligations under the Education and Care Services National Law National Regulations to ensure a Responsible Person is available to provide support at all times that a Family Day Care educator is educating and caring for a child as part of the service.

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, Educators and Educator Assistants of the Family Day Care Service.

DEFINITIONS

NAME	DEFINITION
Nominated Supervisor	A person, who is at least 18 years of age, with responsibility for the day to day management of an approved service. The Nominated Supervisor has a range of responsibilities under the Law and Regulations that govern the operation of education and care services.
Responsible Person	A person, who is at least 18 years of age, has the role of Nominated Supervisor or duly appointed person. The Responsible Person has consented to be placed in day to day charge of the Service but does not take on the responsibilities of the Nominated Supervisor rather, they ensure the consistency and continuity in practices.

IMPLEMENTATION

The Approved Provider of a Family Day Care Service must ensure that when an educator is educating and caring for a child/ren, assistance from a nominated supervisor or responsible person is available at all times. For a Family Day Care Service, the nominated supervisor assumes the legal responsibilities of the day-to-day operations of the service. A record of the Responsible Person will be documented each day via the Responsible Person Register.

The requirement to be available to provide support for FDC educators includes being available to be contacted by telephone to provide advice and assistance to the FDC educator.

The name of the Responsible Person will be clearly displayed in the main entrance of the Family Day Care Service. If the Responsible Person needs to change for any reason, they will 'hand over' obligations for

the role to another qualified person at the FDC Service. It is vital that all handovers to a designated Responsible Person are documented when commencing this position throughout the day via the Responsible Person Record.

A Responsible Person can be:

- The Approved Provider or a person with management or control of the service
- A Nominated Supervisor *or*
- A person in day-to-day charge of the service (PIDTDC)

THE APPROVED PROVIDER WILL ENSURE A RESPONSIBLE PERSON:

- is nominated for the Family Day Care service and is responsible for the day-to-day management of the service and support to educators
- is over the age of 18 years
- is contactable by telephone at all times education and care is provided to children in the FDC service
- holds a current Working with Children Check (or state/territory equivalent)
- meets the minimum requirements for qualification, experiences and management capabilities
- has adequate knowledge and understanding of the provision of education and care to children, the Education and Care National Law and Regulations and National Quality Standard, the approved learning framework (EYLF), Family Assistance Law
- has the ability to effectively supervise and manage an education and care service
- is a fit and proper person and the history of the person's compliance with the National Law, Children's Services Law, Family Assistance Law are assessed
- has completed **approved** child protection training and is aware of the reportable conduct scheme and processes
- has knowledge and a commitment to the National Child Safe Standards
- has evidence of completing an approved diploma level education and care qualification or higher is considered as a requirement (**Recommended but not compulsory**).
- provides references including their current and previous employers. These will be checked, and records kept on file
- provides written consent for the position of Responsible Person and this is filed in staff records

THE APPROVED PROVIDER WILL ENSURE:

- the regulatory authority is notified 7 days prior to a **Nominated Supervisor** starting at the Service or within 14 days after the person has commenced the role through NQA IT System

- the regulatory authority is notified if the **Nominated Supervisor** changes their name or contact details; is no longer employed by the Service, has been removed from the role or withdraws their nomination.
- a Responsible Person will be removed from the position should management become aware of a matter or incident which affects the ability of the person to meet the minimum requirements of the position.
- the staff register has the name of the Responsible Person at the Service for each time children are being educated and cared for by the Service
- a Responsible Person is on duty from the time the FDC Service opens each day until the time the FDC Service closes
- ensure that the identity of the Responsible Person on duty is displayed in the main entrance of the FDC Service and is easily visible for families and visitors
- a staff record is kept recording
 - the full name, address and date of birth of the responsible person/nominated supervisor;
 - evidence of relevant qualifications
 - if applicable, evidence that the nominated supervisor is actively working towards that qualification
 - evidence of any approved training (including first aid training and child protection training)
 - verification of a Working with Children Check – identifying number and expiry date
 - written consent for the position of Responsible Person
- the **PIDTDC** interchanges with the Nominated Supervisor in their absence
- Responsible Persons are aware that they have to sign off when they have finished their duty and will ensure the Nominated Supervisor or appointed Responsible Person (PIDTIC) will sign on and take on the role.

A NOMINATED SUPERVISOR/APPOINTED RESPONSIBLE PERSON WILL:

- provide written consent to accept the role of Responsible Person/Nominated Supervisor
- sign the name and hours of responsibility on the Responsible Person register at the principal office of the Family Day Care Service
- ensure that FDC educators are aware of the name and position of the Responsible Person in charge
- inform the Approved Provider/Management in the event of illness so they can be replaced by another Responsible Person
- ensure they have a sound understanding of the role of Responsible Person
- abide by any conditions placed on the Responsible Person
- in the case of Nominated Supervisor, notify the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status

as fit and proper, such as the suspension or cancellation of a Working with Children Check card or teacher registration, or if they are subject to disciplinary proceedings

- notify management in writing, if they wish to withdraw their consent to be a Responsible Person
- the Nominated Supervisor will advise all FDC educators and staff who is the appointed Responsible Person at all times the FDC Service is open
- the Nominated Supervisor will advise all FDC educators and staff the educators who have been appointed as a Responsible Person.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Responsible Person Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

RELATED PROCEDURES AND DOCUMENTS

Responsible Person Procedure

Responsible Person Offer and Acceptance

Responsible Person Register

SOURCE

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

Australian Children’s Education & Care Authority. (2017). Responsible Person Requirements for Approved Providers: <https://www.acecqa.gov.au/sites/default/files/2018-09/ResponsiblePersonRequirements.pdf>

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

Education and Care Services National Regulations. (2011)

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

Guide to the National Quality Framework. (2018). (Amended 2020).

Revised National Quality Standard. (2018)

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	OCTOBER 2022	NEXT REVIEW DATE	OCTOBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • continuous improvement/reflection section added • minor formatting edits within text • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
OCTOBER 2021	<ul style="list-style-type: none"> • minor edits • sources checked for currency 	OCTOBER 2022
FEBRUARY 2021	<ul style="list-style-type: none"> • additional information related to records for Responsible Person added • modifications for better flow of dot points • related procedures and documents added 	OCTOBER 2021
OCTOBER 2020	<ul style="list-style-type: none"> • Modifications made to ensure practices relate to FDC services as per regulatory authority • Additional standards added- QA7 • related National Law added • inclusion of knowledge of Family Assistance Law, CCS, Child Safe Standards, staff records • Staff records to be kept • Additional sources added 	OCTOBER 2021
OCTOBER 2019	<ul style="list-style-type: none"> • Related policies added • Information checked for currency and updated 	OCTOBER 2020
OCTOBER 2018	<ul style="list-style-type: none"> • Grammar, punctuation and spelling edited. • References corrected, added &/or updated. • Incorrect references deleted & replaced. • Sources/references alphabetised. • Additional information added to points and sentences reworded. 	OCTOBER 2019
MARCH 2017	Modifications made to adhere with Family Day Care requirements	MARCH 2018

4.6 RECRUITMENT POLICY

Our Family Day Care (FDC) Service aims to implement a robust, well-planned recruitment process to ensure we select the best person for the position and the needs of our service. We aim to engage employees who are suitably qualified, experienced and passionate about the early years. Our recruitment policy outlines our processes to ensure they are aligned with legislative obligations, our FDC Service's values and support diversity and inclusion.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.1	Organisation of Educators	The organisation of educators across the Service supports children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of Educators at the Service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.
QUALITY AREA 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.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
4	Definitions
84	Awareness of child protection law
Part 4.4	Staffing Arrangements
Division 7	Approval and determination of qualifications
Division 9	Staff and educator records—centre-based services
Division 10	Register of family day care educators, co-ordinators and assistants and records of family day care service

RELATED LEGISLATION

NSW Anti-Discrimination Act 1977	Fair Work Act 2009
Federal and State Occupational Safety and Health Legislation	Federal and State Equal Opportunity Legislation and any other relevant industrial awards
Education and Care Services National Law Act 2010	Children and Young Persons Act 1998
Sex Discrimination Act	Child Care Subsidy Secretary's Rules 2017
Family Law Act 1975	A New Tax System (Family Assistance) Act 1999
Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

CCS Personnel Policy	Engagement and Registrations of FDC Educators
Child Safe Environment Policy	Engagement or Registration of FDC Educator Assistants Policy
Child Protection Policy	Governance Policy
Code of Conduct Policy	Privacy and Confidentiality Policy
Dealing With Complaints Policy	Staffing Arrangements policy

PURPOSE

We aim to ensure the most suitability qualified, experienced and reliable staff are employed at our Family Day Care (FDC) Service. We are committed to ensuring we meet all legislative and regulatory requirements including the Education and Care Services National Law, Children and Young Persons Act, Fair Work Act and Anti-Discrimination Act.

Our FDC Service is committed to be a child safe Early Education and Care Service and uphold the 10 Child Safe Standards as recommended by the National Office for Child Safety and our recruitment and screening processes play a vital role in protecting children from harm. [If applicable, reference Child Safe Standards legislation in your State/Territory]

Our FDC Service values workplace diversity and inclusion and we strongly encourage applicants from Aboriginal and Torres Strait Islanders, women, and individuals with disability. Recruitment and selection of staff will be guided by the requirements of relevant legislation, issues of equity and diversity, qualification, knowledge and skills, workforce participation and experience.

SCOPE

This policy applies to staff, educators, educator assistants, coordinators, approved provider, nominated supervisor and management of the Family Day Care Service.

RECRUITMENT DECISIONS

The Approved Provider or assigned nominee will approve all recruitment decisions as outlined in this Recruitment Policy and Recruitment Plan Procedure. (*See Recruitment Plan*). Recruitment decisions will be based on the need and requirements of the service and will consider the following:

- ensuring the FDC Service meets all staffing requirements as per Education and Care Services National Law and National Regulations
- any resignation of existing Coordinators and educators

The recruitment processes will be consistent, transparent, professional and timely. Any grievances relating to the recruitment procedure will be addressed as per the *Dealing with Complaints Policy*. All personal information regarding recruitment will be treated with the strictest confidence.

FDC educators and educator assistants will be recruited as per the *Engagement and Registrations of FDC Educators* and *Engagement or Registration of FDC Educator Assistants Policy*.

Selection criteria for each vacant position will be determined before advertisement and will take the following into consideration:

- position title
- qualifications required for the position
- experience required for the position
- position description/skills required for the position
- conditions of employment

- mandatory employment screening requirements including verifying Working With Children Check (WWCC), where applicable National Police Criminal History checks, immunisation requirements [including mandatory COVID-19 vaccination requirements, check your state/territory] and conducting reference checks for every candidate to ascertain the candidate's attitudes and behaviours in previous child-related roles.
- clear expectations about commitment to child safety (Child Safe Standards)

Comprehensive job descriptions for each advertised position will be available for all applicants. Any applicants deemed unsuitable will be advised within an appropriate time frame

ADVERTISEMENTS

Information about the position and the FDC Service will be provided to potential applicants which includes:

- job title
- job description
- location
- hours of work
- salary (award/ above award)
- Service Philosophy
- operation hours
- selection criteria relating to the position available
- how to apply for the role
- a commitment to providing a safe environment for children
- closing date for applications
- contact information for further information
- immunisation requirements (including mandatory COVID-19 vaccination requirements, check your state/territory for requirements)
- WWCC requirements [check state/territory requirements]

Vacant positions may be advertised internally to encourage career advancement and opportunity. External advertisements may be placed through relevant media and networks including social media, newspaper and employment services [enter preferred method- SEEK, LinkedIn, Care for Kids].

Potential applicants will be asked to complete an employment application as part of their application for the position available. *See Employment Application*

SELECTION PANEL AND INTERVIEWS

A selection panel will be determined for applicants short listed for an interview. The selection panel will consist of at least 2 people. Our FDC service will use the interview guide and questionnaire when preparing for interviews. (*See Interview Guide and Questionnaire*)

Applicants who require support or access provisions, are encouraged to advise this at the time of their application, to ensure appropriate assistance is provided throughout the recruitment process.

Questions will be prepared in advance of the interview and applicant responses will be recorded during the interview. Each applicant will be asked the same questions to ensure fair and equitable treatment of all applicants. Interviews will be conducted in a private space and confidentiality will be maintained at all times. Applicants will be provided an opportunity to ask questions relating to the service and position at the end of the interview.

CONFLICT OF INTEREST

Any person on a selection panel must disclose to the Approved Provider or person organising the interview process if there is a conflict of interest at the time of reviewing the applications. A conflict of interest may arise if the applicant is a personal friend or past or present close work colleague.

Management must promote transparency and accountability, promote integrity and impartiality during the employment process and therefore consider if the conflict of interest poses a risk to the consistency of the application process.

PRE-EMPLOYMENT SCREENING – PROBITY CHECKS

Effective pre-employment screening ensures our FDC Service is compliant to legislative and regulatory requirements and aims to ensure we engage staff who have the skills, experience, qualifications and general 'fit'.

All preferred candidates will undergo appropriate pre-employment checks including reference checks, Working With Children Checks (WWCC), immunisation status checks including mandatory COVID-19 vaccination requirements, [\[check your state/territory for requirements\]](#) and where applicable National Police criminal history checks before an offer of employment is recommended. Measures should be in place to ensure probity checks are completed by a person or persons who have no prior professional relationship with the applicant to mitigate the perception of bias in the recruitment process.

REFERENCE CHECKS

Verbal reference checks will be conducted over the phone for preferred applicants. Reference check questions will be determined prior to the check conducted and will establish the relationship the referee has with the applicant.

At least 2 references are to be provided for a reference check. Where possible references should be from the immediate previous employer. The reference checks will ascertain, where possible, the applicant's attitudes and behaviours in previous child-related roles and ascertain whether the applicant has ever been the subject of complaints.

WWCC/POLICE CHECKS

Working with Children Check legislation aims to prevent people who pose a risk from working with children as paid employees or volunteers. All employees, volunteers and students must undergo a Working with Children Check (or its equivalent) prior to working at the service. Employees, volunteers or students that are unable to provide a copy of a validated WWC Check (or equivalent) prior to the start of engagement or employment will not be able to undertake any work-related activity within the service.

Please check information as related to each relevant state/territory and delete irrelevant information.

NEW SOUTH WALES A Working With Children Check (WWCC) clearance is required for all employees, volunteers and students. The service will verify the WWCC and ensure the employee, student or volunteer is cleared to work with children online at the Office of the Children's Guardian website in NSW prior to ALL students, volunteers and employees undertaking work at the service. [Office of the Children's Guardian](#)

AUSTRALIAN CAPITAL TERRITORY A Working with Vulnerable People (Background Checking) registration is required for all employees, volunteers and students. [Access Canberra](#)

NORTHERN TERRITORY All employees, volunteers and students must apply for a Working with Children Clearance, also called an Ochre Card. The service will keep a record of when a staff clearance expires and can check a person's clearance online. The service can apply for a short-term exemption to start working with children while the persons application is being processed by SAFE NT. [Northern Territory Government](#)

QUEENSLAND All employees, volunteers and students are required to apply for a Blue Card before beginning work. The service will check if an individual's blue card or exemption card is still valid and does

not have any relevant criminal information attached to it. Employees, volunteers or students under the age of 18 will need to apply for a student Blue Card. [Blue Card Services](#)

SOUTH AUSTRALIA A Working with Children Check is required for all employees, volunteers and students over the age of 14. The service will register with the Screening Unit to check individual applicants before they begin employment or engagement at the service. [DHS Screening Unit](#)

TASMANIA A Working with Children Registration is compulsory for employees, volunteers and students. The status of the registration needs to be verified online by employers before new employees, volunteers or students can start work. [Consumer, Building and Occupational Services Tas Government](#)

VICTORIA The Working with Children Check is required prior to engagement of work-related activities for employees, volunteers and students. Employees, volunteers or students under the age of 18 may be able to apply for a Working With Children Check. [Working With Children Check Victoria](#)

WESTERN AUSTRALIA A Working With Children Check (WWC Check) is compulsory for employees, volunteers and students. The WWC Check includes a National Police History Check as part of the clearance. The service will validate WWC Checks of any new employee, volunteer or student. [Working With Children Check WA](#)

PRODA BACKGROUND CHECKS

Employees involved in the administration of Child Care Subsidy are required to undertake additional background checks. (*See CCS Personnel Policy*).

OFFER OF EMPLOYMENT

An offer of employment will be made to the successful applicant following careful consideration by the selection panel. A confirmation of employment letter will be provided to successful applicants upon acknowledgment. (*See Confirmation of Employment Letter*). Successful applicants are required to provide documentation regarding qualifications and immunisations and complete an employee immunisation record. (*See New Employee Documentation Checklist and Employee Immunisation Record*.) A written employment contract will be provided to the successful applicants detailing the position, hours of shift, Award information, wages and salary, date and time of commencement, contact person, probationary period.

Applicants who are unsuccessful will be notified within an appropriate time frame and offered feedback regarding their application.

PROBATIONARY PERIOD AND INDUCTION

Each new employee is subject to a Probationary Period of **three (3)** months. This ensures assessment for both the employee and service to ensure suitability of the role for the employee. During this time employees will receive advice, training and guidance to help them become familiar with and competent in, performing the work they have been appointed to do. The appointment is subject to the satisfactory completion of the Probationary period which itself is subject to termination during any stage, by either party, upon notice in writing, or by payment in lieu of notice.

Our FDC Service is committed to providing a comprehensive induction program to ensure the smooth integration of new employees. The Approved Provider or assigned nominee will support the new employee and help them to understand the organisational structure, how decisions are made and communicated and what role they will have in the decision-making process. An induction checklist will be used to support this process, which explains an employee's responsibility to know the policies, procedures and practices within our Service and their duty of care obligations to ensure the safety and wellbeing of all children. Induction will include relevant information on child safe practices adhering to the Child Safe Standards, Code of Conduct, strategies that identify, assess and minimise risks to children and mandatory reporting procedures.

(See New Employee Induction Checklist).

Continuity in care within the FDC Service is paramount. By orientating staff professionally and correctly, it guarantees the consistency of care not only within the room but also across the entire FDC Service. New employees will undergo regular supervision appraisals, mentoring, training and development as part of the orientation process.

CHILD CARE CENTRE DESKTOP - RELATED HUMAN RESOURCES

Code of Conduct	New Employee Induction Checklist
Confirmation of Employment Letter	New Educator Orientation - Before Day One
Employment Application	New Educator Orientation - Critical First Week
Employee Immunisation Record	New Educator Orientation Survey
Interview Guide and Questionnaire	Recruitment Plan
New Employee Documentation Checklist	Staff Handbook

SOURCE

- ACT Government. Access Canberra. (2020). Working With Vulnerable People (WWVP) Registration https://www.accesscanberra.act.gov.au/app/answers/detail/a_id/1804/kw/working%20with%20children
- Australian Government Department of Education Skills and Employment. Child Care Provider Handbook (2018) (2022) <https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>
<https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook>
- Australian Government. Fair Work Ombudsman. (2020). Hiring employees <https://www.fairwork.gov.au/find-help-for/small-business/hiring-employees>
- Australian Human Rights Commission. Child Safe Organisations. <https://humanrights.gov.au/our-work/childrens-rights/projects/child-safe-organisations>
- Commission for children and young people Being a child safe organisation <https://ccyp.vic.gov.au/child-safety/being-a-child-safe-organisation/>
[Creating child safe organisations page](http://providers.dhhs.vic.gov.au/creating-child-safe-organisations) of the Department of Health and Human Services' Service Providers: <http://providers.dhhs.vic.gov.au/creating-child-safe-organisations>
- Government of South Australia Department of Human Services (2020). Working With Children Check: <https://screening.sa.gov.au/home>
- Government of Western Australia (2020). Working With Children Check <https://workingwithchildren.wa.gov.au/>
- Northern Territory Government (2020). Working With Children Clearance <https://nt.gov.au/emergency/community-safety/apply-for-a-working-with-children-clearance>
- NSW Department of Education. (2021). Implementing the Child Safe Standards: A guide for early childhood education and outside school hours care services.
- NSW Government. (2020). Office of the Children's Guardian: <https://ocg.nsw.gov.au/>
<https://www.kidsguardian.nsw.gov.au/>
- NSW Government. (2020). Office of the Children's Guardian: A guide to the Child Safe Standards https://ocg.nsw.gov.au/sites/default/files/2021-12/g_CSS_GuidetotheStandards.pdf?Embed=Y
- Queensland Government Blue Card Services Queensland (2020). <https://www.qld.gov.au/law/laws-regulated-industries-and-accountability/queensland-laws-and-regulations/regulated-industries-and-licensing/blue-card-services>
- Tasmania Government Consumer, Building and Occupational Services Registration to work with vulnerable People: http://www.justice.tas.gov.au/working_with_children
- Victoria Government. Business Victoria. (2020). Staff recruitment <https://www.business.vic.gov.au/hiring-and-managing-staff/staff-recruitment/write-a-contractual-letter-of-offer>
[Western Australian Education and Care Services National Regulations](https://www.education.vic.gov.au/education-services/nurturing-childcare-and-education-services/nurturing-childcare-and-education-services-national-regulations)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> Update of Department name from Department of Education, Skills, and Employment to Department of Education policy maintenance minor formatting edits within text hyperlinks checked and repaired as required link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE

NOVEMBER 2021	New Policy developed for FDC Services	AUGUST 2022
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4.7 PROBATION INDUCTION AND ORIENTATION POLICY (FDC EDUCATOR)

Our Family Day Care Service aims to implement a probation and induction orientation program to ensure FDC educators and educator assistants (educators) are aware of their roles and responsibilities to enable effective performance within their employment at Nurture Childcare and Education Services. A formal induction and orientation program provides an opportunity for new educators to have an understanding of the values and organisational culture within our FDC Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children’s learning and development.
4.1.1	Organisation of educators	The organisation of educators across the service supports children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other’s strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.
QUALITY AREA 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.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2.3	Development of professionals	Educators, co-ordinators and staff members’ performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
4	Definitions
84	Awareness of child protection law
90	Medical conditions policy
Part 4.4	Staffing Arrangements
Division 7	Approval and determination of qualifications
Division 10	Register of family day care educators, co-ordinators and assistants and records of family day care service

RELATED LEGISLATION

NSW Anti-Discrimination Act 1977	Fair Work Act 2009
Federal and State Occupational Safety and Health Legislation	Federal and State Equal Opportunity Legislation and any other relevant industrial awards
Education and Care Services National Law Act 2010	Children and Young Persons Act 1998
Sex Discrimination Act	Enter legislation relevant to your state/territory

RELATED POLICIES

CCS Personnel Policy Child Protection Policy Child Safe Environment Policy Code of Conduct Policy	Dealing with Complaints Policy Privacy and Confidentiality Policy Recruitment Policy Staffing Arrangements Policy
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PURPOSE

Our Family Day Care Service aims to engage and register educators who are appropriately qualified, are passionate early childhood educators and are committed to ongoing training and professional learning with the support of our coordinators and management team. We are committed to ensuring we meet all legislative and regulatory requirements including the Education and Care Services National Law and National Regulations, Children and Young Persons Act, Fair Work Act and Anti-Discrimination Act. The National Quality Framework states that a comprehensive induction process plays a critical role in creating and maintaining a positive and professional culture. By providing an efficient and effective induction and orientation program we aim to ensure educators have the skills and knowledge to perform their roles confidently.

An effective induction and orientation program provides a formal process to provide new educators with information regarding service policies, procedures and practices. An induction and orientation program is available for all new educators and educators returning to work after a period of absence to ensure a smooth integration into our FDC Service.

This policy is to be used in conjunction with our Engagement or Registration of FDC Educators Policy.

SCOPE

This policy applies to staff, coordinators, educators, educator assistants, Approved Provider, Nominated Supervisor and management of the FDC Service.

CHILD SAFE STANDARDS

Our Family Day Care Service is committed to be a child safe Education and Care Service and aims to implement the 10 Child Safe Standards as recommended by the National Office for Child Safety. Our robust recruitment, probation and induction/orientation processes play a vital role in protecting children from harm.

[insert related Child Safe Standards legislation for your state/territory.]

PROBATIONARY PERIOD

Family Day Care educators and educator assistants are engaged by the FDC Service as an independent self-employed contractor. All new educators are subject to a probationary period of **three (3) months**. This ensures assessment for both the educator and service to ensure suitability of the role for the educator.

The probationary period is a condition of employment for all new educators. During this time educators will receive advice, training and guidance to help them become familiar with and competent in, performing the work they have been appointed to do. The appointment is subject to the satisfactory completion of the probationary period which itself is subject to termination during any stage, by either party, upon notice in writing, or by payment in lieu of notice.

During the probationary period an induction and orientation program will be initiated with the new educator. This allows the new educator an opportunity to understand the expectations and standard of conduct required to pass the probationary period.

Probationary meetings will be scheduled within the first week of engagement and at the end of the probationary period, feedback will be provided to the educator regarding performance. The probation

meeting is also an opportunity for the new educator to ask any questions or raise any concerns. A Probationary Meeting checklist and record will be completed to document the meeting and placed into the educator file. *(See Probation Meeting Review)*

The probationary period may be extended at the end of three (3) months for an additional three (3) months if any conduct or performance concerns are identified. If concerns are raised during the probationary period, they will be addressed during the probationary meeting and documented. If a decision to end the educator's engagement contract within the probation period is made, the educator will receive the appropriate notice as per engagement contract and receive the termination of engagement in writing. *(See Probation Letters)*

The educator may terminate the engagement contract within the probationary period by providing the appropriate notice in writing as per engagement contract. The Approved Provider or assigned nominee may terminate the engagement contract within the probationary period by providing the appropriate notice as per engagement contract. A termination of engagement letter will state the reason of termination, notice period and the date of the educators last day of engagement. *(See Probation Letters)*

At the end of the probationary period, the Approved Provider or appointed nominee will advise if the educator has successfully completed the probationary period and provide a letter confirming their ongoing engagement. *(See Probation Letters)*

INDUCTION AND ORIENTATION

Our Family Day Care Service is committed to providing a comprehensive induction program to ensure the smooth integration of new educators. The Approved Provider or assigned nominee will support the new educator and help them to understand the organisational structure, how decisions are made and communicated and what role they will have in the decision-making process.

An induction checklist will be used to support this process, which explains an educator's responsibility to know the policies, procedures and practices within our FDC Service and their duty of care obligations to ensure the safety and wellbeing of all children.

Induction will include relevant information on child safe practices adhering to the Child Safe Standards, Code of Conduct, Child Information Sharing Schemes (CISS) and strategies that identify, assess and minimise risks to children and mandatory reporting procedures including Reportable Conduct Scheme.

[relevant to state/territory legislation]

Prior to the first day of operation the Approved Provider or assigned nominee will ensure the new educator has completed all relevant paperwork as per New Employee Documentation checklist (*See New Educator Documentation Checklist*).

The *New Educator Orientation resources* are available to ensure all areas of the service are covered in the first week. The new educator will be encouraged to complete the *Educator Orientation Survey* at the end of their probation period. (*See New Educator Orientation – Before Operation and Educator Orientation Survey*).

The induction and orientation program will work alongside the probation period. It is expected the induction and orientation program will be performed during the **three (3) month** probation period. The new educator will be required to read **and become familiar with** key Service policies and procedures as part of the induction and orientation program. These include, but are not limited to, the following key policies:

- Child Protection Policy
- Child Safe Environment Policy
- Code of Conduct Policy
- Behaviour Guidance Policy
- Educational Program Policy
- Work Health and Safety Policy
- Privacy and Confidentiality Policy
- Emergency Evacuation Policy
- Medical Conditions Policy
- Incident, Injury, Trauma and Illness Policy
- Dealing with Complaints Policy
- **Reportable Conduct Scheme Policy (VIC)**

During the induction and orientation program, new educators will be advised of any children with a health care need, allergy or relevant medical condition. The Service Philosophy, Educator Handbook, Code of Conduct and the Early Childhood Code of Ethics will be shared with the new educators during the induction and orientation program.

All new educators will be appropriately trained and informed of workplace health and safety policies and procedures before commencing as a FDC educator, such as hazard and incident forms and reporting

procedures, use of PPE equipment, purchase and location of fire safety equipment, emergency and evacuations procedures (including lockdowns), location and use of Safety Data Sheets (SDS), any WorkCover information, and purchase and location of first aid kits as described in the *New Employee Induction Checklist*.

As part of the induction and orientation program, the Approved Provider or assigned nominee will provide opportunities for discussing and unpacking the following key documents:

- Education and Care Services National Law and National Regulations
- The National Quality Standard
- Service Policies and Procedure Folder
- Belonging, Being and Becoming: The Early Years Learning Framework
- My Time Our Place: Framework for School Age Care in Australia
- Early Childhood Australia- Code of Ethics
- Childcare Provider Handbook
- National Principles Child Safe Organisations -Child Safe Standards- [or Child Safe Standards legislated in your state/territory]
- Reportable Conduct Schemes
- Child Information Sharing Scheme (CISS) and Family Violence Information Sharing Schemes (FVISS) [relevant to state/territory legislation]

CHILDCARE CENTRE DESKTOP- RELATED HUMAN RESOURCES

Code of Conduct	New Educator Orientation Survey
New Educator Documentation Checklist	Probation Meeting Review
New Educator Induction Checklist	Probation Letters
New Educator Orientation - Before Operation	Educator Handbook

SOURCE

Australian Government. Fair Work Ombudsman. (2020). Hiring employees <https://www.fairwork.gov.au/find-help-for/small-business/hiring-employees>

Australian Human Rights Commission. Child Safe Organisations. <https://humanrights.gov.au/our-work/childrens-rights/projects/child-safe-organisations>

Early Childhood Australia Code of Ethics. (2016).

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

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

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

NSW Government. (2020). Office of the Children’s Guardian: A guide to the Child Safe Standards
<https://www.kidsguardian.nsw.gov.au/ArticleDocuments/838/ChildSafeStandardsGuide.pdf.aspx?Embed=Y>
https://ocg.nsw.gov.au/sites/default/files/2021-12/g_CSS_GuidetotheStandards.pdf?Embed=Y
 Victoria Government. Business Victoria. (2020). Staff recruitment <https://www.business.vic.gov.au/hiring-and-managing-staff/staff-recruitment/write-a-contractual-letter-of-offer>
 Victoria Government. Business Victoria. (2020). Staff induction program and probation review
<https://www.business.vic.gov.au/hiring-and-managing-staff/staff-recruitment/new-staff-induction-program-and-probation-period>
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
JANUARY 2022	<ul style="list-style-type: none"> • Sources checked for currency • Minor edits throughout policy • Additional section added for Continuous Improvement • Removed Probation, Induction and Orientation overview from policy (this is available as separate checklists) • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JANUARY 2022	<ul style="list-style-type: none"> • New Policy Draft 	NOVEMBER 2022	

4.8 CODE OF CONDUCT POLICY

We believe in forming an inclusive and welcoming environment and workplace by providing experiences that motivate and facilitate personal growth and development of our Family Day Care educators, educator assistants and Coordinators. The values that underpin our work ethic includes equality, respect, integrity and responsibility. Our Service is committed to adhere to the ECA Code of Ethics (2016) which is based on the principles of the United Nations Convention on the Rights of the Child (1991) and provides a framework for the reflection about the ethical responsibilities of early childhood professionals.

Our Family Day Care (FDC) Service is committed to creating and maintaining an environment that promotes the safety of all children and embeds the [National Principles for Child Safe Organisations](#). All staff and volunteers are responsible for promoting 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 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
4.2.2	Professional Standards	Professional standards guide practice, interactions and relationships.
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purpose	A statement of philosophy guides all aspects of the service's operations.
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
168	Education and Care Services must have policies and procedures
182	Confidentiality of records kept by family day care educator

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Child Safety and Wellbeing Policy (VIC services) Dealing with Complaints Policy Interactions with Children, Family and Staff Policy	Professional Development Policy Record Keeping and Retention Policy Recruitment Policy Respect for Children Policy Responsible Person Policy Social Media Policy Staffing Arrangements Policy
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Out of hours babysitting Policy Photograph Policy Privacy and Confidentiality Policy	Tobacco, Drug and Alcohol-Free Policy Work Health and Safety Policy
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PURPOSE

Our Family Day Care Service aims to establish a common understanding of workplace standards and ethics expected of all employees of the Service. We aim to ensure positive working relationships are formed between all educators, educator assistants, and management, promoting dignity and respect by avoiding behaviour which is or may be perceived as harassing, bullying or intimidating. Educators, educator assistants and management will at all times conduct themselves in an ethical manner and strive to ensure that all interactions are positive and respectful and are in accordance with the Service's philosophy.

Our FDC Service takes every reasonable effort to accommodate the diversity of all children in implementing the Child Safe Standards. We are committed to the safety and wellbeing of children and young people. We recognise the importance of and responsibility for, ensuring our Service provides a safe and supportive environment which respects and fosters the rights and wellbeing of children in our care. We are dedicated in promoting cultural safety for Aboriginal children, cultural safety for children from culturally and/or linguistically diverse backgrounds and to providing a safe environment for children with a disability. **[Adjust the above to your State/Territory's requirements for Child Safe Standards as required]**

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, educators, educator assistants, **students, families, children and visitors** of the Family Day Care Service.

IMPLEMENTATION

The Family Day Care Service, educators, educator assistants, staff, volunteers and students will adhere to the Early Childhood Australian Code of Ethics, Education and Care National Regulations and the National Quality Standard, Child Safe Standards and FDC Service policies and procedures at all times, promoting positive interactions within the Service and the local community.

RESPECT FOR PEOPLE AND THE SERVICE

- Our Family Day Care Service is committed to the Service philosophy and values, inclusive of best practice in early childhood education and building positive partnership with children, families and FDC educators
- Our FDC Service **will develop/has developed** a *Statement of Commitment to Child Safety and Wellbeing* to demonstrate a strong culture of child safety within the Service
- Employees and management adhere to our Child Safe policies including *Child Safe Environment Policy, Child Protection Policy, Reportable Conduct Policy (Vic Services) and Child Safety and Wellbeing Policy (Vic Services)* at all times and take all reasonable steps to protect children from abuse and harm
- Employees and management understand that *child safety is everyone's responsibility*
- Effective, open, and respectful reciprocal communication and feedback between the FDC Service, educators, children, families, and management is conveyed.
- It is important to treat colleagues, children, and families with respect. Bullying or insulting behaviour, including verbal and non-verbal aggression, abusive, threatening, or derogatory language or intimidation towards other educators, educator assistants, children, visitors, or families is unacceptable and will not be tolerated.
- Educators are committed to valuing and promoting the safety, health, and wellbeing of educator assistants, volunteers, children, and families.
- Educators are committed to an Equal Opportunity workplace and culture which values the knowledge, experience, and professionalism of all educators and managers, and the diverse heritage of our families and children of the FDC Service.
- FDC educators and management respect the privacy of children and their families by keeping all information about child protection concerns confidential and only share information to promote child wellbeing or safety and /or manage risk of family violence with other Information Sharing Entities (IES) as per state/territory legislation.
- Our FDC Service will conduct a comprehensive probation and induction orientation program for all new employees, FDC educators, volunteers and students to include awareness of their roles and responsibilities in relation to Child Safe practices
- It is important employees and management listen and respond to the views and concerns of children particularly if they are telling you that they or another child has been abused or they are worried about their safety or the safety of another.

EXPECTATIONS OF FAMILY DAY CARE EDUCATORS/ EDUCATOR ASSISTANTS

Educators will:

- ensure their work is carried out proficiently, harmoniously, and effectively. They will act in a professional and respectful manner at all times whilst at work, giving their full attention to their responsibilities and adhering to all Service policies, procedures, Child Safe Standards, Education and Care Services National Law and National Regulations, and the National Quality Standard
- act honestly and exercise attentiveness in all service operations. They will carry out all lawful directions, retaining the right to question any direction which they consider to be unethical. If uncertain they can seek advice from the Coordinator or Approved Provider
- uphold the rights of children and always prioritise their needs
- treat all children and young people with respect
- promote the wellbeing and safety of children and take all reasonable steps to protect children from abuse
- provide adequate supervision of children at all times
- understand their legislative responsibility as mandatory reporters to report any allegation of child abuse, neglect or possible risk of harm to management or Child Protection authority
- understand their legislative responsibility to report any inappropriate action of any other employee that involves children or young people to management as part of the *Reportable Conduct Scheme*
- participate in all compulsory training, including any updates of Child Protection Law and reporting processes
- report any instances of suspected corrupt conduct, mismanagement of government funds or other serious allegation to the appropriate agency (tipoffline@dese.gov.au tipoffline@education.gov.au)
- follow and comply with the *Dealing with Complaints Policy* when matters are raised regarding Child Safety and Wellbeing
- have a solid understanding of the FDC Service's policies and procedures, Child Safe Standards and the ECA Code of Ethics. If uncertain about the content of any policy or procedure with which they must comply, FDC educators should seek clarification from the Coordinator or Approved Provider
- be courteous and responsive when dealing with other educators, staff, students, visitors, children, and families
- work collaboratively with other FDC educators, coordinators, families and members of the community with courtesy, respect and recognise and value diversity
- be mindful of their duty of care towards themselves and others
- be positive role models for children at all times
- ensure compliance with a zero tolerance of racism within the FDC Service
- adhere to the *Tobacco, Drugs and Alcohol-Free Policy*
- respect the confidential nature of information gained about each child enrolled in our Service

- engage in critical reflection to inform individual and collective decision making and ensure continual improvement, including a review of Child Safe policies and procedures.

Educators and educator assistants will NOT

- use abusive, derogatory or offensive language
- engage in conduct that is detrimental to the professional standing of our FDC Service, is improper or unethical, is an abuse of power, or harasses, discriminates against, victimises, humiliates, intimidates, or threatens other educators, staff members, volunteers, or visitors at the Service, either directly or indirectly via information technology such as email, text or social media. Additionally, they will not support those who do this.
- condone or participate in illegal, unsafe or abusive behaviour towards children, including physical, sexual or psychological abuse, ill-treatment, neglect or grooming
- exaggerate or trivialise child abuse issues
- fail to report information to the approved provider if they know a child has been abused
- engage in unwarranted and inappropriate touching involving a child
- persistently criticise and/or denigrate a child
- verbally assault a child or create a climate of fear
- encourage a child to communicate with me in a private setting
- share details of sexual experiences with a child
- use sexual language or gestures in the presence of children
- discriminate against any child, because of culture, race, ethnicity or disability
- put children at risk of abuse- refusing food/play, making threats, exposing children to inappropriate language or material (movies, internet, photos)
- show preferential behaviour towards any child
- accept an offer of money, regardless of the amount
- seek or accept a bribe
- acquire personal profit or advantage because of their position (e.g., through the use of FDC Service information)
- approach other employees, managers or visitors directly on individual matters that are irrelevant to them
- engage in any action in breach of our *Privacy and Confidentiality Policy*, including but not limited to disclosure of confidential Service or customer information, or the improper or illegal use of that confidential information. Authorised persons will only access confidential information for the purpose intended.

- engage in or support any action in breach of FDC Service policies and/or procedures.

EXPECTATIONS OF FAMILY DAY CARE COORDINATORS, NOMINATED SUPERVISOR AND THE APPROVED PROVIDER

In addition to the above responsibilities, the FDC coordinator and Approved Provider are expected to:

- promote a collaborative and interconnected Service by developing positive working environments where educators can contribute to the ongoing continuous improvement of the overall Family Day Care Service
- promote leadership by working with educators and providing opportunities for professional development and growth
- provide flexible opportunities to ensure educators and educator assistants can participate in meetings and professional development
- provide ongoing support and feedback to educators and educator assistants
- keep educators informed about essential information and changes and make documents readily accessible to them
- ensure copies of the ECA Code of Ethics and Child Safe Standards are available to educators and families
- model professional behaviour at all times
- implement supportive and effective communication systems, consulting educators in appropriate decision making
- take appropriate action if a breach of the code of conduct occurs
- share skills and knowledge with educators
- give encouragement and constructive feedback to educators, respecting the value of different professional approaches
- follow recruitment policies and procedures to ensure all potential candidates undergo appropriate background checks, including Working With Children Checks
- model and provide guidance to educators and staff to ensure compliance with a zero tolerance of racism within the FDC Service.

REPORTING A BREACH IN THE CODE OF CONDUCT

- all educators and educator assistants are required by law to undergo a Working with Children Check, which is verified by the Approved Provider to ensure it is valid and current
- as mandatory reporters, all educators and educator assistants must report possible risk of harm to children or young persons to the Approved Provider and/or Child Protection

- educators will report any concerns they may have about inappropriate actions of any colleague that involves children or young people to the Approved Provider as per the Reportable Conduct Scheme
- management will report any allegations or child related misconduct to Child Protection (or reporting authority within your state/territory) **Department of Communities and Justice and the Office of the Children’s Guardian in NSW**. **[Enter mandatory reporter details for your state/territory]**.

ADHERING TO SERVICE CONFIDENTIALITY

- Unless authorised to do so by legislation, educators and educator assistants must not disclose or use any confidential information without appropriate approval
- Lawful sharing of information with other parties must be to promote the wellbeing or safety of children and adhere to guidelines under Child and Family Information Sharing Schemes **(if applicable in your state/territory)**
- Educators will respect individual’s rights to privacy
- All educators and educator assistants are to ensure that confidential information is not accessed by unauthorised people.
- Educators and educator assistants will adhere to the *Service’s Privacy and Confidentiality Policy*.

RECORD KEEPING

- Educators will maintain full, accurate, and honest records as required by the Education and Care Services National regulations
- The Approved Provider of the FDC Service has a responsibility to ensure that educators comply with their record keeping obligation outlined in the *Record Keeping and Retention Policy*. (Regulation 183)

DUTY OF CARE

- The Approved Provider, coordinator and educators have a responsibility to take reasonable care for the health and safety of themselves and others at the workplace to enable compliance with the work health and safety legislation outlined in the *Work Health and Safety Policy*.
- Duty of Care relates to both physical and psychological wellbeing of individuals
- Educators and educator assistants must provide adequate supervision of children at all times to ensure the 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.

APPROPRIATE USE OF COMMUNICATION AND SOCIAL NETWORKING SITES

- As a Child Safe Organisation, our FDC Service has the responsibility to ensure children and educators are protected from harm when they engage in with digital technology including social media
- Strict guidelines for the use of social media are outlined in our *Social Media Policy*
- The FDC Service offers its current enrolled families and educators a **Facebook page** as a communication tool. The account is administered by management of the FDC Service. **[delete or modify if this is not appropriate to your context]**
- The Administrator controls the content on the page and ensures that the postings are relevant and respectful of the Service, the children, the staff, families, and greater community.
- FDC Educators and other staff members who have a personal Facebook account are not permitted to post any negative comments relating to the Service, children, colleagues, or families. If they choose to 'like' the Service's page they have a responsibility to ensure that their profile picture is an appropriate representation of an early childhood educator. If it is not, we request that they do not 'like' the page.
- Educators are to use their own personal discretion when adding a family of the Service as a 'friend' on Facebook. The FDC Service does not recommend educators or other staff members to add families of the Service as they will be seen still as a representative of the Service and held to the Service's Code of Conduct on all posts on their private 'wall' if families have access.
- Families are asked in our *Social Media Policy* to respect that educators may have a personal policy on adding families due to their professional philosophy and that the FDC Service does not recommend educators to have families as friends on their private account.
- Educators are not permitted to request the 'friendship' of families from the FDC Service
- Educators may be permitted to establish a separate social media account for their business upon approval by the FDC Service Approved Provider
- FDC educators must ensure families have provided written permission for the use of their children's photos in any marketing or social media prior to using them.

PERSONAL PHONE CALLS/MOBILE PHONES/SMART WATCHES

FDC educators have a duty of care to ensure children are protected from potential risk of harm. It is imperative that all FDC educators and educator assistants provide children with their full attention, ensuring supervision is maintained and remains on the children. As FDC educators primarily work on their own, there are times during the day that they may need to make or receive phone calls. Educators must consider children's safety at all times and ensure adequate supervision is provided whilst engaged in a phone conversation. Educators should consider:

- the location of a telephone where educators can easily access them without leaving children unsupervised
- have emergency phone numbers displayed near the phone at all times
- not using personal mobile phones to take photos of children as this is a breach of children’s privacy. (A FDC service owned mobile phone or iPad may be used if it’s for the purposes of ‘observations’ etc.)
- ensuring children do not have access to personal mobile phone

[adjust to your FDC service context]

USE OF ALCOHOL, DRUGS, AND TOBACCO

- FDC educators must ensure that children being educated and cared for by the educator or educator assistant as part of a FDC Service are provided with an environment that is free from the use of tobacco, illicit drugs and alcohol.
- Smoking is NOT permitted in or on surrounding buffer areas of the FDC residence or venue when education and care is being provided to children
- When care is taking place, smoking is not permitted in the presence of children. This applies to family members and all visitors to the home, parents and visitors. Educators should ensure that children remain in a smoke-free environment when in vehicles and on outings and excursions.
- Educators who smoke need to ensure that their hands, clothing and any items that children may come into contact with are free of smoke residue prior to commencing care with children.
- If tobacco is smoked in the family day care residence when the service is not operating, consideration should be given to issues such as ventilation, hygiene and safe storage of items including ashtrays and cigarette lighters. Smoking material, including cigarette butts should not be evident when children are in care.
- Educators who smoke must document on their risk management plan how they ensure a smoke free environment and ensure children do not come into contact with smoke residue.
- Our FDC Service is bound by the Education and Care National Regulations. Alcohol, drugs, or other substance abuse by educators and/or educator assistants can have serious adverse effects on their own health and the safety of others. As such, Coordinators, educators and/or educator assistants must not, while providing education and care for children as part of a family day care service:
 - consume alcohol nor be under the influence of alcohol
 - use or possess illegal drugs
 - drive a vehicle, having consumed alcohol or suffering from the effects of illegal substances

- persons residing the home or the educator’s residence, must abide by this regulation- i.e., not consume alcohol nor be under the influence of alcohol or use or possess illegal drugs
- any FDC educator or educator assistant undergoing prescribed medical treatment with a controlled substance that may affect the safe performance of their duties are required to report this to the Approved Provider and/or Coordinator. Consideration will be given as to whether the particular medication affects the person’s capacity to provide education and care to children.
- All issues pertaining to these matters shall be kept strictly confidential. A breach of this policy may initiate appropriate action including the termination of employment.

DRESS CODE

- All FDC Educators must adhere to our **uniform/dress code supplied during induction including the display of their name badge whilst working** [adjust as required for your service]
- Enclosed shoes must be worn at all times (strictly no high heels, thongs, or wedges).
- Clothes must be suitable for free movement, active play, and messy play.
- No offensive logos or political statements are to be displayed on clothing.
- Jewellery – [one (1) earring per ear (small studs).]

PERSONAL HYGIENE

Family Day Care educators are to adhere to the following standards:

- long hair is to be clean and neatly tied back: Ensure hair does not hang in your eyes.
- makeup is to be light and natural
- fingernails are to be clean and well groomed
- nail polish (if worn) cannot be chipped
- FDC Educators will follow appropriate oral hygiene practices
- an appropriate deodorant/antiperspirant will be worn
- strong perfumes will not be worn as they may cause allergic reactions in children

BREACH OF THE CODE OF CONDUCT

All employees and engaged educators of the FDC Service are made fully aware that the following breaches of the Code of Conduct and role responsibilities may **result in disciplinary action which may** lead to termination of employment:

- working under the influence of alcohol or drugs
- refusal to complete required additional training
- possessing or selling drugs at the FDC residence

- immoral, immature, or indecent conduct while educating and caring for children at the FDC residence
- refusing to work as reasonable directed
- not ensuring firearms and ammunition (if relevant) are stored separately and locked away
- bringing disrepute to the FDC Service
- causing disruption or discontent in the relationship between a family and the FDC Service
- disclosure of confidential information
- falsifying documentation
- taking, abusing, defacing, or destroying property owned by the FDC service
- falsification of reports, documents, or wages information
- failure to report for work without notice
- walking off the job
- failure to follow policies and procedures
- vulgarity or disrespectful conduct to families, management or colleagues
- making or publishing false, vicious, or malicious statements about any employee of the FDC Service, or the FDC Service itself
- unable to maintain or hold a current Working With Children Check/Clearance [or state equivalent].

DISCIPLINARY ACTION

All employees of the Family Day Care Service are made fully aware that continued abuse of the following may result in disciplinary action. These include, but are not limited to the following:

- unauthorised absence
- using a personal mobile phone or device to take photographs of the children
- consistent or ongoing poor work standard
- carelessness in the performance of duties
- consistent or ongoing low level of enthusiasm
- lack of personal cleanliness and hygiene
- failure to report health, fire, or safety hazards

CONTINUOUS IMPROVEMENT/REFLECTION

The *Code of Conduct Policy* will be evaluated and reviewed on an annual basis in conjunction with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP - RELATED RESOURCES

Code of Conduct – Staff Acknowledgement Form
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SOURCE

Anti-Discrimination Act: See <https://raisingchildren.net.au/disability/disability-rights-the-law/law/anti-discrimination-laws> for Acts for specific Australian states and territories.

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

Australian Human Rights Commission <https://humanrights.gov.au/our-work/childrens-rights>

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

Education and Care Services National Regulations. (2011)

Early Childhood Australia Code of Ethics. (2016).

Fair Work Act 2009 (Cth).

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

Guide to the National Quality Framework. (2018). (Amended 2020)

Government of South Australia Human Services [Child safe environments](#)

[National Principles for Child Safe Organisations](#)

NSW Government Office of the Children’s Guardian *Code of Conduct- a guide to developing child safe Codes of Conduct*. (2020).

Ombudsman Act 2001 (Cth).

Privacy and Personal Information Protection Act 1998 (Cth).

Revised National Quality Standard. (2018).

Victoria State Government. (2021). Family Violence Multi-Agency Risk Assessment and Management Framework.

Victoria State Government. (2022). Families, Fairness and Housing. Resources for Child Safe Standards

[Western Australian Education and Care Services National Regulations](#)

Work Health and Safety Act 2011 (Cth).

Workplace Relations Act 1996 (Cth).

Work Place Law <https://www.workplacelaw.com.au/getting-your-mobile-phone-policies-right/>

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V11.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • additional sources- South Australia DHS • minor formatting edits within text • Childcare Centre Desktop - related resources section added • Continuous improvement section added • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE

JULY 2022	<ul style="list-style-type: none"> • Policy reviewed following updates to Victorian Child Safe Standards in July 2022 • Sources checked for currency • Minor edits throughout policy • Additional text included in policy in line with Code of Conduct (staff acknowledgement) • Additional section added for Continuous Improvement • link to Western Australian Education and Care Services National Regulations added in 'Sources' 	DECEMBER 2022
DECEMBER 2021	<ul style="list-style-type: none"> • Policy reviewed as part of yearly cycle (Changed from Jan to Dec) • Minor changes for Child Safe Standards – services to amend to their state/territory requirements • Sources checked for currency 	DECEMBER 2022
JANUARY 2021	<ul style="list-style-type: none"> • Additional related regulations added • Addition of Child Safe Standards and Reportable Conduct Scheme • Additional section- Employees will NOT.... • minor edits throughout policy lengthy content reduced as this is covered in related policies • rearranged order of social media, mobile phones 	DECEMBER 2021
AUGUST 2020	<p>Additional information added to use of alcohol, drugs and tobacco section Amendments to phone use Additions to social media section National Regulations and National Law source added amendments as suggested by Regulatory Authorities for FDC Services</p>	JANUARY 2021
JANUARY 2020	<p>Additional information added to points Mobile phone section added Dismissal section added Additional related policies added Sources/references checked for currency/updated/ additional sources</p>	JANUARY 2021
JANUARY 2019	<p>Updated legislation and added dates (e.g. Workplace Relations Act 1996 (Cth) replaced the Industrial Relations act 1988 (Cth)) Rearranged the order of points for better flow Points added (Highlighted). Sources/references corrected, updated, and alphabetised.</p>	JANUARY 2020

JANUARY 2018	Related policy section added	JANUARY 2019
DECEMBER 2018	Modifications made to comply with changes to the National Quality Standard	JANUARY 2018
JANUARY 2017	Modifications made for Family Day Care Services	JANUARY 2018

QA5

5 RELATIONSHIP WITH CHILDREN

5.1 ANTI-BIAS AND INCLUSION POLICY

Anti bias is the practice of inclusion and underpins our Family Day Care Service philosophy. It is the acceptance that all children are valued and respected. We believe in the statement of inclusion as advocated by Early Childhood Australia (ECA) that *'Inclusion means every child has access to, participates meaningfully in, and experiences positive outcomes from early childhood education and care programs.'* (2016).

Our Family Day Care Service believes that children have the right to be treated equally and our goal is to develop children's identity and self-esteem in a trusting and supportive environment. We embrace diversity in all its forms to help develop positive and accepting attitudes in children, and to help them gain a better understanding of their environment, community, country, and the world.

NATIONAL QUALITY STANDARD (NQS)

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

5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups
157	Access for parents
168	Education and care service must have policies and procedures
170	Policies and procedures are to be followed

RELATED POLICIES

Additional Needs Policy Behaviour Guidance Policy Child Safe Environment Policy Code of Conduct Policy Educational Program Policy Gender Equity Policy	Interaction with Children, Family and Staff Policy Orientation of Families Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

We aim to provide an inclusive environment for all children, families and educators, acknowledging the uniqueness of everyone regardless of their race, gender, sexuality, religion, culture, physical and mental abilities and socio-economic background. This policy ensures all children, families, and staff are welcome and treated equitably and with respect.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Our *Anti-Bias and Inclusion policy* underpins the philosophy of the Family Day Care Service. The role of educators is to encourage children to share and learn about the individuality of each child and their family and their role in the FDC Service. This policy aims to assist children to form positive social relationships develop their identify and self-awareness and to learn to accept the diversity of members within and outside of the FDC Service community.

“Educators who are culturally competent respect multiple cultural ways of knowing, seeing and living, celebrate the benefits of diversity and have an ability to understand and honour differences. This is evident in everyday practice when educators demonstrate an ongoing commitment to developing their own cultural competence in a two-way process with families and communities” (EYLF, p.16).

Creating Inclusion

Inclusion supports children’s rights, fosters diversity and overcomes bias and barriers that may exist preventing children to participate in experiences within our FDC Service. Inclusion is consistent with the Convention on the Rights of the Child and other international conventions, including the UN Convention on the Rights of Persons with Disabilities and UN Declaration on the Rights of Indigenous Peoples.

Inclusion involves taking into account all children’s social, cultural and linguistic diversity including learning styles, abilities, disabilities, gender, family circumstances and geographic location in curriculum decision-making processes. (EYLF, p.24; Framework for School Age Care, p.41).

We will ensure children are provided with access to activities and environments, meaningful participation to foster a sense of belonging and opportunities to experience positive learning outcomes.

Cultural or National Origin and Racial Identity

Our FDC Service values and promotes equity, respect and awareness of different cultures. We ensure a cultural inclusive curriculum that reflects the cultural, linguistic and religious diversity of our society.

The Coordinator, FDC educator and educator assistant will:

- access information and professional development/awareness about other cultural and racial identities, especially those relevant within the FDC Service
- engage in critical reflection about stereotypes and biases
- foster an inclusive environment within each FDC service
- ensure our program design and delivery builds on community and cultural strengths
- develop strong partnerships with families and children to extend their individual and communities’ cultural competence

- ensure children have opportunities to participate with a wide variety of resources from the daily life of a variety of families and cultures
- where possible, engage FDC educators that reflect a variety of cultural, national origin, and racial identities
- affirm and foster children’s knowledge and pride in cultural identity
- foster children’s curiosity, enjoyment and empathetic awareness of cultural differences and similarities
- provide children with tools to respond appropriately to bias- build on children’s strengths, interests and individuality
- teach children to overcome any inappropriate responses triggered by cultural differences
- encourage children to ask about differences in physical characteristics
- enable children to feel pride, but not superiority, about their racial identity
- help children to become aware of our shared physical characteristics – what makes us all human
- encourage parent input into the program and to participate on a level that they feel comfortable with, sharing their culture, and, for example, their language
- collect information from each family on enrolment and incorporate it into the program to meet individual family needs in regard to ethnicity and home language
- develop communication plans with families to ensure inclusion- use of interpreter/cultural support
- encourage FDC educators to use their and children’s first language as appropriate within the environment
- respect all cultures by presenting photographs, pictures, play equipment, books, posters, music, dramatic play resources, and dolls that will encourage open discussion and exploration of a variety of cultures
- provide resources that include diversity and skin tone to foster respect and understanding for people of all backgrounds
- develop an understanding of the needs, strengths, and attitudes of each culture represented at the Service

Diversity in Family Composition

The Coordinator, FDC educators and educator assistants will:

- create an environment that is welcoming to all families
- respect each family, and work in partnership to support the child’s emergent identity as an individual, member of their family, our Service, and the community

- engage in simple discussions about families that focus on fact rather than values e.g., “*some children live with their mum or dad, some children live with their mum and dad, some with grandparents, and some with two mums or two dads*”.
- be encouraged to seek awareness and reflect on his/her own feelings, beliefs and background and evaluate the effect these may have on their attitudes and interactions with families.
- respect family lifestyle choices
- treat all families respectfully regardless of socioeconomic background
- discuss how members of the community can support one another and less fortunate people through the provision of resources, donations of goods or time etc.

Aboriginal and Torres Strait Islander Peoples

The Coordinator, FDC educators and educator assistants will:

- show respect and a commitment to reconciliation by developing a **Reconciliation Action Plan**
- reflect on the current level of cultural competence of our staff- (coordination unit, principal office and approved educators)
- promote the inclusion of children’s voices in all decisions that affect them
- build and strengthen our knowledge and understanding of Aboriginal and Torres Strait Islander cultures, histories and contributions
- attend professional development to support our understandings of Aboriginal and Torres Strait Islander cultures and perspectives
- provide opportunities for professional reflection
- identify and challenge our own cultural assumptions, beliefs and commitments to cultural competency
- engage with local Aboriginal families and communities through Aboriginal Education Consultative Groups
- invite Elders and Traditional Owners to speak to children, staff and families about the histories and cultures of the local area
- develop an Acknowledgement of Country in collaboration with Elders, community members, children and families which will be displayed and given during special events and incorporated into the program on a regular basis
- develop awareness and meaningful understanding about Aboriginal and Torres Strait Islander people as part of the cultural heritage of all Australians
- encourage Aboriginal and Torres Strait Islander communities access children services

- show sensitivity and respect to Aboriginal and Torres Strait Islander languages by incorporating verbal and visual languages into the Service environment.

Ability

The Coordinator, FDC educators and educator assistants will:

- provide an inclusive educational environment in which all children can succeed
- promote acceptance, respect and appreciation for individual's varying abilities
- consult with all families and other professionals to enable full participation in the program for children with varying abilities
- evaluate and adjust the environment to provide access and enable all children to develop autonomy, independence, competency, confidence and pride
- provide children and parents with developmentally appropriate information about varying abilities to foster understandings that we are all similar and different
- empower children in their own learning to ensure that they gain a feeling of self-respect
- treat all children fairly and develop an understanding that everyone has something important to contribute
- find examples in books, movies and tv shows that reflect attitudes about diversity, ability and disability
- observe all children and with family consultation, provide an individualised program to extend each child's interests and abilities
- create an environment where all children can participate in activities and experiences.

Promoting inclusion and diversity into the curriculum

The Coordinator, FDC educators and educator assistants will:

- promote positive influences, modelling appropriate communication, non-bias or gender specific language and attitudes
- develop appropriate expectations for each child based on their individual strengths, developmental needs, and interests
- assist FDC educators with the development of required skills and knowledge for working with all children and families
- work with Inclusion Support Professionals to assist in the inclusion of children with additional needs (see *Additional Needs Policy*)
- explore the values and uniqueness of the diversity within the FDC Service. These opportunities will form part of the curriculum.
- treat children with respect by answering their questions honestly

- adapt activities, interactions, communication, the environment, and documentation to ensure all children and families are actively included and supported to participate in the curriculum
- provide children with a range of resources, equipment and opportunities to enhance their awareness of diversity
- reflect on the curriculum ensuring inclusive practice and goals set for children are realistic and being met
- involve families in the planning of learning opportunities reflective of their culture.

Promoting and Supporting Children’s Home Languages

The Coordinator, FDC educators and educator assistants will:

- acknowledge that the use of children’s home language underpins their sense of identity and conceptual development (EYLF)
- promote and support children’s home languages within the FDC Service
- present books that reflect different languages and children’s first language
- create an environment which supports natural language learning and interaction
- assist parents to understand the value and importance both their home language and English
- engage in professional development about cultural diversity and building linguistic capacity.

SOURCE

Anti-Discrimination Board of NSW: <http://www.antidiscrimination.justice.nsw.gov.au/>

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

Australian Government Department of Education, Skills and Employment (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

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

Early Childhood Australia Code of Ethics. (2016).

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Early Childhood Australia (ECA), & Early Childhood Intervention Australia (ECIA). (2012). *Position statement on the inclusion of children with disability in early childhood education and care*.

http://www.earlychildhoodaustralia.org.au/wp-content/uploads/2014/06/ECA_Position_statement_Disability_Inclusion_web.pdf

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

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

Family Matters Queensland Our Way A generational strategy for Aboriginal and Torres Strait Islander children and families 2017-2037 <https://www.communities.qld.gov.au/resources/campaign/supporting-families/our-way.pdf>

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

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

Narragunnawali: Reconciliation in Education Welcome to Country. <https://www.narragunnawali.org.au/> Revised National Quality Standard. (2018).



REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
APRIL 2021	<ul style="list-style-type: none"> • minor edits to policy • sources checked for currency 		APRIL 2022
APRIL 2020	<ul style="list-style-type: none"> • major restructure of policy • introduction amended • additional points added to content • additional content areas • further sources added 		APRIL 2021
APRIL 2019	<ul style="list-style-type: none"> • Anti-bias policy deleted from 'related policies' • Additional needs policy and Gender equity policy added to 'related policies' • Additional information added to points. • Sources checked for currency. • Sources/references corrected, updated, and alphabetised. 		APRIL 2020
APRIL 2018	New policy created to comply with National Regulations and National Quality Standard		APRIL 2019

5.2 GENDER EQUITY POLICY

In order to create an environment that supports, reflects and promotes gender equitable and inclusive behaviours and practices, it is crucial for our Family Day Care Service and educators to examine our value and belief systems. We are committed to promoting confidence and self-esteem in all children and

acknowledge the uniqueness and potential of each child.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups
168	Education and care service must have policies and procedures
170	Policies and procedures are to be followed

LEGISLATION AND FRAMEWORKS
Australian Human Rights Commission (2013) Early Childhood Australia Code of Ethics 2006 Early Years Learning Framework 2009 Equal Opportunity Act 2010 Privacy Act 1988 Sex Discrimination Act 1984 United Nations Convention on the Rights of the Child (1989)

RELATED POLICIES

Anti-Bias and Inclusion Policy Additional Needs Policy Child Safe Environment Policy Code of Conduct Policy Educational Program Policy	Interaction with Children, Family and Staff Policy Orientation of Families Policy Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

To ensure children are treated with respect and equality, our Family Day Care Service affirms the right for all children to have access to and participation in, the same experiences and activities irrespective of gender. To ensure that positive attitudes towards gender equity are encouraged and supported within our FDC Service and community. Children will be encouraged to develop a sense of pride and self-worth, as they develop respect for each other's rights and responsibilities.

SCOPE

This policy applies to the Approved Provider, Coordinator, and Educators of the Family Day Care Service.

IMPLEMENTATION

Early childhood educators are in a unique position to influence children's development and create environments that encourage equal and respectful relationships. Gender plays a significant role in the lives of children as it defines masculinity and femininity. These are socially constructed roles, behaviours, activities and attributes that society considers 'appropriate' for a person based on their sex. Breaking down gender stereotypes from a young age, helps stop the negative consequences of inequality and discrimination. Educators working with children need to observe the implication of gender in children's choice of friends, activities, language, interactions, group dynamics and behaviour. These observations can lead to valuable insight into children's understandings about gender and assist educators to promote challenges to gender stereotypes and embrace diversity.

The *Anti-Bias Approach in Early Childhood* suggests the following principles as a basis to challenge sexism and promote anti-bias behaviour:

- be prepared to challenge sexist attitudes and behaviours
- ensure that you protect the child or adult who has been treated unfairly
- explain what you think is unfair about their attitudes and behaviours and if appropriate, model anti-sexist attitudes and behaviours
- correct any incorrect and sexist assumptions a child has about gender
- plan a strategy for how to deal with a similar situation in the future.

The Approved Provider/ Coordinator will

- provide families with information about the importance of a gender equity approach in achieving positive outcomes for all children
- provide information about the FDC Service's gender equity work
- ensure all FDC educators have access to professional development activities
- engage FDC educators in reflective practice about their own biases about gender
- foster an inclusive and gender equitable environment
- promote a positive understanding of gender equity
- ensure FDC educators and staff are aware of the service's expectations regarding positive, respectful and appropriate behaviour when working with children and families
- ensure that any behaviour or circumstances that may constitute discrimination or prejudice are dealt with in an appropriate manner

The Approved Provider/Coordinator/ Educator/Educator assistant will:

- be mindful and respectful of how activities and experiences provided may impact on the expectations, interests, and behaviours of all genders
- be mindful of the language used when addressing children
- provide a stimulating learning environment in which boys and girls are equally encouraged to explore a full range of experiences and emotions that aren't constricted by gender
- encourage children to express emotions and display affection and empathy
- act as advocates of children in dealing with other adults who act in a bias manner against a child due to their gender
- discourage the identification of particular skills, behaviours, and/or feelings as 'boys' and 'girls'
- encourage children to look upon both sexes as equal
- support the gender equity policy review by focusing on how children construct gender, and the effects of gender in curriculum, teaching and learning
- be responsive and ensure their actions are relevant to the specific and changing gender dynamics that emerge from the different ways in which different children interpret gender
- monitor language, attitudes, and assumptions with regard to gender and anti-bias of themselves, other educators, and children
- give positive messages about gender equity through their actions and words and avoid giving messages that promote traditional gender roles and gender bias

- critically reflect on their practices and environment and model a positive attitude towards gender equality
- encourage and support all children to participate in the full range of experiences and activities
- regularly review resources, equipment, materials, and images used with children to make sure they include gender diversity, non-stereotypical images, and non-traditional family lifestyles such as single or same sex parents
- encourage children to explore their own gender identities and the impact of gender relations in their play
- regularly review the book collection to ensure a range of different stories and experiences are depicted beyond stereotypical narratives.

Definitions

Gender refers to the socially learnt roles, behaviours, activities and attributes that any given society considers appropriate for men and women. Gender defines masculinity and femininity. Gender equity is the process of being fair to women and men.

Gender equity acknowledges that women and men have different access to resources, power, responsibilities and life experiences and different strategies are often necessary to address disadvantages and achieve equal outcomes of women and men, boys and girls.

Gender equality is the outcome reached through gender equity. It is the equal valuing by the society of the similarities and differences between women and men, and the varying roles that they play.

Gender inequality is the unequal distribution of power, resources, opportunity, and value afforded to men and women in society due to prevailing gendered norms and structures. Gender roles are the functions and responsibilities expected to be fulfilled by women and men, girls and boys in a given society.

Gendered norms consist of a set of dominant beliefs and rules of conduct, which are determined by a society or social group in relation to the types of roles, interests, behaviours and contributions expected from boys and girls, men and women.

Sex refers to biological and physiological differences between females and males.

Stereotype refers to a widely held but fixed and oversimplified image or idea of a particular type of person or thing.

Sexism refers to gender discrimination. It is prejudice or discrimination based on a person’s sex or gender.

Violence against women is defined as ‘any act of gender-based violence that causes or could cause physical, sexual or psychological harm or suffering to women, including threats of harm or coercion, in public or in private life’ (Council of Australian Governments, 2011; United Nations General Assembly, 1993).

sourced from Our Watch (2015) in *Creating Gender Equity in the Early Years: A Resource for Local Government*

SOURCE

Australian Human Rights Commission (2015) *Supporting young children’s rights* Statement of Intent (2105-2018)

Australian Human Rights Commission and Early Childhood Australia (ECA)

Australian Government Department of Education, Skills and Employment. (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

Darebin City Council *Creating Gender Equity in the Early Years: A resource for Local Government*

Early Childhood Australia Code of Ethics. (2016).

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

Red Ruby Scarlet (Ed). (2001). *The anti-bias approach in early childhood* (3rd Ed.). Australia

Revised National Quality Standard. (2018).

Women’s Health East (2017). *No Limitations. Breaking down gender stereotypes in the early years. A resource guide for early years educators*. <https://whe.org.au/what-we-do/gender-equity-for-health-outcomes/no-limitations-gender-stereotypes-early-years/>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
APRIL 2021	<ul style="list-style-type: none"> Minor edits sources checked for currency 	APRIL 2022	

APRIL 2020	Additions to purpose, implementation and management responsibilities based on current research Related legislation added Definitions added Additional sources added to ensure currency	APRIL 2021
APRIL 2019	New policy drafted for Family Day Care services	APRIL 2020

5.3 BEHAVIOUR GUIDANCE POLICY

The right for children to receive positive guidance in a supportive and respectful environment is promoted within the Education and Care Services National Regulations. Children learn to face a variety of challenges throughout their lives and through this develop not only self-regulation, but positive dispositions such as resilience and perseverance. Learning the difference between acceptable and unacceptable behaviour assists children to regulate their own behaviours in different social and emotional environments when interacting with peers and adults.

NATIONAL QUALITY STANDARD (NQS)

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

QUALITY AREA 5: RELATIONSHIPS WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
5.2.2	Self-Regulation	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

QUALITY AREA 6: PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
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QUALITY AREA 7: GOVERNANCE AND LEADERSHIP

7.1	Governance	Governance supports the operation of a quality service
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

84	Awareness of child protection law
155	Interactions with children
156	Relationships in groups
168	Education and care service must have policies and procedures
174	Time to notify certain circumstances to Regulatory Authority
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Anti-Bias and Inclusion Policy	Medical Condition Policy
Educational Program Policy	Privacy and Confidentiality Policy
Family Communication Policy	Respect for Children Policy
Incident, Injury, Trauma and Illness Policy	Enrolment Policy
Interaction with Children, Family and Staff Policy	Supervision Policy

PURPOSE

We aim to create positive relationships with children making them feel safe, secure, and supported within our Family Day Care Service. We will ensure children are treated fairly and equitably and with respect and consistency, as they are supported to develop the skills and knowledge required to behave in a socially and culturally acceptable manner.

Supporting children to develop socially acceptable behaviour and self-regulation is a primary goal for educators and families. This is embedded in fundamental documents including the Early Years Learning Framework (EYLF), Education and Care Services National Regulations, and the National Quality Standard (NQS).

SCOPE

This policy applies to the approved provider, coordinator, educators, educator assistants, children, families, and visitors of the Family Day Care Service.

DEFINITIONS

Behaviour guidance- this term is used to reflect current thinking about the most positive and effective ways to help children gain understanding and learn skills that will help them to manage their own behaviour. Using appropriate behaviour guidance educators aim to support each child regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

Self-regulation- The ability to manage energy states, emotions, behaviour and attention: the ability to return to a balanced, calm and constant state of being. Self-regulation is a key factor for mental health, wellbeing and learning (KidsMatter, Early Childhood, 2014).

Inclusion- taking into account all children's social, cultural and linguistic diversity (including learning styles, abilities, disabilities, gender, family circumstance and geographic location) in curriculum decision-making processes. (EYLF)

IMPLEMENTATION

The behaviour and guidance strategies used by educators at our FDC Service are designed to provide children the opportunity to expand their experiences of life in a productive, safe environment that allows individuals the right to safety, tolerance, self-expression, cultural identity, dignity and the worth of the individual.

FDC educators understand that as children grow and develop self-regulation becomes an important aspect of social and emotional development as they begin to understand how their actions affect others.

We believe in providing clear, consistent guidelines for children's behaviour as part of a caring and trusting relationship with children and families to help them feel secure and self-confident. Children benefit from knowing that their environment is stable and that a competent adult is taking care of them.

There are three key aspects to promoting positive behaviour:

1. Creating a quality learning environment that is positive and supportive and provides developmentally appropriate experiences and resources
2. Implementing guidance strategies for building skills and strengthening positive behaviour based on age-appropriate behaviour expectations

3. Employing strategies for guiding children's behaviour resulting in decreasing undesired behaviours.

POSITIVE BEHAVIOUR GUIDANCE STRATEGIES

Guiding children's behaviour is an important aspect of caring for and educating children. Positive strategies need to be developed to assist children to learn appropriate ways of behaving. Corporal punishment and unreasonable discipline are not permitted at any time in children's services, not only because the child may be physically harmed, but also because it nearly always has detrimental effects on the child's self-esteem and feelings of security.

All FDC educators and support staff at our FDC Service will role model appropriate behaviour and language, encouraging children to socialise with other children, including children of different cultural backgrounds as well as from different age groups and different genders.

Behaviour guidance strategies implemented within our FDC service are appropriate to the child's age and developmental capacity. Children are encouraged to make decisions for themselves and are provided with opportunities for independence and self-regulation. Children are given the opportunity to make choices and experience the consequences of these choices when there is no risk of physical or emotional harm to the child or anyone else. They are acknowledged when they make positive choices in managing their behaviour.

Strategies may include using visual cues, prompting, redirection, re-teaching strategies, developing logical consequences and conferences with children. In the instance of adverse behaviour being persistently observed, educators will evaluate their program, room set up, supervision etc. to identify triggers and sources of inappropriate or challenging behaviour.

Regular routines and consistency in implementing behaviour guidance strategies are critical to support children's wellbeing and promote children's agency. All FDC educators and educator assistants implement an active and positive approach to guiding children's behaviour.

APPROVED PROVIDER/ COORDINATOR/ EDUCATOR WILL ENSURE:

- no child being educated and cared for by the FDC Service is subjected to any form of corporal punishment or any discipline that is unreasonable in the circumstances
- every reasonable precaution is taken to protect children from harm and from any hazard likely to cause injury

- connections are built between our service and local primary schools to support positive learning environments
- behaviour guidance does not involve making judgements about children or their families
- information is gathered from families about their children's social skills, relationship preferences, family and cultural values which will be recorded in the child's individual file
- FDC educators will use this information to engage children in experiences that support children to develop their social and decision-making skills
- positive and respectful relationships with children are established and maintained
- children are empowered to use language and other forms of non-hurtful communication to communicate their emotions
- positive, empathetic relationships are promoted between children assisting them to develop respectful relationships
- the dignity and rights of each child are maintained at all times
- positive and inclusive strategies are implemented to enable educators to encourage positive behaviour in children in order to minimise adverse behaviour
- general information about behaviour guidance is provided to families such through parent interviews and newsletters
- a partnership is developed with other professionals or support agencies that work with children who have diagnosed behavioural or social difficulties to develop plans for the inclusion of these specific children. This information will be kept confidential and in the individual child's file.
- excessive or challenging behaviour is managed and communicated with families
- strategies are implemented to re-direct a child who may be causing or about to cause harm to himself or herself, another child, or adult. Incidents may include a child who is kicking, spitting, biting, throwing furniture or toys, punching or hitting, or being disruptive. Redirection may also include an incident where a child places him/herself in a dangerous situation, for example, climbing a fence or hiding in a potentially dangerous position. Safety is a priority, and this may mean using physical re-direction in which an educator will actually remove the child from the harmful situation if required. It may be necessary to remove other children from the area while the child calms down.
- families are notified and the incident/behaviour is addressed sensitively. In an instance where a child or children's safety has been jeopardised, parents are required to sign the *Behaviour Incident Report*
- a meeting with the child's parents/carers, FDC educator and Coordinator may be arranged to discuss any behaviours or concerns that have been observed. A *Behaviour Guidance Plan* may be developed in consultation with families and other health professionals as required

- *Behaviour Guidance Plans* are to be reviewed on a periodic basis reflecting changes that have been applied through the implementation of the plan in consultation with the child's family
- *Behaviour Guidance Plans* are to be reviewed on a periodic basis reflecting changes that have been applied through the implementation of the plan in consultation with the child's family
- families and professional agencies are consulted to ensure that a consistent approach is used to support the child with diagnosed behavioural or social difficulties
- application for additional support for FDC educators to build their capacity and capabilities to include children with additional needs will be made through the Inclusion Support Program
- a Strategic Inclusion Plan (SIP) is developed and guided by local support agencies as required for individual children
- the SIP is reviewed on a periodic basis reflecting changes that have been applied through the implementation of the plan
- professional development is provided for educators to be informed, trained and supervised to implement the SIP created, ensuring that information is composed and recorded for reflection on its effectiveness for the individual child
- notification is made to the regulatory authority within the legislated time frames of any circumstance that poses a risk to the health, safety and wellbeing of a child or children, or of any complaint alleging that a serious incident has occurred at the FDC Service.

EDUCATORS/EDUCATOR ASSISTANT WILL:

- encourage and support each child's social and emotional development, striving to develop children's self-regulation and an understanding of the feelings of others
- actively work with younger children to promote and role-model positive ways to interact with others
- teach behavioural expectations
- support appropriate behaviour- visual cues, prompting, positive verbal feedback and quality learning environments
- children are provided with positive guidance and encouragement toward acceptable behaviour
- promote children's initiative and agency
- actively work with all children to support them in constructing and conveying ways of expressing needs, resolving conflict, and responding to the behaviour of others
- at all times provide positive role-modelling in their dealings with children, other educators and families
- discuss guidelines, rules, limits, and what is fair with children, and use their contributions in setting limits and guidelines

- talk calmly with children about the consequence of their actions, and the reason for rules
- use corrective consequences- prompt, redirect, re-teach, provide choice, logical consequence, conference with child and educator
- guide children’s behaviour, teaching them how to be considerate of others – to think about the effects of their actions on others.
- provide positive feedback and focus on children’s strengths and achievements and build on their abilities
- take into consideration the child’s past experiences as their behaviour could be a result of past trauma such as changes in routine, changes or losses within the family, placement in care, or more serious circumstances involving abuse, neglect, or family violence
- be responsive to these former experiences, designing and implementing behaviour plans with the individual child that include strategies which will assist alternative and positive behaviour
- provide age appropriate, challenging, and interesting activities, experiences, and equipment for children to use and become engaged with
- ensure there are sufficient materials and equipment for individual, small and large group activities
- set up the environment (indoor and outdoor) for children to engage in activities and experiences in accordance with their abilities and interests
- adapt a positive approach, excluding cruel, harsh, humiliating or demeaning actions
- commit to professional development and keep up to date with industry information regarding behaviour guidance strategies
- support children to explore different identities and points of view and to communicate effectively when resolving disagreements with others
- participate in planned and spontaneous conversations with children about emotions, feelings and issues of inclusion and fairness, bias and prejudice, and the consequences of their actions, as well as the appropriate rules and the reasons for the rules
- provide children with the language and vocabulary needed to express their emotions and feelings and verbalise their concerns
- encourage children to listen to other people’s ideas, consider pro-social and altruistic behaviour and collaborate and negotiate in problem solving situations
- listen empathetically to children when they communicate their emotions, provide encouragement as they reassure the child it is normal to experience positive and negative emotions
- guide children to remove themselves from situations where they are experiencing frustration, anger, or fear

- support children to negotiate their rights and rights of others and mediate perceptively when children experience difficulty in resolving dissimilarity
- learn about children’s relationships with others and their relationship preferences they have and use this knowledge to encourage children to manage their own behaviour and expand on their empathy skills
- use positive language, gestures, facial expressions, and tone of voice when redirecting or discussing children’s behaviour with them
- remain calm, respectful and tolerant as they encourage children who are strongly expressing distress, frustration or anger
- guide children’s behaviour with a focus on preserving and promoting children’s self-esteem as they learn to self-regulate their behaviour
- implement “*time with*” an adult, which will be used when all other strategies (above) have been exhausted. “Time with” allows educators to offer reassurance and support so the child can settle and regain self-control, develop some self-calming behaviours and gain composure. Once calm, educators can assist the child to identify what happened, reflect on their actions and consider how they may have done something differently
- contribute to and ensure Individual Support Plans are followed

FAMILIES WILL:

- provide consent for the FDC Service to consult with professional agencies to assist with implementing a Strategic Inclusion Plan (SIP)
- work collaboratively with FDC educators and professional agencies when required in order to develop a broader understanding of the child’s developmental level and share any recent events which may be influencing the child's behaviour
- consult with educators and provide consent when the Service is applying for Inclusion Support Funding
- work in partnership with the FDC educator and health professionals in the development of a behaviour guidance plan or Individual Support Plan to assist with the identification of challenging behaviour, the development of supportive strategies and the review of strategies implemented within a behaviour guidance plan where required
- create consistency in behaviour guidance strategies used at the service and at home

SOURCE

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

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
MAY 2021	<ul style="list-style-type: none"> additional links to the National Quality Standard additions to policy related to behaviour guidance plans removal of ‘children will’ section- policy is written to guide adults- so not appropriate to be included in policy sources checked for currency 		MAY 2022
MAY 2020	realignment of content within the policy deleted content that was repeated in different sections or moved into a different section changed order of some points		MAY 2021

	additional definitions added rewording of some points notification to regulatory authority added additional information added for clarity further sources included sources updated and checked for currency	
MAY 2019	Terminology changed to be specific to FDC services. Additional information added to points. Rearranged the order of points for better flow Sources checked for currency: Deleted if irrelevant or no longer available. Sources/references corrected, updated, and alphabetised. Information added to sources. 'Related policies' alphabetised.	MAY 2020
DECEMBER 2017	New policy created for Family Day Care	MAY 2019

5.4 INTERACTIONS WITH CHILDREN, FAMILIES AND STAFF POLICY

The Early Years Learning Framework (EYLF) identifies secure, respectful, and reciprocal relationships with children as one of the principles that underpin practice. Within an early childhood community many different relationships are negotiated with and between children, educators, and families. The way in which these relationships are established and maintained, and the way in which they remain visible impacts on how the early childhood community functions as a whole. Relationships directly affect how children form their own identity, whether or not they feel safe and supported, and ultimately, their sense of belonging.

NATIONAL QUALITY STANDARD (NQS)

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

5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
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QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS WITH FAMILIES AND COMMUNITIES

6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions.
6.1.2	Parents views are respected	The expertise, culture, values and beliefs of families are respected, and families share decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

73	Educational program
84	Awareness of child protection law
115	Premises designed to facilitate supervision
118	Educational leader
123A	Family day care co-ordinator to educator ratios- family day care
124	Number of children who can be educated and cared for- family day care
127	Family day care educator qualification
143A	Minimum requirements for a family day care educator
145	Staff record
155	Interactions with children
156	Relationships in groups
157	Access for parents
163	Residents at family day care residence and family day care educator assistants to be fit and proper persons
168	Education and care services must have policies and procedures

170	Policies and procedures to be followed
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RELATED POLICIES

<p>Arrival and Departure Policy</p> <p>Behaviour Guidance Policy</p> <p>Child Protection Policy</p> <p>Child Safe Environment Policy</p> <p>Code of Conduct Policy</p> <p>Dealing with Complaints Policy</p> <p>Delivery of Children to, and Collection from and Education and Care Service Premises</p> <p>Educational Program Policy</p> <p>Enrolment Policy</p> <p>Family Communication Policy</p>	<p>Family Communication Policy</p> <p>Management Committee Policy</p> <p>Open Door Policy</p> <p>Orientation of Families Policy</p> <p>Privacy and Confidentiality Policy</p> <p>Relief Staff Policy</p> <p>Respect for Children Policy</p> <p>Social Media Policy</p> <p>Student and Volunteer Policy</p> <p>Supervision Policy</p> <p>Transition to School Policy</p>
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PURPOSE

We aim to build positive and respectful relationships with children, families, and educators through collaboration and interactions, which is reflective of our Family Day Care Service philosophy, and the approved learning frameworks of the *Early Years Learning Framework* and *My Time Our Place*. Educators will encourage positive relationships between children and their peers as well as with educators and families at the FDC Service, ensuring children feel safe and supported.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure that policies and procedures are in place for interactions with children (regulation 168) and take reasonable steps to ensure those policies and procedures are followed.

In order to build and maintain positive and respectful relationships with children, families and educators our Family Day Care Service will adhere to our statement of philosophy and the ACA Code of Ethics. We aim to provide a child safe culture where our values and practices that guide the attitudes and behaviour of all staff are guided by the implementation of the Child Safe Standards and related National Principles for Child Safe Organisations.

Interactions with children

Children need positive relationships with FDC educators that are trusting and responsive to their individual needs. Through these experiences and interactions children will develop a positive understanding of themselves and feel a sense of belonging. We promote a respectful, child safe culture where children concerns are always responded to, and children feel empowered to participate in decisions and provide feedback to educators and staff.

Relationships in groups

The Approved Provider, Nominated Supervisor will take reasonable steps to ensure that our FDC service provides children with opportunities to interact and develop respectful and positive relationships with each other and with educators, educator assistants, coordinators and volunteers.

FDC educators and educator assistants will ensure:

- create a welcoming and relaxed atmosphere in which children experience equitable, friendly and genuine interactions with educators in each approved residence or venue
- meet educator to child ratio and qualification requirements
- role-model appropriate language and behaviour
- support children to be aware of their own feelings as well as the feelings of others
- encourage children to treat all children with respect
- provide children with the opportunity to explore their dispositions for learning by expressing themselves and their opinions
- ensure children are aware of how to raise concerns or provide feedback
- respond or report to children about how their feedback has been acted upon
- assist the children to build resilience and self-assurance through positive interactions
- guide children's behaviour positively and with encouragement
- respect the rights, dignity and agency of children
- support children in the early childhood environment
- provide appropriate supervision so children feel safe in their interactions with other children
- speak to children in a positive manner at all times, promoting respect, tolerance and empathy, including the use of non-verbal cues and communication
- engage in meaningful, open interactions that support the acquisition of skills for life and learning of children

- respect each child’s uniqueness, be attuned to, and respond sensitively and appropriately to children’s efforts to communicate and use the child’s own language, communication styles, and culture to enhance interactions
- have regard to the family and cultural values, age and physical and intellectual development and abilities of children cared for
- listen to children and take them seriously; support and encourage children to use appropriate language in their interactions with adults and peers. FDC educators will extend upon children’s interests and ideas through questions and discussions, supported and made visible in observations, reflections, and programming.
- understand their reporting requirements and respond to any incident, disclosure or suspicion of child abuse or harm
- communicate with children by getting down to their level, using eye contact, and showing respect to the child whilst engaging in and promoting effective communication
- show empathy to children
- ensure that the values, beliefs, and cultural practices of the child and family are considered and respected
- ensure that no child is ever isolated for any reason other than illness, accident or pre-arranged appointment with parental consent. During this time, they will be under adult supervision.
- regularly reflect on their relationships and interactions with children and how these can be improved to benefit each child
- facilitate children’s individual development extending upon their strengths, interests and abilities.

Interactions with Families

Effective communication is the key to developing and maintaining positive interactions and relationships with others and helps to build trusting and respectful partnerships with families. Educators use positive and open communication with families and siblings in order to create a responsive and inclusive environment for children and families. Interactions with families help to inform educators’ knowledge of each child’s distinctive interests, skills cultures and abilities. This helps to build a positive experience and a safe learning environment that encourages children to expand their knowledge and understandings.

FDC educators and educator assistants will ensure:

- all families are treated equitably without bias or judgement, recognising that each family is unique
- families are provided with information and resources in their first language

- families are asked to identify a preferred method of regular communication with the FDC Service (this may include utilising a translator service)
- families and children are greeted upon arrival in a respectful manner
- they learn the names of family members and use these names when they greet them
- two-way communication is established through leading by example and asking questions and a willingness to offer information about ourselves
- common terminology (not jargon) when talking to parents regarding their child's development
- privacy and confidentiality are respected at all times
- information about another child or family information is never discussed with a parent or visitor
- they remain sensitive to cultural differences amongst families and encourage families to share cultural aspects with the children and FDC educators
- the advice and opinion from other professional experts is requested, with parental permission, to assist educators develop and implement strategies to support the inclusion of children with additional needs
- they seek additional resources and professional support for families through a range of organisations such as KU Inclusion Support, Area Health and other specific health professional networks
- verbal communication is always open, respectful and honest
- families are provided with up-to-date service information and notices through Daily Reports, newsletters, communal notice boards, emails and sign-in sheets.
- they regularly reflect on parent input into the program and make changes where necessary that will best benefit the service and children
- connections between families is promoted and enhanced through inviting families to participate in routines and events
- families are aware of our complaint handling process

Interactions with Other FDC educators

The Family Day Care Service recognises that the way educators interact with each other when together has an effect on the interactions they have with children and families. FDC educators are required to demonstrate mutual respect towards each other and value the contributions made by each FDC educator working within our Family Day Care Service.

To maintain professionalism at all times, FDC educators and educator assistants will:

- engage in professional communication in order to create an effective work environment and to build a positive relationship children and families. Communication amongst colleagues creates a positive

atmosphere and a professional image for families. Communication between educators and families ensures that important information is being passed on consistently.

- champion a child safe culture through their attitudes, behaviours and actions
- be respectful when listening to each other's point of view and ideas
- maintain effective communication to ensure that teamwork occurs
- communicate their professional reflections and ideas for continuous improvement
- attend in-service training to update and refresh and add to individual skills and knowledge
- keep up to date with current legislation to child protection including mandatory reporting requirements – (*Child Protection, Reportable Conduct Scheme*)
- refer to the *Dealing with Complaints Policy (Staff) /Procedure* if they feel a situation with another educator or staff member is not being handled with professionalism, respect, and fairness
- recognise the strengths and value the contribution each person makes to different work roles
- work collaboratively to reach decisions which will enhance the quality of the education and care offered at the FDC Service
- welcome diverse views and perspectives
- work together and engage in open and honest communication at all times
- respect each other's positions and opinions
- develop and share networks and links with other agencies
- resolve differences promptly and positively and use the experience to develop more effective methods of working together.

To maintain professionalism at all times, Management and the FDC Coordinator will:

- provide new FDC educators with relevant information about the Family Day Care Service and program through a Staff Handbook, induction, and daily communication
- treat FDC educators with respect
- be sensitive to the feelings and needs of FDC educators
- provide constructive feedback to FDC educators as part of their professional learning plan support
- appreciate and utilise FDC educator skills and interests
- provide support, assistance and mentoring to FDC educators
- hold regular educator meetings to encourage and support professional growth and reflective practice- these may be offered flexibly using online platforms such as Zoom, Skype
- use appropriate conflict resolution techniques to solve problems
- ensure policies and procedures are up to date regarding communication, expected behaviour and grievances

- provide opportunities for professional development.

To enhance communication and teamwork when together, FDC educators will:

- maintain privacy and confidentiality
- be respectful, caring and inclusive of colleagues
- be sensitive to the feelings and needs of others
- support colleagues during difficult situations
- provide constructive feedback to each other
- trust each other
- value the role and contribution of colleagues
- appreciate and utilise colleague skills, strengths and interests regardless of qualification and experience
- provide support and assistance to each other
- share responsibilities
- have a flexible attitude towards roles and responsibilities
- greet each other by name
- show genuine interest in the other person by using active and reflective listening
- communicate ideas and opinions clearly and professionally
- use a communication book or daily diary to pass on messages and record relevant information
- use appropriate conflict resolution techniques to solve problems
- engage in opportunities for professional development.

SOURCE

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

Australian Children's Education & Care Quality Authority. (2021). Policy and Procedure Guidelines- *Interactions with Children*

Australian Human Rights Commission. Child Safe Organisations. <https://humanrights.gov.au/our-work/childrens-rights/projects/child-safe-organisations>

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NSW Department of Education. (2021). Implementing the Child Safe Standards: A guide for early childhood education and outside school hours care services.

Privacy and Personal Information Protection Act 1998 (Cth).

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Evidence Paper Practice Principle 5: Respectful relationships and responsive engagement

<https://www.education.vic.gov.au/Documents/childhood/providers/edcare/respectrelns.pdf>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance – name change of related policy • no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
AUGUST 2021	<ul style="list-style-type: none"> • edits to policy guided by ACECQA <i>Interactions with Children policy guidelines</i> (August 2021) • inclusion of additional regulations • inclusion of commitment to Child Safe Standards to ensure a child safe culture within the service 	MAY 2022	
MAY 2021	Policy checked for currency	MAY 2022	
SEPTEMBER 2020	additional section added Relationships in groups reference to My Time Our Place included additional sources added- Regulations and National Law	MAY 2021	
MAY 2020	additional content added to sections as highlighted rewording of some points to ensure clarification some statements moved into interactions with staff and educators minor adjustments to formatting for consistency additional sources utilised within policy as referenced	MAY 2021	
MAY 2019	Contextualised points to be more relevant to FDC. Grammar, punctuation and spelling edited. Additional information added to points. Sources checked for currency. Made note of sources that are no longer available. Sources/references alphabetised. Minor formatting for consistency throughout policy.	MAY 2020	
MAY 2018	Minor grammatical changes made to content	MAY 2019	
DECEMBER 2017	Modifications made to comply with changes to the National Quality Standard	FEBRUARY 2018	

FEBRUARY 2017	Changes made to relate to Family Day Care Services	FEBRUARY 2018
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5.5 RESPECT FOR CHILDREN POLICY

Within a Family Day Care community many different relationships are negotiated with and between children, educators and families. The way in which these relationships are established and maintained, and the way in which they remain visible, impacts on how the Family Day Care community functions. Relationships directly affect how children form their own identity, whether they feel safe and supported, and ultimately, their sense of belonging.

National Quality Standard (NQS)

QUALITY AREA 5: RELATIONSHIP WITH CHILDREN		
5.1	Relationships between educators and children	Respectful and equitable relationships are maintained with each child.
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
5.1.2	Dignity and rights of the child	The dignity and rights of every child are maintained.
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
5.2.2	Self-Regulation	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
73	Educational program
84	Awareness of child protection law
115	Premises designed to facilitate supervision
118	Educational leader
123A	Family day care co-ordinator to educator ratios- family day care

124	Number of children who can be educated and cared for- family day care
127	Family day care educator qualification
143A	Minimum requirements for a family day care educator
145	Staff record
155	Interactions with children
156	Relationships in groups
157	Access for parents
163	Residents at family day care residence and family day care educator assistants to be fit and proper persons
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed

RELATED POLICIES

Additional Needs Policy Anti-Bias & Inclusion Policy Child Protection Policy Child Safe Environment Policy Children’s Belongings Policy Clothing Policy Dealing with Complaints Policy Educational Program Policy	Family Communication Policy Gender Equity Policy Interactions with Children, Family and Staff Policy Medical Conditions Policy Nappy Change & Toileting Policy Photograph Policy Privacy and Confidentiality Policy
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PURPOSE

The Early Years Learning Framework (EYLF) (2009) highlights educators’ relationships with children as central to supporting their learning. Principle 1 in the EYLF is about secure, respectful and reciprocal relationships. Our philosophy guides our interactions and relationships with children. We aim to ensure all educators develop positive relationships with children based on respect and fostering children’s self-esteem and development.

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

All children have a right to feel accepted and respected. This is a principle set out in the United Nations Convention on the Rights of the Child. The Convention emphasises the importance of children developing connections to culture and community as a means of fostering a strong sense of personal identity and belonging. Our FDC Service is committed to ensuring all FDC educators and staff are aware of the UNCROC and to educate children on their rights while encouraging children to participate in decisions which affect them within our service.

Our FDC Service is dedicated to protecting children from abuse and neglect and promotes a child safe environment, maintaining children's wellbeing. We promote cultural safety for Aboriginal children, cultural safety for children from culturally and/or linguistically diverse backgrounds, and to providing a safe environment for children with a disability. We aim for children to feel safe and secure and we believe in forming strong attachments and connections with the family day care educator, educator assistant, children and families

Educators at the Family Day Care Service will use teaching techniques and strategies to establish positive relationships with children and their families, working in conjunction with the National Quality Standard as we build supportive relationships with children.

By teaching respect for cultural diversity, educators will assist children to:

- learn about their cultural background and develop a strong sense of self identity
- learn about and appreciate cultures and traditions other than their own
- learn to enjoy and respect differences and recognise universal characteristics we all share
- learn about racial prejudice and understand why it should be challenged.

Management/Educators/Educators Assistant will:

- provide a child safe, comfortable and happy environment where children's concerns are always responded to
- promote children's bodily integrity (respecting their physical space and only using touch when necessary and appropriate)
- support children's consent by acknowledging and respecting a child's right to refuse or say no
- respect each child's uniqueness, displaying appreciation and respect for children as individuals
- use a positive and non-threatening tone when interacting with children in all situations
- ensure mealtimes are relaxed and unhurried
- sit with children during mealtimes, engaging in respectful conversations
- never force a child to do something against their requests: This includes rest, eat, participation in group experiences and activities.

- role model respect to children in everyday dealings with both adults and children
- endeavour to be aware of each individual child's values, culture and feelings, and respond appropriately
- value diversity and not tolerate any discriminatory practices
- encourage children to initiate conversations about their experiences at home encouraging them to express their ideas and feelings
- encourage children to request assistance when taking on new challenges, inspiring children's independence and confidence
- regularly reflect on their relationships and interactions with children and how these can be improved to benefit each child
- inspire, encourage and accept each child and encourage them to do the same with their peers by actively:
 - fostering each child's construction of a knowledgeable, confident self-identity
 - fostering each child's comfortable, empathetic interactions with diverse range of people
 - fostering each child's critical thinking about bias, and to question and enquire
 - fostering each child's ability to stand up for herself/himself and others in the face of bias
- respond respectfully and appropriately to children's attempts as they participate and converse in sustained conversation about their interests
- implement a predictable routine for children with interest-based activities and experiences
- provide a range of planned and spontaneous experiences for children to challenge and maximise learning opportunities
- use a variety of communication strategies inclusive of verbal and non-verbal cues to support the development of relationships with children
- empower children to speak up and raise any concerns
- support children's home language when communicating and interacting to build trust and positive relationships
- respect children and families' diversity and the development of cultural competency including LGBTIQ+ and gender diverse young people
- support children and build secure attachments through a collaborative partnership with families
- encourage children to develop confidence in their ability to express themselves
- encourage children to work through differences appropriately and with guidance where necessary
- respect each child's uniqueness and communicate that respect to the child
- ensure children are aware of how to raise concerns or provide feedback

- respond or report to children about how their feedback has been acted upon

CONTINUOUS IMPROVEMENT

Our *Respect for Children Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

SOURCE

Australian Children’s Education & Care Quality Authority. (2021). Policy and Procedure Guidelines- *Interactions with Children*

Australian Human Rights Commission. Child Safe Organisations. <https://humanrights.gov.au/our-work/childrens-rights/projects/child-safe-organisations>

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Stonehouse, A. (2012). Relationships with children:

UN General Assembly. (1989). Convention on the Rights of the Child. Simplified version available at

<https://www.unicef.org.au/Upload/UNICEF/Media/Our%20work/childfriendlycrc.pdf>

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY:	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • regular policy maintenance • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ • DESE references changed to Department of Education • minor formatting edits within text • hyperlinks checked and repaired as required • Inclusion of commitment of awareness regarding UNCROC 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE

SEPTEMBER 2021	<ul style="list-style-type: none"> inclusion of additional regulations- reflecting ACECQA guidelines to policies and procedures inclusion of commitment to Child Safe Standards to ensure a child safe culture within the service 	SEPTEMBER 2022
SEPTEMBER 2020	<ul style="list-style-type: none"> minor editing (lower case letters following bullets) sources checked for currency addition of page numbers 	SEPTEMBER 2021
SEPTEMBER 2019	Grammar, punctuation and spelling edited. Some sentences reworded/refined. Sources checked for currency and correct URLs. Sources/references corrected, updated, and alphabetised. Related policies alphabetised. Reference/source added (United Nations)	SEPTEMBER 2020
MODIFICATIONS	New Policy Created	

5.6 BEHAVIOUR GUIDANCE: BULLYING POLICY

Bullying can occur among children of any ages, sex or background. In most instances, children need adult assistance to deal with bullying. This includes adults taking responsibility to develop strategies for the prevention of bullying, and for dealing fairly and effectively with allegations of bullying.

Being, Belonging and Becoming: The Early Years Learning Framework for Australia identifies secure, respectful and reciprocal relationships with children as one of the principles that underpin practice. Within the community many different relationships are negotiated with and between children, educators and families.

The way in which these relationships are established and maintained, and the way in which they remain visible impacts on how the community functions as a whole. Relationships directly affect how children form their own identity, whether or not they feel safe and supported, and ultimately, their sense of belonging.

NATIONAL QUALITY STANDARD (NQS)

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

5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships.
5.2.1	Collaborative learning	Children are supported to collaborate, learn from and help each other.
QUALITY AREA 6: PARTNERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
155	Interactions with children
156	Relationships in groups
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed

RELATED POLICIES

Anti-Bias and Inclusion Policy Behaviour Guidance Policy Code of Conduct Interactions with Children, Family and Staff Policy	Privacy and Confidentiality Policy Termination of Enrolment Policy Respect for Children Policy
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PURPOSE

To create a safe and healthy environment for children where bullying behaviours are not tolerated. As reflected in our Service philosophy and the Early Years Learning Framework, Family Day Care educators and educator assistants will encourage positive relationships between children and their peers.

SCOPE

This policy applies to the **Approved Provider, Nominated Supervisor**, Coordinator, educators, educator assistants, students, families, children and visitors of the Family Day Care Service.

IMPLEMENTATION

Our Family Day Care Service does not tolerate bullying of any kind.

The priority of our Service is to ensure the safety and wellbeing of the child being bullied.

Although there may be underlying reasons causing a child to bully others, it is essential that the child being bullied receives the adult attention and support in the first instance. It is important that the needs of the child who bullies does not overshadow the needs of the child being bullied.

TYPES OF BULLYING IN EARLY CHILDHOOD

The most common types of bullying in the early childhood setting are physical and verbal. Some children may also bully others by social isolation/exclusion.

Physical includes:

hitting, punching, kicking, pinching- directed at the same child/ren over an extended period of time.

Verbal includes:

calling children names, taunting them, making sexist/racist statements, making cruel statement about personal attributes, clothing etc.

Social isolation:

Excluding individual children or groups of children from play or social situations

SIGNS OF BULLYING

In many cases, bullying occurs without adults being aware of it. Bullying can include physical violence (hitting, shoving), teasing or name-calling, social exclusion, or intimidation. It often occurs over a period of time. Possible signs a child is being bullied might include:

- unexplained cuts, bruises, scratches
- changes in behaviour, such as becoming moody, teary, depressed
- bedwetting
- complaints of physical ailments such as headaches or stomach aches
- having few friends, or a breakdown in a previous friendship (if age appropriate)
- does not want to attend care
- does not want to attend parties, visit other children.

Children may also disclose to a trusted adult that they are being bullied.

EFFECTS OF BULLYING

Children who are bullied are more likely to be depressed, lonely, and anxious and have low self-esteem. They may frequently feel sick and avoid interactions with others.

PREVENTATIVE STRATEGIES

Bullying thrives where there is not enough supervision. If required, FDC educators can request additional support from the Coordinator of the FDC Service.

The daily program of activities is designed to meet the needs and interests of all children in attendance to prevent periods of boredom.

Educators are to model appropriate behaviours towards educator assistants and children, including refraining from teasing, humiliating, or talking 'behind another's back'. This also includes educators using appropriate language when dealing with behaviour management issues and assisting children to use the same. Children should be encouraged to verbalise their emotions and to develop empathy and compassion.

TALKING ABOUT BULLYING

Educators play an important role in helping children understand and guide their own behaviour as they learn about positive and healthy relationships with others.

Behaviours in early childhood may be *precursors* to bullying rather than true bullying. This could include making faces, refusing to play together, telling lies or stories about another child, grabbing objects, pushing, pinching or shoving another child. Without intervention, these behaviours could turn into a pattern of bullying.

FDC educators assist children recognise bullying behaviour and assist children in developing strategies to develop positive relationships and prevent bullying. Skills to develop to assist in preventing bullying include:

- empathy- understanding and responding to the what others feel
- problem solving- how to resolve problems constructively without using aggression
- language- understanding what to say when the child is feeling targeted by another child- 'stop it!'

FDC educators will teach social skills through role-plays, stories, puppets and games.

FDC educators will guide children to practice how to interact with others positively and respectfully when talking about bullying.

PROCEDURE WHEN A CHILD DISCLOSES ALLEGED BULLYING

- refer to the *Behaviour Guidance- Bullying Response Procedure* for steps to undertake when approaching a bullying situation
- listen when a child attempts to talk about behaviours that might indicate bullying
- respond to incidents in a constructive, supportive and timely manner
- learn as much as possible about the children involved and the tactics used
- summarise the problem they are discussing
- ensure the child knows that the educators at the service are there to help them
- provide support and empathy
- empathise with the child and reassure them that it is not their fault
- ask the child what they think could be done to help, what will make them feel safe
- tell the child what action you are planning to take, including that you will need to talk to the alleged bully
- encourage and support the child who is being bullied to develop other friendships
- notify the Approved Provider or Coordinator of the allegation if assistance is required to rectify the matter
- try to talk with the alleged bully and any witnesses without allowing them the opportunity to discuss what they may say (bullies often do not act alone, and the responses of the bully and friends may therefore differ from the victim)
- remember that bullies can be 'nice' children from 'good' families
- notify all parents involved of the allegation of bullying (*refer to Privacy and Confidentiality Policy and Code of Conduct Policy*)
- discuss the situation with the child's parents and work out a plan to manage the situation
- once the investigation is complete, advise the children, parents, Approved Provider, and Coordinator of the outcome

PROCEDURE WHEN FDC EDUCATORS SUSPECTS POSSIBLE BULLYING

- pay closer attention to the suspected victim and their interactions with other children
- tell the child that you are concerned about them and consider asking some questions such as "Do you have any special friends here?", "Are there any kids who you really don't like here?"
- consider talking with the parents of the child to determine if they have similar concerns.

STRATEGIES FOR DEALING WITH BULLYING

Discussing the behaviour with the child who is bullying others

- make it clear to the bully that this type of behaviour is not acceptable
- don't force a meeting between the bully and the victim. Forced apologies are not constructive
- encourage and support the child who is being bullied to develop other friendships
- ask the child who is bullying for possible reasons for the bullying. Address any issues raised as appropriate.
- discuss with the child who is bullying and their parents what the possible sanctions may be if the bullying continues.

SANCTIONS

Possible sanctions will be dependent on each individual case, but may include:

- a warning
- temporary exclusion from the Family Day Care Service
- permanent exclusion from the Family Day Care Service (Termination of enrolment Policy)

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Behaviour Guidance- Bullying Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

RESOURCES

Bullying- NO WAY! www.bullyingnoway.gov.au

[Eyes on Bullying in Early Childhood](#)

Kids Help line <https://kidshelpline.com.au/kids>

Raising Children <https://raisingchildren.net.au/preschoolers/behaviour/bullying/bullying-signs>

Starting Blocks [Managing children's challenging behaviour in child care- bullying](#)

SOURCE

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

Australian Government Department of Education [Skills and Employment](#). (2009) *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*.

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

Early Childhood Australia- Dealing with bullying together: prevention and resolution. (2009).

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

NSW Department of Education *Anti-bullying- Parents and carers tips- Fact Sheet* (2020).

Starting Blocks *Managing children's challenging behaviour in child care- bullying*

[US Education Development Centre- Preventing Bullying in Early Childhood](#)

<http://preventingbullying.promoteprevent.org/preventing-bullying-in-early-childhood>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V6.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • minor formatting edits within text • continuous improvement/reflection section added • link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
DECEMBER 2021	<ul style="list-style-type: none"> • minor edits • reviewed to align to regular Policy Review calendar • sources checked 	DECEMBER 2022	
MAY 2021	<ul style="list-style-type: none"> • additional sections added to policy- types of bullying in EC; talking about bullying; supporting the child who is being bullied • resource section added for staff and families • sources checked and modified 	DECEMBER 2021	
DECEMBER 2019	Related Policies added Minor edits to formatting for consistency	DECEMBER 2020	
DECEMBER 2018	New policy drafted	DECEMBER 2019	

QA 6

6 COLLABORATIVE PARTNERSHIP WITH FAMILIES

6.1 ENGLISH AS AN ADDITIONAL LANGUAGE OR DIALECT (EAL/D) POLICY

Everyone has the right to be treated equally and with respect. By helping children to appreciate and accept differences and similarities, we can help them to learn to make decisions on the basis of individual choice. Our Family Day Care Service ensures educators implement inclusive practices which recognize and value the backgrounds and cultures of all children and families. We strive to provide additional support to children and families for whom English is an additional language or dialect to ensure equitable learning outcomes.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

RELATED POLICIES

Educational Programming Policy Family Communication Policy Interaction with Children, Family and Staff Policy	Multicultural Policy Respect for Children Policy
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PURPOSE

Diversity enriches life and culture. Our Family Day Care Service aims to ensure our approved family day care educators provide and promote education and care services where children can realise their full potential regardless of gender, race and cultural background. We believe in honouring diversity, striving

to engage in respectful interactions with educators, staff, children and families. This will be reflected in our relationships with children and their families and in the resources provided for the children in educator's residences or approved venues.

SCOPE

This policy applies to the educators, and educator assistants of the Family Day Care Service.

IMPLEMENTATION

The term '*culturally and linguistically diverse*' (CALD) is commonly used to describe people who have a cultural heritage different from that of the dominant Anglo Australian culture, replacing the previously used term of people from a 'non-English speaking background' (NESB).

EAL/D refers to children whose first language is a language or dialect other than English and who may require additional support to assist them develop proficiency in English.

Our Family Day Care Service recognises the cultural diversity of our community and implements strategies and programs to promote anti-racism, develop intercultural understanding and develop positive relationships between families, children and educators from all cultural backgrounds. We acknowledge that children from language backgrounds other than English, may require additional support to ensure their successful integration to education and care provided by approved family day care educators. Our Coordination unit will be available to assist families and educators.

To create a welcoming and culturally inclusive environment for all children and families our Family Day Care Service, Coordinators and educators will:

- provide translated copies of our Family Handbook and key documents to help explain routines and enrolment procedures
- create a space to display community information
- acknowledge the traditional custodians of the land
- contact our local Aboriginal Education Consultancy Group (AECG) for support on cultural awareness
- invite community members and elders to our Family Day Care Playgroups Service for professional learning for educators and to do storytelling with children
- display a calendar of significant cultural events to share with all families
- discuss appropriate ways of acknowledging and celebrating these events with children and families
- learn how to pronounce children's names

- learn greeting in the children’s first language
- provide a welcoming physical environment that reflects diversity both indoors and outdoors
- access translation and interpreting support services where required

The Approved Provider and Coordinator will ensure:

- enrolment and orientation information can be translated into the family’s home language
- if any family of a child enrolled at the FDC Service is not fluent with the English language, policies and other Service information will be provided to that family in a language that is readily understood by the family
- support will be provided to the family to assist in completing forms and applications to Government agencies as required
- an interpreting service is accessible to ensure clear communication between the service and family. Support from interpreting services is available if communication is difficult between staff, children and families.
 - Translating and Interpreting Service 131 450
 - Website: www.tisnational.gov.au
- general information, resources and support is obtained from the Department of Family and/or Community Services as required
- families have the opportunity to influence and shape the Family Day Care Service, to review Service policies, and to contribute to Service decisions with language not being a barrier or hindrance in the process
- all FDC educators and educator assistants participate in professional learning to build their capacity to help build culturally inclusive environments and learning programs
- educators have an understanding of Aboriginal English
- our *Statement of Philosophy* is regularly reviewed to ensure it reflects the beliefs and values of all family’s culture and language
- positive parent family partnerships are developed to enrich children’s development and wellbeing
- communicate effectively with our culturally and linguistically diverse community.

Family Day Care Educators will:

- provide a program and environment that is inclusive of all children and families, promoting to children the importance of showing acceptance of different and diverse cultural practice including home language

- display photos of children engaged in learning and annotate using languages spoken at home and in English
- explore different cultures and encourage children to learn about other cultures as well as their own
- display Aboriginal artwork and use Aboriginal resources (Aboriginal and Torres Strait Islander flags, local AECG information)
- consider the cultural and linguistic backgrounds of all the children in the program and learn common words to assist the child and family.
- be aware of interpretations of body language that may vary across cultures.
- pronounce and spell children's name correctly
- learn greeting in the children's first language
- find out which festivals and celebrations are important to the children and family to include in the program
- use picture books, posters, and resources incorporating various languages to help develop intercultural understanding
- ensure that toys and resources represent a variety of cultures and are available as part of the everyday program
- use everyday routines to extend children's language
- sing songs- familiar nursery rhymes
- learn chants and rhymes in languages other than English
- listen and respond to children- use short sentences, allow pause time to encourage response, listen intently
- be aware of taking a tokenistic approach when celebrating cultural diversity.
- embed cultural diversity within the program
- support the maintenance of a child's first language according to parent's wishes
- actively seek information from parents to ensure experiences are implemented in a respectful manner
- provide information, including brochures and factsheets are available to families about Community Services and resources to support parenting and family wellbeing in their chosen language
- recognise the expertise of families, encouraging them to participate in decision making about their child's learning and wellbeing that are respectful to the family's cultural background
- provide families with opportunities and support them to be involved in the program and in-service activities that are presented in a way that does not limit them to English speaking families.

Source

Australian Children’s Education & Care Quality Authority. (2014).
 Department of Education and Early Childhood Development, Victoria. *Learning English as an Additional Language in the Early Years (birth to six years)*. (2011). Victorian Curriculum and Assessment Authority.
 Early Childhood Australia Code of Ethics. (2016).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011).
 Giugni, M. (n.d.). Exploring multiculturalism, anti-bias and social justice in children’s services:
<https://multiverse.com.au/images/downloads/exploring-multiculturalism.pdf>
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (amended 2020).
 New South Wales Department of Education. Multicultural Education. <https://education.nsw.gov.au/teaching-and-learning/curriculum/multicultural-education/english-as-an-additional-language-or-dialect#EAL/D0>
 New South Wales Department of Education & Communities. *English as an Additional Language or Dialect. Advice for Schools*. (2014). https://policies.education.nsw.gov.au/policy-library/associated-documents/eald_advice.pdf
 Revised National Quality Standard. (2018).
 SNAICC- National Voice for our Children

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Policy reviewed. No major changes • Sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
FEBRUARY 2021	<ul style="list-style-type: none"> • suggested name change of policy to <i>English as an Additional Language or Dialect (EAL/D) Policy</i> • policy checked for currency • references checked 	FEBRUARY 2022	
FEBRUARY 2020	<ul style="list-style-type: none"> • Additional information about inclusive environments added • Section added for EAL/D children • Additional sources added • Sources checked for currency 	FEBRUARY 2021	
FEBRUARY 2019	New Policy created for Family Day Care Service.	FEBRUARY 2020	

6.2 FAMILY COMMUNICATION POLICY

Family participation is an important part of making our Family Day Care Service a true part of the community. We believe in assisting our FDC educators create an environment that is welcoming and inclusive and supports a sense of belonging for children, families, and educators.

‘Children thrive when families and educators work together in partnership to support young children’s learning.’

(Early Years Learning Framework, p.9)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child’s learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children’s inclusion, learning and wellbeing.
6.2.1	Transitions	Continuity of learning and transitions for each child are supported by sharing information and clarifying responsibilities.
6.2.2	Access and participation	Effective partnerships support children's access, inclusion and participation in the program.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
157	Access for parents
160	Child enrolment records to be kept by approved provider and family day care educator

161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care Service must have policies and procedures
172	Notification of change to policies or procedures
181	Confidentiality of records kept by approved provider

RELATED POLICIES

Anti-Bias and Inclusion Policy Dealing with Complaints Policy Educational Program Policy Grievance Policy (Families) Incident Injury Trauma and Illness Policy	Interactions with Children, Family and Staff Policy Open Door Policy Privacy and Confidentiality Policy Sick Children Policy
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PURPOSE

We encourage family participation and open communication within our FDC Service and with our approved FDC educators. Families are invited to attend parent information meetings and assist with projects in keeping with our open-door policy.

We aim to ensure open communication through the enrolment and orientation process, policy and statement of philosophy review, feedback forms, parent Family Committee, daily program, documentation, formal and informal meetings, emails, and conversations.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

We acknowledge the primary influence that families have in their children's lives and understand that effective relationships between educators and families are fundamental to achieve quality outcomes for children. Community partnerships that focus on active communication, consultation, and collaboration also contribute to children's learning and wellbeing. Positive relationships with families help to build collaborative partnerships, as together we share a common objective and responsibility for reaching quality outcomes and goals for children.

We will provide regular information about the FDC Service and ongoing opportunities for families to contribute to our curriculum. Our Coordination unit and FDC educators will communicate with families in a positive and supportive manner that encourages respectful and trusting relationships.

The Approved Provider, Coordinator, Educators and Educator Assistants will ensure:

- all families are welcomed and respected at our FDC Service and within FDC residences/venues
- information communicated with families is reliable and accurate, especially if it involves the health and safety of children, employees and visitors to the Service. (e.g.: Department of Health, Public Health Units).
- families are provided with a range of communication methods which may include the use of online platforms, emails, verbal communication, newsletters, Daily Report, Family Involvement Wall, sign-in sheets, Notice Board and notes sent home
- families are aware of our open-door policy, unless such entry would pose a risk to the safety of children/educators or breach court orders regarding access to children
- families are provided with a **parent Family Handbook** during the enrolment and orientation process
- the enrolment and orientation process provide families with information about the statement of philosophy, policies, and practices of the FDC Service
- families are informed about the processes for providing feedback and making complaints- **including any complaints about the handling of CCS [see-Dealing with Complaints Policy Grievance (Families)]**
- FDC educators provide information to families regarding the content and operation of the educational program in relation to their child, and that a copy of the educational program is available for viewing at FDC residence/venue
- families have access to their child's developmental records outlining developmental progress against the approved learning framework, as well as their strengths, developmental needs, and interests
- collaborative partnerships with families that involve respectful communication about all aspects of a child's learning are developed
- **a weekly menu, which accurately describes the food and beverages provided each day, is displayed in a place accessible to parents**
- families are notified of any incident, injury, trauma, or illness that affects their child whilst at the FDC residence/venue either immediately after the incident or when they collect their child, depending on the severity of the incident. Notification must be made within 24 hours of the occurrence.
- respect, confidentiality and sensitivity are key elements of effective communication with families
- processes are in place to communicate with families for whom literacy is an issue, or for whom English is not a first language

- fact sheets and brochures are printed in required languages and are readily available for families to access
- an interpreter service is available to ensure communication with parents and families not hindered due to language barriers
- families are notified of changes to FDC Service policies at least 14 days before making changes to a policy or procedure that may have a significant impact on
 - the provision of education and care to any child enrolled in the FDC service or
 - the family's ability to utilise the FDC service
 - changes to the way fees are charged and collected
- families are notified of any changes to the National Regulations
- the current Education and Care Services National Regulations are available for parents to access
- families are encouraged to complete surveys to contribute and share ideas about their child, provide suggestions about the program or give feedback
- families are encouraged to contribute to the continuous quality improvement progression within the FDC Service through their involvement in the self-assessment and QIP review

Families will:

- provide accurate information during the enrolment process about their child including related medical and health information
- notify the FDC educator and Coordination unit when any information changes- (Medical Management Plans, Court orders-parental orders, authorised nominee)
- participate in informal and formal interactions with the FDC educator to discuss their child's learning and develop learning goals
- be encouraged to contribute to the learning program and share their culture, language and beliefs with others in the FDC educator
- be invited to contribute to the quality improvement process within the FDC Service
- be encouraged to attend children's excursions to help meet required ratios and to support their children's knowledge of and engagement in their community.
- be invited to assist with working bees, **or fundraising initiatives** held at the FDC service
- be invited to events held periodically to help families network and develop friendships in the local community.
- be invited to review the FDC Service policies and routines.

SOURCE

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

Australian Government. Department of Education, Skills and Employment. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).

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

Early Childhood Australia Code of Ethics. (2016).

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Guide to the National Quality Standard. (2017).

Raising Children Network Australia. (2006-2019). *Effective communication with parents: professionals*

<https://raisingchildren.net.au/for-professionals/working-with-parents/communicating-with-parents/communication-with-parents>

Revised National Quality Standard. (2018).

Yorganop Indigenous Professional Support Unit *A Welcoming Yarn Engaging with Aboriginal and Torres Strait*

Islander Children and their Families in Education and Care Settings. (2017). <https://childaustralia.org.au/wp-content/uploads/2017/02/A-Welcoming-Yarn-2016-Final.pdf>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance – change of policy name in related policies- <i>Dealing with Complaints</i> minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2021	<ul style="list-style-type: none"> policy reviewed and minor edits sources checked for currency 		APRIL 2022
APRIL 2020	<ul style="list-style-type: none"> National regulations added additional related policies included further content added to points inclusion of culturally and linguistically diverse families further sources added 		APRIL 2021
APRIL 2019	Added ‘Educators’ and ‘Educator Assistants’ to the first section. Points added (Highlighted). Sources checked for currency. Sources/references corrected, updated, and alphabetised.		APRIL 2020
APRIL 2018	New policy created to maintain effective communication with families		APRIL 2019

6.3 TRANSITION TO SCHOOL POLICY

Starting school is a significant milestone in the life of any child and family. Our Family Day Care Service supports continuity of learning and transitions for each child by sharing relevant information, clarifying responsibilities and by developing strategies that support a positive transition to school (National Quality Standard 6.2). Furthermore, we are committed to engage children, families, professionals, educators, and community members in the transition to school process to ensure the implementation of this policy is meaningful, supportive and reflective of best practice. Transition is viewed as a collaborative and dynamic process occurring over time ensuring a sense of belonging in all environments (Transition to School: Position Statement, 2011).

Ready families + Ready early childhood services +
Ready communities + Ready schools = Ready children

(Kagan & Rigby, 2003)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.1	Transitions	Continuity of learning and transitions for each child are supported by sharing information and clarifying responsibilities

RELATED POLICIES

Additional Needs Policy Anti-bias and Inclusion Policy Educational Program Policy	Privacy and Confidentiality Policy Respect for Children Policy
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PURPOSE

Effective transition practices have as their base, a commitment to building secure, respectful and reciprocal relationships. One outcome of such relationships is that all participants regard themselves, and other participants, as valued members of the school community (Dockett & Perry, 2001).

Our Family Day Care Service and FDC educators aim to liaise with local primary schools to develop a smooth and comprehensive transition to school for all children enrolled in their care transitioning to school. We will support children and families by strengthening the development and delivery of transition programs/practices and provide a shared understanding between our Service and local primary schools about what is important for children and their families during the transition to school process.

We believe it is vital to enhance children's social and emotional development to ensure a successful transition to school. By developing these skills and abilities and promoting their creativity and individuality, we promote children's ability to become confident and successful learners.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, and families, of the Family Day Care Service.

IMPLEMENTATION

Children are challenged with several transitional changes during early childhood. This includes orienting children into early childhood care and education services, transitioning between routines as they grow, and then transitioning into primary school. Children respond in different ways to transitions - some with confidence and others with hesitation. Children's confidence will be enhanced when changes happen

gradually and when time is prioritised to support these transitions with sensitivity, planning, and preparation.

This first experience children have of school has a great impact on their progress and future schooling (Margetts, 2007). Transition to school should therefore be prepared for in an understanding, calm, organized, and knowledgeable manner. We acknowledge the critical role we as educators have in providing an educational environment that supports children’s wellbeing, promotes equity and celebrates diversity. Our approach to transition to school planning and practices is developed in collaboration with all stakeholders and ensures children are active participants in their transition to school. This approach is inclusive of children and families at all levels of transition.

For children attending school the following year, we offer high quality transition practices including additional activities and experiences to help prepare them for a smooth transition to a primary school environment. These positive practices refer to daily programmed activities and experiences that are implemented throughout the year, encouraging the developmental skills that are optimal for children to develop before commencing school.

Transition to School Program/Practices

As educators who are instrumental in influencing children’s learning patterns for later life, it is our responsibility to set them on a course that will inspire investigation, exploration, problem solving, questioning, discovery and the disposition to take on challenges.

To ensure the transition to school is a positive experience for children and families, Family Day Care coordinators and educators will implement a range of activities and experiences that may include, but is not limited to:

- visits by children to local primary school setting
- family information sessions (organised by our Family Day Care Service/Scheme)
- visits from primary school teachers and/or principals
- exchanging information about a child’s individual strengths and needs – (Transition to school statements)
- developing children’s talking and listening skills
- alphabet and number awareness
- early literacy- rhyme, chants, songs
- shapes and colour recognition

- social and emotional enhancement
- pre-writing development
- name writing and recognition
- concentrating on the task at hand
- determination when faced with complications
- responding positively to new situations
- taking responsibility for their own behaviour
- developing the communication skills necessary for group or individual play
- developing positive feelings about themselves and others
- experiencing a sense of self-satisfaction resulting from achievement
- experiencing eating from lunch boxes, as we educate children about different foods eaten at recess and lunch and how to open different packaged foods.

Preparing Children as they transition to School

There are many unique differences in the school environment which children should become familiar with as they prepare to transition to school. This includes:

- having one teacher for much of the day
- toileting without supervision
- wearing uniforms
- transport
- sitting at a desk
- responsibility of own belongings
- listening to instructions
- specific focused lessons
- a school bell or siren indicating set breaks
- negotiating a large playground
- homework
- the canteen or tuck shop
- before and after school care

The Approved Provider/Coordinator will:

- establish strategies across all of our Family Day Care services/educators to ensure there is continuity of learning when children transition to school

- advocate for 'ready' by ensuring schools are ready for our children to transition into their environment
- develop an information package to share with families about transition to school. This will include information on how to support their child/children and what to expect with the transition process. This package will be reviewed annually to meet the needs of the families and to integrate current information from local schools where possible.
- be aware of critical cut off dates with various Education Departments to accommodate children with a disability or developmental delay into new educational settings and share this information with educators and families
- support and advocate for enhanced transition programs for children with a disability or developmental delay with feeder primary schools
- be flexible and ensure transition programs are tailored to the specific needs of all children enrolled in our Family Day Care Service
- share information between FDC services, schools and families to facilitate a successful transition. (This may include completing Transition to School Statements with parent/carer approval to share information).

Educators/Educator Assistants will:

- discuss expectations with families for their child as they prepare to transition to school
- work in partnership with families to ensure children's transition to school is positive, informed, and enhances individual development
- incorporate transition to school into the daily program by encouraging children to think and talk about school by exploring various elements of primary school. (This may include uniforms, eating packed lunches, talking about school and how a school environment is different.)
- talk with children about starting school, respecting any concerns and communicating these to families
- ensure children are active participants in their transition to school
- communicate with families to ensure we meet the requirements of the individual strengths and needs of all children and families
- consider family priorities and any concerns about the transition process. Each family's cultural and linguistic needs will be respected, along with family diversity.
- develop a program/practices to ensure a smooth transition for children from the education and care environment to the school environment. The program requires both parent and educator support for the child. This cooperation will ensure the best possible environment for children's transition.

- contemplate the individual rest or sleep needs of children in the months leading up to the transition to school and whether a reduction in sleep time may prepare some children for the longer school day routine. Children will continue to have rest periods with quiet activities during the day. Beds will be available for any child who requires rest or sleep.
- discuss children's development, strengths, and competencies for transition to school with families
- support each family's decision about when to send children to school, acknowledging the [enter state/territory] policy of when children must begin formal schooling
- share information packages developed by management /Coordinator with families
- be supported to access and attend professional development opportunities to ensure current knowledge and practice regarding transition to school.
- facilitate relationships and networking with local schools to support children and families with the transition process and to open lines of communication. The importance of school preparation through school visits, orientation days and meeting the Kindergarten teachers will be promoted.
- facilitate each child's development as a capable learner through open ended learning experiences
- effectively evaluate our transition program
- be flexible and responsive to the needs of children and families
- take into account contextual aspects of community, and of individual families and children within that community.

(Adapted from Dockett & Perry, 2007.)

TRANSITION STATEMENTS

Transition to School Statements vary in each state and territory in Australia.

Some states are mandatory, whilst others are optional. The following is for specific states. South Australia, Tasmania, Northern Territory, ACT and Western Australia do not have specific templates.

Services may choose to use a template from another state if they wish to provide information to primary schools.

NSW Department of Education (DoE) Transition to School Statement

The NSW Transition to School Statement is a practical and simple tool designed to enable information to be shared between families, early childhood services and schools. The statement summarises a child's strengths, interests and approaches to learning.

The Statement is completed by the child's early childhood educator in cooperation with the child and the family. All information is provided voluntarily. The Statement is communicated to the child's intended

school where it provides the school and teachers with information they can use in planning and preparing for the child's arrival and transition into the new learning environment.

Use of the statement is optional. Our FDC Service, in collaboration with the family will make the decision about whether to prepare a statement, and the family will choose whether to make it available to the child's intended school and teacher. Parent written authorisation is required for the Department of Education to collect personal and health information about any child enrolled in our Service. FDC educators can receive a Transition to School resource pack from the Department of Education which includes transition to guides and a copy of 'Daisy's First Day' - [Resources for Family Day Care educators](#)

Victoria State Government Education and Training- Transition Learning and Development Statement

This *Learning and Development Statement* (TLDS) summarises children's abilities as they start school and identifies their individual approaches to learning. The statement assists teachers to get to know the children beginning school and their individual learning styles. Completing this statement is a kindergarten-funding requirement. The statement is prepared by early childhood educators and families and includes outcome descriptors describing children's learning and development against the five outcomes of the VEYLDF. Parents have an option to share this statement with the child's future school or 'opt out'. The transition statement is completed electronically via the Online Transition Learning and Development Statement (Online TLDS) tool hosted on the [Insight assessment platform](#) and can be downloaded to share with families and early childhood services.

Queensland Government Early Childhood Education and care Transition Statement

A transition statement provides a snapshot of each child's knowledge skills and disposition for learning across the five learning areas of the Queensland Kindergarten Learning Guideline (QKLG). The statement contains important information about each child's learning and suggestions that will support each child's continued learning when they start school. Transition statements can be accessed through the QCCA Portal. In accordance with Queensland privacy laws, parents/carers must provide consent for kindergartens to enter a child's personal details into the transition application portal. The completed and approved transition statement can be accessed by primary schools through the portal for students attending their school. [Kindergarten transition statements](#)

When a child may not be ready to transition to school

We understand that all children are unique and achieve milestones in their own time. Parents and carers know their child’s strengths, interests and needs better than anyone and have expectations about what they think their child should be able to do. Parents may ask their child’s FDC educator their opinion on specific skills such as pre-writing skills, numbers, social and emotional development to assist in making decisions about starting school. The decision for when their child starts school is an individual decision. For some children, starting school at age six rather than five may provide them with an additional year to mature and increase independence.

We believe that early childhood educators have professional insight to assist families in making the decision about a child’s transition to school as they have developed trusting and supportive relationships over time. However, prior to speaking with families about their personal views, educators will discuss their thoughts with their Coordinator/Educational Leader about the child’s individual strengths and needs and any recommendation about beginning school will be communicated with families during a scheduled meeting. We encourage parents/carers to discuss the timing of their child’s school entry with other professionals who know their child well such as early intervention practitioners.

JURISDICTION SPECIFICATIONS FOR EACH STATE

AUSTRALIAN CAPITAL TERRITORY (ACT)

- Children must have turned five on or before 30 April to begin Kindergarten the first day of term 1 that year. It is compulsory for children to start school from six years of age.
- Starting school: A guide for parents: https://www.education.act.gov.au/public-school-life/starting_school
- Enrolling in a public school: <https://www.education.act.gov.au/public-school-life/enrolling-in-a-public-school>

NEW SOUTH WALES (NSW)

- Children can begin compulsory Kindergarten at the beginning of the school year if they turn 5 on or before 31 July in that year. All children must be enrolled in school by the time they turn 6.
- [Transition to School Statement](#)
- Starting school: <https://education.nsw.gov.au/public-schools/going-to-a-public-school/primary-schools/starting-school>
- Transition to school: <https://education.nsw.gov.au/public-schools/going-to-a-public-school/primary-schools/starting-school>
- Getting ready for primary school: <https://education.nsw.gov.au/content/dam/main-education/public-schools/going-to-a-public-school/media/documents/getting-ready-for-school.pdf>

- [Strong and successful start to school Transition guidelines \(2020\).](https://education.nsw.gov.au/content/dam/main-education/teaching-and-learning/curriculum/early-learning/media/documents/el-strong-and-successful-start-to-school-transition-guidelines.pdf)
<https://education.nsw.gov.au/content/dam/main-education/teaching-and-learning/curriculum/early-learning/media/documents/el-strong-and-successful-start-to-school-transition-guidelines.pdf>

NORTHERN TERRITORY (NT)

Children can start Transition (non-compulsory) at the start of the school year if they turn 5 by 30th June that year. To enter Year 1 (compulsory) children must turn 6 before 30th June that year.

Northern Territory Government <https://nt.gov.au/learning/primary-and-secondary-students/age-your-child-attends-school>

Enrol your child at school: <https://nt.gov.au/learning/primary-and-secondary-students/enrol-your-child-at-school>

QUEENSLAND (QLD)

- From 2017 it is compulsory for all children to undertake Prep full time. Children must turn 5 by 30 June the year they start Prep.
- Queensland Government – Department of Education and Training
- Transition to school: <https://earlychildhood.qld.gov.au/early-years/transitions>
- Qld Gov. enrolment age requirements:
<https://www.qld.gov.au/education/schools/find/enrolment/pages/age.html>
- Continua of learning and development: Queensland kindergarten learning guideline companion:
https://www.qcaa.qld.edu.au/downloads/p_10/qklg_companion.pdf

TASMANIA (TAS)

Children may commence Kindergarten (non-Compulsory) if they turn 4 on or before 1 January of the year they start. Children must turn 5 by 1 January to start Prep, the first year of formal school.

[Kindergarten in Tasmanian Government schools](#)

Starting Kindergarten in Tasmanian Government Schools:

<https://www.education.tas.gov.au/parents-carers/parent-fact-sheets/kindergarten-tasmanian-government-schools/>

VICTORIA (VIC)

Children must turn 5 before 30 April to attend school that year

Children must be at school in the year that they turn six years of age

Victoria State Government Education and Training- [Transition to school resource](#)

Moving to primary school (transitions):

<http://www.education.vic.gov.au/childhood/professionals/learning/Pages/transition.aspx>

Primary schools: <http://www.liveinvictoria.vic.gov.au/living-in-victoria/education-and-childcare/primary-schools#.V8gSQ5h97IV>

Transition Learning and Development Statement:

<http://www.education.vic.gov.au/childhood/professionals/learning/Pages/transitionstat.aspx#link70>

WESTERN AUSTRALIA (WA)

- Children can start Kindergarten if they are 4 years old by 30 June of that particular year. Pre-Primary is compulsory and children must start school if they turn 5 before the 30 June in the current school year
- Department of Education: Early childhood branch:
<http://www.det.wa.edu.au/curriculum-support/earlychildhood/detcms/portal/>
- Enrolling in school: <http://www.education.wa.edu.au/home/detcms/navigation/education/our-schools/enrolling-in-school/>
- Hello Pre-primary- [What to expect when your child starts Pre-primary](#)

SOUTH AUSTRALIA (SA)

- Children may start Reception in primary school if they turn 5 before 1 May.
- Children must be enrolled in primary school by 6 years old.
- Starting primary school: <https://www.sa.gov.au/topics/education-skills-and-learning/schools/school-life/starting-primary-school>

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The Royal Children’s Hospital Melbourne. (2008). Policy brief: Rethinking school readiness: https://www.rch.org.au/uploadedFiles/Main/Content/ccch/PB10_SchoolReadiness.pdf

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	JUNE 2022	NEXT REVIEW DATE	JUNE 2023
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
JUNE 2021	<ul style="list-style-type: none"> Review or policy changed to align with transition to school organisation for FDC services and schools small changes/additions in policy to reflect best current evidence (program/practices) Sources and links checked for currency 	JUNE 2022	
OCTOBER 2020	<ul style="list-style-type: none"> Transition statement section amended for NSW, VIC additional information regarding children who may not be ready to transition to school State specific links checked and updated sources checked for currency 	OCTOBER 2021	
OCTOBER 2019	<ul style="list-style-type: none"> Updated related policies Minor grammar adjustments Sources checked for relevancy 	OCTOBER 2020	
OCTOBER 2018	<ul style="list-style-type: none"> References corrected, added &/or updated. Incorrect links deleted and replaced with correct ones. Sources/references alphabetised. Additional information added to points. Rearranged the order of points for better flow 	OCTOBER 2019	

	<ul style="list-style-type: none"> • Added DEEWR milestones • Minor punctuation and wording editing. • Related policies added. 	
SEPTEMBER 2018	New policy drafted	OCTOBER 2019

Continued next page: Developmental Milestones

6.4 DEALING WITH COMPLAINTS POLICY (FAMILIES)

Feedback from families, educators, staff and the wider community is fundamental in creating an evolving Family Day Care (FDC) Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our FDC Service's procedures for receiving and managing informal and formal complaints. Parents can lodge a grievance with management with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIPS		
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality Service.
7.2.1	Continuous Improvement	There is an effective self-assessment and quality improvement process in place.

LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

Sec. 172	Offence to fail to display prescribed information
Sec.174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
168(2)(o)	Education and care service must have policies and procedures... for dealing with complaints
169	Additional policies and procedures- family day care
170	Policies and procedures must be followed
171	Policies and procedures to be kept available
173(2)(b)	Requires an approved provider to make the name and telephone number of the person to whom complaints may be addressed clearly visible at the service
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook

RELATED POLICIES

CCS Accounts Policy CCS Governance Policy Child Protection Policy Code of Conduct Policy Dealing with Complaints Policy (Staff) Dealing with Complaints Policy (General) Enrolment Policy Family Communication Policy	Interactions with Children, Family and Staff Policy Payment of Fees Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Respect for Children Policy Responsible Person Policy Student and Volunteer Workers Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for dealing with complaints (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We will ensure that all persons making a complaint are guided by the following policy values:

- procedural fairness and natural justice
- code of ethics and conduct
- culture free from discrimination and harassment
- transparent policies and procedures
- opportunities for further investigation
- adhering to our FDC Service philosophy

Procedural fairness and natural justice

Our FDC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker; and
- The right to have the decision based on relevant evidence

SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor, students**, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

Grievances and complaints can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. Our Dealing with Complaints *Policy* ensures that all persons are presented with procedures that:

- value the opportunity to be heard
- promote conflict resolution
- encourage the development of harmonious partnerships
- ensure that conflicts and grievances are mediated fairly and
- are transparent and equitable.

DEFINITIONS

Complaint: Expression of dissatisfaction made to or about an organisation related to its products, services, staff or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required. [AS/NZS 10002:2014 Complaint Management Standard]

Complaints and Grievances Management Register: Records information about complaints and grievances received at the FDC service, along with the outcomes. This register includes documents that must be kept in a secure file, accessible only to educators and the Regulatory Authority. The register can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature. A *workplace grievance* is a complaint raised towards an employer by an employee due to a violation of legalities (workplace policies, employment contract, national standards).

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the *Education and Care Services National Law and Regulations*, National Quality Standard or alleges that the health, safety or wellbeing of a child at the FDC service may have been compromised. Any complaint of this nature must be reported by the Approved Provider or Nominated Supervisor to the Regulatory Authority within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Director is unsure whether the matter is a notifiable complaint, it is good practice to contact the [Regulatory Authority](#) for confirmation. Written reports must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated FDC employee

- any other relevant information

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using NQA ITS (National Quality Agenda IT System).

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the centre in contravention of the Regulations or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* as soon as possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183. The Approved Provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the FDC service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the FDC service.

Privacy and Confidentiality

The Approved Provider and Educators will adhere to our *Privacy and Confidentiality Policy* when dealing with grievances. However, if a grievance involves a staff member or child protection issues, a government agency may will need to be informed. (see: Reportable Conduct Scheme in our Child Protection Policy).

[Responding to incidents, disclosures and suspicions of child abuse or harm](#) **NSW**

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process

Our FDC Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct must be adhered to.

The Approved Provider/**Nominated Supervisor**/Coordinator will:

- ensure the name and telephone number of the person to whom complaints can be made is clearly visible at each FDC service/residence or venue
- ensure information about our *Dealing with Complaints Policy* is easily accessible to all families
- treat all grievances and complaints seriously and as a priority.
- ensure grievances and complaints remain confidential.
- ensure grievances and complaints reflect procedural fairness and natural justice.
- acknowledge the grievance in writing within 2 working days of receipt.
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- investigate and document the grievance or complaint fairly and impartially.

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond.
- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity)
- providing the employee with a clear written statement outlining the outcome of the investigation.
- advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint.
 - Management will provide a written response outlining the outcome and provide a copy to all parties involved
 - If a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflects the resolution and sign in agreement.
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant
- keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*
- monitor ongoing behaviour and provide support as require
- ensure the parties are protected from victimisation and bullying

- request feedback on the grievance process using a feedback form
- track complaints to identify recurring issues within the FDC Service
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised. Notification must include any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the service or any allegation that sexual or physical abuse of a child has occurred or is occurring at the service.

Family Day Care Educators and Educator Assistants will:

- ensure the name and contact number of the person to whom complaints can be made is clearly displayed at the FDC residence or approved venue
- listen to the family's view of what has happened
- clarify and confirm the grievance or complaint, documenting all the facts prior to the investigation
- encourage and support the family to seek a balanced understanding of the issue
- discuss possible resolutions available to the family. These would include external support options.
- encourage and assist the family to determine a preferred way of solving the issue
- record the meeting, confirming the details with the family at the end of the meeting
- maintain confidentiality at all times.
- refer families (as necessary) to FDC Service policies that may assist in resolving the grievance or complaint

If the grievance cannot be resolved, it is to be referred to the coordinator who will investigate further:

- if appropriate, collect relevant written evidence. This evidence will be treated in strict confidence and will be held in a secure place
- involve the Approved Provider in the conflict resolution as required
- should it be necessary to interview relevant people concerning the grievance, their involvement should be kept to the minimum necessary to establish the facts
- third parties providing evidence must also be made aware that the matter is to be kept confidential.

Should the grievance or complaint be lodged against another person(s), these persons will be interviewed separately and impartially. Individuals must be given the opportunity to respond fully to the allegations and may have another person present, as a support person, if they wish. If after investigation, it is concluded that the grievance is substantiated:

- both parties will be told of the decision and the reason for it
- immediate and appropriate steps will be taken to prevent the grievance from recurring

- if after investigation, it is concluded that the grievance is not substantiated both parties will be notified of the decision and the reason.
- the family will be informed that if they are not satisfied with any decision relating to the grievance procedure that they should consult with an external body for further advice such as the Regulatory Authorities
- if the grievance or complaint is of a serious nature or there is a reasonable belief the complaint is any allegation of sexual or physical abuse the Approved Provider is responsible to inform the Regulatory Authorities. **[insert details of your state/territory contact]**

Families will:

- be informed of our duty of care to ensure that all persons are provided with a high level of equity and fairness in relation to the management of complaints. The complaints procedure for families ensures a fair opportunity for all stakeholders to be heard and promotes effective conflict resolution within our FDC Service.
- attempt to discuss their grievances or complaints with the FDC educator as the first step to resolving the issue
- communicate any concerns they may have in writing addressed to the Approved Provider or Nominated Supervisor [see: Complaints/Grievance Form]
- raise any unresolved concerns with the Approved Provider or Coordinator
- always maintain confidentiality.

Complaints relating to the administration of Child Care Subsidy

Families who wish to raise concerns regarding the management of Child Care Subsidy should speak with the Nominated Supervisor in the first instance. The Nominated Supervisor will follow the steps as outlined in this policy, including advising the Approved Provider of all grievances.

Families can raise concerns regarding management of the Child Care Subsidy to the dedicated Child Care Tip-Off Line either via phone or email:

Phone: 1800 664 231

Email: tipoffline@desec.gov.au tipoffline@education.gov.au

Continuous improvement/evaluation

Complaints provide our FDC Service with opportunities for learning and improvement. We encourage regular and ongoing feedback from staff, children and families and the community. Our FDC Service is committed to resolving complaints through prompt investigation, open communication, and transparent

To ensure complaints and grievances are handled appropriately, the Approved Provider/Coordinator will:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Management Register* to assess that a satisfactory resolution that has been achieved
- review complaints and grievances as recorded in the *Complaints and Grievance Management Register* to ensure a pattern of similar grievances is not occurring
- review the Dealing with Complaints Policy (Families) and other related policies annually
- review the effectiveness of the FDC Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally.
- Consider feedback from staff, FDC educators and families regarding the policy and procedure.

SOURCE

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National Quality Standard. (2017).

Queensland Government- Guide for effective complaints management

<https://earlychildhood.qld.gov.au/legislationAndGuidelines/Documents/effective-complaints-management-guide.pdf>

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST/SEPTEMBER 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance • additional information added to ‘Continuous Improvement/Evaluation’ section • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		

	<ul style="list-style-type: none"> • minor formatting edits within text • hyperlinks checked and repaired as required • References/sources to DESE changed to Department of Education 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
AUGUST 2021	Policy title change to meet ACECQA guidelines- <i>Dealing with Complaints Policy (Families)</i> additional related legislation added definition of 'complaint' amended to align with ACECQA's definition guidelines notification requirements for physical or sexual abuse added sources checked for currency and updated where required	AUGUST 2022
AUGUST 2020	minor editing additional related policies reference to Reportable Conduct Scheme added link to Regulatory Authority added additional information regarding CCS tip-off line included	AUGUST 2021
AUGUST 2019	Sentences reworded/refined. Points added. Related policies alphabetised. New sources list created.	AUGUST 2020
AUGUST 2018	New policy for Family Day Care	AUGUST 2019

6.5 DEALING WITH COMPLAINTS POLICY (GENERAL)

Feedback from families, Family Day Care (FDC) educators, staff and the wider community is fundamental in creating an evolving Family Day Care (FDC) Service working towards the highest standard of care and education.

It is foreseeable that feedback will include divergent views, which may result in complaints. This Policy details our FDC Service's procedures for receiving and managing informal and formal complaints. Parents, educators, visitors, students and members of the community can lodge a grievance or complaint with the understanding that it will be managed conscientiously and confidentially.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.

6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP

7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality Service
7.2.1	Continuous Improvement	There is an effective self-assessment and quality improvement process in place.

LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

Sec. 172	Offence to fail to display prescribed information
Sec.174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
168(2)(o)	Education and care service must have policies and procedures... for dealing with complaints
169	Additional policies and procedures- family day care
170	Policies and procedures must be followed
171	Policies and procedures to be kept available
173(2)(b)	Requires an approved provider to make the name and telephone number of the person to whom complaints may be addressed clearly visible at the service
176	Time to notify certain information to Regulatory Authority
183	Storage of records and other documents

RELATED POLICIES

Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints Policy (Family) Dealing with Complaints Policy (Staff) Family Communication Policy Governance Policy	Incident, Injury, Trauma and Illness Policy Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Respect for Children Policy Responsible Person Policy Student and Volunteer Workers Policy
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for dealing with complaints (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

We aim to investigate all complaints and grievances with a high standard of equity and fairness. We will ensure that all persons making a complaint are guided by the following policy values:

- procedural fairness and natural justice
- code of ethics and conduct
- culture free from discrimination and harassment
- transparent policies and procedures
- opportunities for further investigation
- adhering to our Service philosophy

Procedural fairness and natural justice

Our FDC Service believes in procedural fairness and natural justice that govern the strategies and practices, which include:

- The right to be heard fairly
- The right to an unbiased decision made by an objective decision maker; and
- The right to have the decision based on relevant evidence

SCOPE

This policy applies to children, families, educators, educator assistants, management and visitors of the Family Day Care Service.

IMPLEMENTATION

Grievances and complaints can transpire in any workplace. Handling them appropriately is imperative for sustaining a safe, healthy, harmonious and productive work environment. Our *Dealing with Complaints Policy* ensures that all persons are presented with procedures that:

- value the opportunity to be heard
- promote conflict resolution
- encourage the development of harmonious partnerships
- ensure that conflicts and grievances are mediated fairly; and are transparent and equitable
- ensure that conflicts and grievances are mediated fairly

- are transparent and equitable.

DEFINITIONS

Complaint: Expression of dissatisfaction made to or about an organisation related to its products, services, staff or the handling of a complaint where a response or resolution is explicitly or implicitly expected or legally required. [AS/NZS 10002:2014 Complaint Management Standard]

Complaints and Grievances Management Register: Records information about complaints and grievances received at the FDC Service, along with the outcomes. The register includes documents that must be kept in a secure file, accessible only to management and regulatory authority. The register can provide valuable information to the Approved Provider and Nominated Supervisor of the service to ensure children and family's needs are being met.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature.

Mediator: A person who attempts to assist and support people involved in a conflict come to an agreement.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Education and Care Services National Law and Regulations, National Quality Standards or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the FDC Educator, Approved Provider, or Coordinator to the regulatory authority within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)).

If the Approved Provider, FDC educator or management is unsure whether the matter is a notifiable complaint, it is good practice to contact the [Regulatory Authority](#) for confirmation. Written reports must include:

- details of the event or incident
- the name of the person who initially made the complaint

- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated FDC staff member
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au and logged using [NQA ITS](#) (National Quality Agenda IT System).

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the centre in contravention of the Regulations or is mistakenly locked in/out of the centre premises (Regulation 12).

A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* as soon as possible and within 24 hours of the incident. The Regulatory Authority must be notified within 24 hours of a serious incident occurring at the centre (Regulation 176(2)(a)). These records are required to be retained for the periods specified in Regulation 183. The Approved Provider will notify the regulatory authority of any incident where there is a reasonable belief that physical and/or sexual abuse of a child has occurred or is occurring at the service, or any allegation that sexual or physical abuse of a child has occurred or is occurring at the service.

Privacy and Confidentiality: The Approved Provider and Educators will adhere to our Privacy and Confidentiality Policy when dealing with grievances. However, if a grievance involves a staff member or child protection issues, a relevant government agency will need to be informed. (see: Reportable Conduct Scheme in *Child Protection Policy*). [Responding to incidents, disclosures and suspicions of child abuse or harm NSW](#)

The Approved Provider/Nominated Supervisor/Coordinator will:

- ensure the name and telephone number of the person to whom complaints can be made is clearly visible at the each FDC residence or approved venue
- ensure information about our *Dealing with Complaints Policy* is easily accessible to all families, visitors and volunteers

- treat all grievances and complaints seriously and as a priority
- ensure grievances and complaints remain confidential
- ensure grievances and complaints reflect procedural fairness and natural justice
- acknowledge the grievance or complaint in writing within 2 working days of receipt
- discuss the issue with the complainant within 24 hours of receiving the verbal or written complaint
- investigate and document the grievance fairly and impartially
- provide details of an outcome following an investigation if required.

The investigation will consist of:

- reviewing the circumstances and facts of the complaint (or breach) and inviting all affected parties to provide information where appropriate and pertinent
- discussing the nature of the complaint (or breach) and giving the accused educator, staff member, volunteer or visitor an opportunity to respond
- permitting the accused person to have a support person present during the consultation (for example: Union Representative or family member; however, this does not include a lawyer acting in a professional capacity)
- providing the employee with a clear written statement outlining the outcome of the investigation.
- Advise the complainant and all affected parties of the outcome within 7 working days of receiving the verbal or written complaint
 - management will provide a written response outlining the outcome and provide a copy to all parties involved
 - If a written agreement about the resolution of the complaint is prepared, all parties will ensure the outcomes accurately reflects the resolution and sign in agreement.
- should management decide not to proceed with the investigation after initial enquiries, a written notification outlining the reasoning will be provided to the complainant
- keep appropriate records of the investigation and outcome and store these records in accordance with our *Privacy and Confidentiality Policy* and *Record Keeping and Retention Policy*.
- monitor ongoing behaviour and provide support as required.
- ensure the parties are protected from victimisation and bullying
- request feedback on the grievance or complaint process using a feedback form
- track complaints to identify recurring issues within the FDC Service
- notify the Regulatory Authority within 24 hours if a complaint alleges the safety, health or wellbeing of a child is being compromised. Notification must include any incident where there is a reasonable

belief that physical and/or sexual abuse of a child has occurred or is occurring at the service or any allegation that sexual or physical abuse of a child has occurred or is occurring at the FDC Service.

- review the effectiveness of the FDC Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally.

Conflict of Interest

It is important for the complainant to feel confident in

- being heard fairly
- an unbiased decision-making process.

Our FDC Service may also engage the resources of an Independent Conflict Resolution Service to assist with the mediation of a dispute. We will ensure that throughout the conflict resolution process the Services Code of Conduct is adhered to.

Continuous Improvement/Evaluation

Complaints provide our FDC Service with opportunities for learning and improvement. We encourage regular and ongoing feedback from staff, children and families and the community.

Our FDC Service is committed to resolving complaints through prompt investigation, open communication, and transparent processes.

To ensure complaints and grievances are handled appropriately, the Approved Provider/Coordinator will:

- evaluate each individual complaint and grievance as recorded in the *Complaints and Grievance Management Register* to assess that a satisfactory resolution that has been achieved
- review complaints and grievances as recorded in the *Complaints and Grievance Management Register* to ensure a pattern of similar grievances is not occurring
- review the Dealing with Complaints Policy (General) and other related policies annually
- review the effectiveness of the FDC Service policy and procedures to ensure all complaints and grievances have been handled fairly and professionally.
- Consider feedback from staff, FDC educators and families regarding the policy and procedure.

SOURCE

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

ACECQA-Using Complaints to support continuous improvement. (2018).

Australian Human Rights Commission: <https://www.humanrights.gov.au>

Education and Care Services National Regulation. (2011).

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

National Quality Standard. (2017).

Queensland Government- Guide for effective complaints management

<https://earlychildhood.qld.gov.au/legislationAndGuidelines/Documents/effective-complaints-management-guide.pdf>

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance • additional information added to 'Continuous Improvement/Evaluation' section • link to Western Australian Education and Care Services National Regulations added in 'Sources' • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
AUGUST 2021	<ul style="list-style-type: none"> • Policy name changed to meet ACECQA guidelines- <i>Dealing with Complaints Policy</i> • additional related legislation added • related policies added • definition of 'complaint' amended to align with ACECQA's definition guidelines • notification requirement for physical or sexual abuse added • additional section-continual improvement • sources checked for currency and updated where required 	AUGUST 2022	
AUGUST 2020	<ul style="list-style-type: none"> • minor editing • additional related policies • reference to Reportable Conduct Scheme added • link to Regulatory Authority added 	AUGUST 2021	
AUGUST 2019	<p>Sentences reworded/refined. Sources/references alphabetised. Related policies alphabetised. New sources list created</p>	AUGUST 2020	

AUGUST 2018	Minor modifications, taking out the Educator/Student complaint specifications for the policy reflecting a more generalised approach	AUGUST 2019
DECEMBER 2017	Modifications made to comply with National Quality Standard changes	MARCH 2018
MARCH 2017	Modifications made to adhere to Family Day Care Service	MARCH 2018

6.6 ENROLMENT POLICY

Enrolment and orientation are an exciting and emotional time for children and families. It is important to manage this time with sensitivity and support, building partnerships between families and the Family Day Care Service and engaged Family Day Care educators. Such partnerships enable the Family Day Care Service, FDC educators and families to work toward the common goal of promoting consistent quality outcomes for individual children and the Family Day Care Service. It is a condition to all families and parents that they must have to disclose child's health condition on or any time whenever they will come to know. Furthermore they also have to provide true and correct documents for child's custody order provided by court or if they don't have documents then status of the child's custody including child must have full immunised till date of enrolment., Service will only enrol child if child has up to date immunised record provided by AIR. Anything hide by parents may result of enrolment termination. Also parents or carer must have to pay remaining Gap fee or any remaining fee in time otherwise not paying on time of not paying at all can also be a reason to terminate the care and service or FDC educator can't negotiate on the standards which are established by Govt.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.

6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

LEGISLATIVE REQUIREMENTS/EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
S175	Offence relating to requirement to keep enrolment and other documents
77	Health, hygiene and safe food practices
78	Food and beverages
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
88	Infectious diseases
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
96	Self-administration of medication
97	Emergency and evacuation procedures
99	Children leaving the education and care service premises
100	Risk assessment must be conducted before excursion
101	Conduct of risk assessment for excursion
102	Authorisation for excursions
102D	Authorisation for service to transport children
157	Access for parents
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
169	Additional policies and procedures- family day care
173	Prescribed information is to be displayed

177	Prescribed enrolment and other documents to be kept by approved provider
178	Prescribed enrolment and other documents to be kept by family day care educator
181	Confidentiality of records kept by approved provider
182	Confidentiality of records kept by family day care educator
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	
Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Additional Needs Policy Arrival and Departure Policy CCS Governance Policy Children's Belongings Policy Control of Infectious Diseases Policy Dealing with Complaints Policy Delivery of children to and collection from Education and Care Service Premises Policy Excursions/Incursion Policy Emergency Evacuation Policy	Family Communication Policy Immunisation Policy Incident, Injury, Trauma and Illness Policy Interactions with Children, Family and Staff policy Medical Conditions Policy Orientation of Families Policy Payment of Fees Policy Privacy and Confidentiality Policy Record Keeping and Retention Policy Safe Transportation Policy Sun Safety Policy Withdrawal of a Child Policy
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PURPOSE

We aim to ensure children and families receive a positive and informative enrolment and orientation process that meets their individual needs. We strive to establish respectful and supportive relationships between families and the Family Day Care Service to promote positive outcomes for children whilst adhering to legislative requirements.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

ENROLMENT

According to the Child Care Provider Handbook (June 2019 August 2022) 'enrolling children is a requirement under Family Assistance Law for all children who attend childcare (or have an arrangement for care) regardless of their parent's or guardian's eligibility for Child Care Subsidy...An enrolment links the child, the individual claiming the subsidy and the childcare service.' An enrolment notice is required for each child attending the service. This reflects the type of arrangement that is in place between the provider and the family/individual or organisation.

IMPLEMENTATION

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for enrolment and orientation (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation 170).

Our Service accepts enrolments of children aged between 6weeks-12 years of age.

Enrolments will be accepted providing:

- a) the maximum daily attendance does not exceed the licensed capacity for each family day care educator engaged
- b) a vacancy is available for the booking required
- c) the adult to child ratio is maintained.

The Family Day Care Service recognises the educator as an agent for the Service in relation to the enrolment of children into the Service as permitted by National Education and Care Services Regulations and provide an efficient enrolment procedure that is clear and unambiguous to Family Day Care educators and families.

PRIORITY OF ACCESS

Our FDC Service aims to assist families who are most in need and may prioritise filling vacancies with children who are:

- o At risk of serious abuse or neglect
- o A child of a sole parent who satisfies, or parents who both satisfy, the activity test through paid employment.

Providers are asked to (but are not legally obliged to prioritise children). CCS Handbook p.51

ENROLMENT

When a family has indicated their interest in enrolling their child in our Family Day Care Service, we will organise an enrolment meeting to share information and build relationships.

- Families will be provided with a range of information about our Family Day Care Service which may include:
 - the service philosophy, inclusion, programming methods, incursions, excursions, fees, policies, procedures, SunSmart requirements, regulations and the licensing and assessment process for our State, signing in and out procedure, the National Quality Framework, FDC educator qualifications, educator and parent communication strategies.
- Enrolment interviews with families will be conducted by the coordination team
- Families will be provided with information and referral to FDC educators who may be available for their care needs
- A mutually convenient time will be organised to visit the FDC residence for an enrolment interview (Families may be encouraged to meet with several educators in their area who have current vacancies).
- Any matters that are of a sensitive nature, such as discussing a child’s medical needs, Court Orders, parenting plans or parenting orders, will be discussed privately with the coordination team. Families will be required to bring any documents required in relation to court orders, medical needs or plans.
- Families will complete the enrolment form informing the coordination team of their child’s interests, strengths and individual needs- (e.g.: settling strategies for young children; before and after school needs)
- Families are required to pay an enrolment fee and two-week bond which is calculated at full fee to secure the position. Failure to pay the upfront fees will lead to the child not being accepted. When 2 weeks’ notice of withdrawal is given, the bond will be refunded if all accounts are up to date.
- Families are invited to ask questions and seek any further information they require
- Families will be provided with a Parent Handbook
- Families will be provided with vacancies, a start date and a suitable time for the child to be orientated to the FDC educator’s residence/venue
- If a family or child uses English as a second language or speak another language at home, we request that at this time families provide us with some key words in the language/s the child speaks so that the FDC educator can learn the words
- Families who wish to receive CCS as reduced fees must apply for CCS through the myGov website/app, this includes completing the Child Care Subsidy activity test.
- Information about gap fees and absences will be discussed.
- It is a legal requirement that prior to the child starting at the FDC Service we have all required documents including
 - the completed enrolment form

- medical management plans (if relevant) completed by the child’s general practitioner
- birth certificate or passport
- a current Immunisation History Statement from the Australian Immunisation Register (AIR) showing the child is up to date with immunisations for their age *and*
- details of any court orders, parenting orders or parenting plans
- It is a requirement of the Family Assistance Office that immunisation information held by the FDC Service is kept current. Parents are reminded mid-way through the year to provide any immunisation updates to the Service in order to continue receiving childcare subsidy.
- Children must meet the immunisation requirements to be eligible for Family Tax Benefit (FTB) Part A and Child Care Subsidy (CCS). Some exemptions apply; however families are advised that vaccination conscientious objection is not a valid exemption.
- Parents must notify the Service if their child is not up to date with their immunisations for their age via the enrolment form and attach the required documentation on their AIR immunisation history statement
- National and state legislation in relation to immunisation for childcare [Adjust to meet your state/territory requirements for enrolment]
- (NSW) To attend childcare, children must be fully immunised or on an approved vaccination catch-up program. If a child cannot be immunised due to a medical condition they may still be enrolled at the service with supporting documentation (Medical Exemption Form). If a child is on a ‘catch-up’ schedule for immunisations they may still be enrolled at the Service. The child’s immunisation history statement will indicate that the child is on a catch-up schedule. [read more [here](#)]
- (QLD services) Queensland legislation does not make immunisation mandatory for children to be enrolled in approved ECEC services. Enrolment and/or attendance of children is at the discretion of the service. Each Queensland ECEC service must adjust their policy to provide clear information to families. [read more [here](#)]
- (Victoria) To have an enrolment confirmed for a child in long day care, kindergarten, family day care or occasional care, parents/carers have to provide the service with a current immunisation history statement to show the child is up to date with all vaccinations that are due for their age. [read more [here](#)]
- (SA services) Since August 2020, children must be fully immunised or be on an approved catch-up vaccination program or have an approved exemption from meeting immunisation requirements to be enrolled in and attend an early childhood service. [read more [here](#)]
- (WA services) Effective 22 July 2019, only children who have an AIR immunisation history statement no more than two months old, or a valid immunisation certificate issued or declared by the Chief

Health Officer can be enrolled in a child care service, community kindergarten or school. [read more [here](#)]

- (Australian Capital Territory) Child Care services will require an immunisation history statement for enrolment from the AIR. Children do not need to be immunised to attend child care services. However, if an outbreak occurs, unimmunised children may be excluded from child care for a period of time. [read more [here](#)]
- (Tasmania). Child Care services will require an immunisation history statement for enrolment from the AIR. Children do not need to be immunised to attend child care services. However, if an outbreak occurs, unimmunised children may be excluded from child care for a period of time. [read more [here](#)]
- (Northern Territory). There are no specific immunisation requirements to attend child care services. However, if an outbreak occurs, unimmunised children may be excluded for a period of time. Child care services may require an immunisation history statement for enrolment.
- Unborn children may be placed on the waiting list to avoid the unfair allocation of places that may occur if children can only be placed on the list after birth. If an unborn child is placed on the waiting list, the family must advise the Service of the expected birth date. It is the responsibility of the parent to inform the coordination team of the name and date of birth of the child within three months after the expected birth date. If this information is not provided, then the child and family details will be removed from the list.
- It is the family's responsibility to keep the Service informed of any changes to the information recorded on the application form.

ENROLMENT PACK

Families will be provided with an enrolment pack which consists of:

- Family Handbook which outlines the FDC Service's operation and philosophy
- current fee structure and payment details
- Child Care Subsidy information
- Information on the National Quality Framework, National Quality Standard and the approved frameworks- Early Years Learning Framework and My Time, Our Place
- ECA Code of Ethics brochure
- Lunchbox and Snack ideas
- Munch and Move Fact Sheets

FAMILIES WILL BE ASKED TO PROVIDE THE FOLLOWING INFORMATION FOR ENROLMENT OF THEIR CHILD:

1. Full name/s of parent/s (or the person legally responsible for the care of the child) residential address and contact telephone number
2. Each parent's occupation, work hours and educational qualifications [delete if not required in your state/territory]
3. The full name, residential address and contact telephone number of a person or persons, authorised by the parent who may be contacted in case of an emergency concerning the child if a parent is unable to be contacted (authorised nominee)
4. The full name, residential address and contact telephone number of any person authorised by the parent to collect the child from the FDC educator's residence (authorised nominee)
5. Full name of the child
6. Child's date of birth
7. Child's birth certificate or passport
8. Child's residency status
9. Child's address
10. Gender of the child
11. Cultural background of the child
12. Provision of care – if care will be a routine and/or casual etc.
13. Session start and end times
14. Complying Written Agreement including fee information
15. Immunisation History Statement
16. Any court orders or parenting agreements regarding the child
17. The primary language spoken by the child; if the child has not learnt to speak, the child's family's language
18. Any special requirements of the family, including for example cultural or religious requirements
19. The individual needs of a child with a disability or with other additional needs
20. A statement/authorisation indicating the name and address and contact details of any person who is authorised to consent to the administration of medication to the child
~~parental permission for any medications to be administered. [Only a parent on the enrolment form can authorise the administration of medication.]~~
21. Authorisation and signature by parent/authorised person for the approved provider, nominated supervisor or FDC educator to seek:
 - o medical treatment for the child from a registered practitioner, hospital or ambulance service
 - o transportation of the child by an ambulance service
22. Child's Medicare number (if available)

23. Specific healthcare needs of the child, including allergies and intolerances
24. Any medical management plan for a specific severe healthcare need, medical condition, or allergy, such as an Anaphylaxis Emergency Management Plan or Risk Minimisation Plan.
25. Details of any dietary restrictions for the child
26. The name, address and telephone number of the child's doctor
27. Authorisation for regular occurring transportation and regular outings/excursions
28. CRN for child and claimant
29. Child Care Subsidy Assessment confirmation

ORIENTATION OF THE SERVICE

During parent interviews and orientation of the Family Day Care residence with their FDC Educator and Coordinator, families will:

- be provided with the enrolment form to be completed or shown how to complete this through an online platform
- have Child Care Subsidy (CCS) explained to families and assistance may be offered to assist with the application process.
- be provided with an outline of the Service policies which will include key policies such as: Payment of fees, Sun Safe, Incident, Injury, Trauma and Illness, Control of infectious diseases, Sick child policy and Administration of Medication
- be shown the signing in/out process at the FDC residence
- be advised of appropriate clothing for children to wear each day, including shoes, hats and sunscreen
- be informed about policies regarding children bringing in toys from home
- be introduced to the FDC educator assistant (if applicable)
- be taken on a tour around the residence or venue
- be asked to share information on any medical management plan or specific healthcare needs of their child (if applicable)
- be informed of the daily report and how parents can view this or informed about the online platform/App the FDC service may use
- be introduced to the routine and educational program, including portfolios and the observation cycle
- be informed about communication strategies including meetings, interviews, newsletters, emails, etc.
- be given the opportunity to set goals for their child
- confirm preferred method of communication
- be advised that it is their responsibility to notify the FDC educator of any changes to their current details on enrolment forms (e.g.: new phone numbers)

FINAL CHECKS BY COORDINATION TEAM WILL ENSURE:

- enrolment form is completed accurately and, in its entirety
- authorisations are signed by both parents/guardians
- a child with medical needs does not begin at the service unless a medical management plan is received and medication is brought to the service each day
- the child's Medical Management Plan is recorded, and this information is shared/distributed to the FDC educator
- Action Plans are completed in full (if relevant)
- Administration of Medication forms are completed (if relevant)
- the Medical Conditions Policy is provided to families for children with a specific health care need, allergy or other relevant medical condition before the child begins education and care at the Service
- Risk Minimisation Plans and Communication Plans are requested/completed with parents/guardians for children with medical needs
- FDC educator/educator Assistants are aware of the new child including any medical conditions, interests, developmental needs, and strengths
- immunisation history statement and birth certificate have been sighted and photocopied
- the child is added to the Observation cycle
- the enrolment is lodged through [enter child care software provider] or PEP with Department of Education Department of Education, Skills and Employment (DESE)
- a file for the Child's information is created
- contact is made with families to share details on how the child is settling to care during the first few weeks
- families are provided with an orientation survey to complete within the first 6 weeks of starting to gain feedback about the orientation and enrolment process.

FAMILY DAY CARE EDUCATORS WILL:

- ensure an enrolment record is kept for each child which contains all the information set out in regulation 160 including all required authorisations relating to medical treatment, regular outings and transportation and health information
- keep prescribed enrolment and other documents including medication record and children's attendance records
- keep all records confidential

FAMILIES WILL:

- complete all documentation required by the FDC Service for enrolment
- provide required authorisations as indicated on enrolment form
- notify the FDC Service of any specific health care needs of the child, including medical conditions and allergies and provide a medical management plan for child if applicable
- ensure all information about the child and family is kept up to date

CHILD CARE SUBSIDY

[Child Care Subsidy](#) (CCS) offers assistance to families to help with the cost of childcare for children aged 0-13 years. There are three factors that determine a family's level of CCS. These are:

- [Combined annual family income](#)
- [Activity test](#) – the activity level of both parents
- [Service type](#) – type of child care service and whether the child attends school

Documentation may be required such as Australian driver licence, Australian passport, Foreign passport, Australian birth certificate, Australian Marriage certificate, Australian citizenship certificate

- Families are provided with a Customer Reference Number (CRN)
- Child Care Subsidy is paid directly to providers to be passed on to families as a fee reduction
- Families will contribute to their childcare fees and pay the Service the difference between the fee charged and the subsidy amount- generally called the 'gap fee'
- Families may also be eligible for [Additional Child Care Subsidy](#) depending upon their circumstance

COMPLYING WRITTEN ARRANGEMENT

The Provider and Parent must enter into an agreement regarding the planned arrangements for care of a child, this is called a *Complying Written Arrangement* (CWA) and is an agreement to provide care in return for fees.

- The CWA must be recorded, and the parent must confirm the terms of the agreement either electronic or hard copy and this must be kept by the provider.
- The CWA must include the following information:
 - the names and contact details of the provider and the individual(s)
 - the date the arrangement starts
 - the name and date of birth of the child (or children)
 - if care will be provided on a routine basis and if so, details about the days on which sessions of care will usually occur
 - the usual start and end times for these sessions of care

- whether care will be on a casual or flexible basis (in addition to, or instead of, a routine basis)
- details of fees charged under the arrangement (providers can reference a fee schedule or information available on their website), which the parties understand may vary from time to time.
- Where there are certain changes (fees or booked days) to the individual Complying Written Arrangements (CWA) for care between the provider and an individual, the provider must update the arrangement in writing, and the families are required to confirm the changes by signing the updated CWA.
- An enrolment notice must be submitted within 7 days following the signed CWA and enrolment acceptance.
- Once the provider submits an enrolment notice the family will be asked to confirm the enrolment through their myGov account.

ADDITIONAL CHILDCARE SUBSIDY PROCEDURE

Our Service will ensure all ACCS applications are managed in line with the [Guide to Additional Child Care Subsidy \(child wellbeing\)](#) and [CCS Handbook](#)

- Parents can apply for ACCS (grandparent), ACCS (temporary financial hardship) or ACCS (transition to work) through Centrelink directly
- The provider can apply for ACCS (child wellbeing) through the CCS software or PEP for children identified at risk of serious abuse or neglect
- Once a child has been identified as 'at risk' the FDC service will check the ACCS eligibility requirements from the Guide to the ACCS (Child Wellbeing)
- If the FDC Service deems the child is eligible for ACCS the FDC Service will submit an initial ACCS Certificate for a 6-week period.
- The FDC Service needs to provide a referral to an appropriate support agency in conjunction with the submission of an ACCS certificate
- If further ACCS (Child Wellbeing) is required following the initial 6-week certificate the service may apply for a Determination for a period of up to 13 weeks.
- Following an application for an ACCS 6-week certificate the provider will abide by the requirement to make an ACCS (child wellbeing) referral to an appropriate support agency
- Following an application for an ACCS 12-week determination the provider will abide by the requirement that the application must be accompanied by evidence, dated less than 6 months old, or a statutory declaration that supports the provider's view that the child continues to be 'at risk'

- If the child continues to be 'at risk; after the initial 13-week determination, then the provider needs to lodge a subsequent determination application.

ENROLMENT RECORD KEEPING

Our *Record Keeping Policy* outlines the information and authorisations that we will include in all child enrolment records.

ON THE CHILD'S FIRST DAY

Consideration will be made to each family regarding the initial settling in period and strategies may be offered to assist both parents and the child. Parents will be reassured that they are able to stay with their child for as long as they choose in the early days; speak to their child's FDC educator; contact the FDC educator during the day to 'check' in on their child and request help with separation if this is a problem for their child.

On the first day, the child and their family will be welcomed and shown where or how to sign their child in/out of the FDC educator's residence or approved venue

- The FDC educator will discuss what is happening during the day and show where the child's locker is located
- Information about collecting their child at the end of the day will be discussed
- the FDC educators will ensure information about the child's first day is shared with parents (through online APP or daybook)
- Management will ensure the orientation checklist has been completed and all required documents and information has been received from families.

CONTINUOUS IMPROVEMENT

- Our *Enrolment Policy* will be updated and reviewed annually in consultation with families, staff, educators and management.

SOURCES

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

ACECQA. (2021). Policy and procedure guidelines. *Enrolment and Orientation*.

Australian Government Department of Education ~~Skills and Employment~~ (2019) (2022) Child Care Provider handbook <https://www.deese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook> <https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook>

Australian Government Department of Education ~~Skills and Employment~~ (2019) (2021) Guide to Additional Child Care Subsidy (child wellbeing) <https://www.deese.gov.au/additional-child-care-subsidy/resources/guide-accs-child-wellbeing> <https://www.education.gov.au/child-care-package/resources/guide-accs-child-wellbeing> Australian

Government Services Australia <https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register/how-get-immunisation-history-statement>

Australian Government Guide to Social Policy Law. Family Assistance Guide Immunisation- approved exemptions (FTB). <https://guides.dss.gov.au/family-assistance-guide/2/1/3/40>

Department of Human Services (Centrelink):

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

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

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

Government of Western Australia. Department of Health. (2021). Western Australian Immunisation Requirements. Guidelines for persons in charge of child care services, community kindergartens and schools.

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

National Centre for Immunisation Research and Surveillance. (2021). No Jab No Play, No Jab No Pay

<https://www.ncirs.org.au/public/no-jab-no-play-no-jab-no-pay>

NSW Government Health. (2019). Questions and answers about vaccination requirements for child care:

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

Revised National Quality Standard. (2018).

Victoria State Government. Requirements for all early childhood services.

<https://www.education.vic.gov.au/childhood/providers/regulation/Pages/regallservices.aspx>

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	SEPTEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> regular policy maintenance link to Western Australian Education and Care Services National Regulations added in 'Sources' minor formatting edits within text hyperlinks checked and repaired as required update of name change from DESE to Department of Education links within policy updated from DESE.gov.au to education.gov.au 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
SEPTEMBER 2021	<ul style="list-style-type: none"> Additional law/regulations added- ACECQA Guidelines to Policy and Procedures document-(August 2021) Additional information re: immunisation requirements for each state/territory. Services to delete information that is not relevant to their service. Additional sections added for FDC educators and families 	SEPTEMBER 2022	

	<ul style="list-style-type: none"> • Further information regarding Additional Child Care Subsidy included • Checked and updated links used within policy • Updated Related Policies 	
OCTOBER 2020	<ul style="list-style-type: none"> • Family Law inclusions • Additional section related to CWA and ACCS 	SEPTEMBER 2021
JUNE 2020	<p>resumption of CCS and ACCS from 13 July 2020</p> <ul style="list-style-type: none"> • additional information included about enrolment, CCS application process, Activity Test, Complying Written Arrangement (CWA), and immunisation requirements • rewording of some content • deleted sections that were repetitive • order changed for some items required for the enrolment of the child 	SEPTEMBER 2021
SEPTEMBER 2019	<ul style="list-style-type: none"> • Priority Access Guidelines removed- new information added • Sentences reworded/refined • Additional information added • Points re-ordered for better flow • Sources/references corrected, updated, and alphabetised • References to 'conscientious objection' updated • New reference/source added • Related policies alphabetised 	SEPTEMBER 2020
SEPTEMBER 2018	<ul style="list-style-type: none"> • Additional information added in regards to child care subsidy requirements 	SEPTEMBER 2019
MARCH 2018	<ul style="list-style-type: none"> • Modifications made to update information relating to Child Care Subsidy changes 	MARCH 2019
DECEMBER 2017	<ul style="list-style-type: none"> • Modifications made to comply with National Quality Standard and notice of change to child care rebate and benefits 	MARCH 2018
MARCH 2017	<ul style="list-style-type: none"> • Modifications made to adhere to Family Day Care Service 	MARCH 2018

6.7 OPEN DOOR POLICY

We value and pride ourselves on our partnership with families. We believe families are children's first teachers and therefore we embrace parents, guardians and family involvement within our Family Day Care Service. Participation by parents, guardians and other family members, conveys a positive impression to children. Children feel supported and a sense of belonging and well-being is promoted.

We believe in offering an open-door policy welcoming family to visit our Family Day Care residence when it is convenient for them.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
84	Awareness of child protection law
155	Interaction with children
157	Access for parents
161	Authorisations to be kept in enrolment record
165	Record of visitors
181	Confidentiality of records kept by approved provider

RELATED POLICIES

Child Safe Environment Policy Code of Conduct Dealing with Complaints Policy (Family) Enrolment Policy	Family Communication Policy Interactions with Children, Family and Staff Policy Orientation of Families Policy
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PURPOSE

To ensure the best care for children and families, we believe it is important to provide families with the opportunity to visit their child's Family Day Care residence and/ or approved venue and participate in the program at a time that is convenient for them. We acknowledge that families provide a wealth of valuable information and understanding about their child and we foster strong, respectful partnerships between our staff and educators and families. We encourage families to join participate in family play sessions and home visits.

SCOPE

This policy applies to children, families, educators, educator assistants, management, **Approved Provider, Nominated Supervisor** and visitors of the Family Day Care Service.

IMPLEMENTATION

We operate with an open-door policy, where families are welcome to visit our Family Day Care residence during operating hours. There are many opportunities for family involvement, and we communicate these through regular newsletters, our family notice board, and our digital communication app- **[enter information about your service's app/communication tool]**. We recognise that time is valuable to all families, which is why we accommodate many forms of participation and contribution. Our FDC Service is committed to creating and maintaining a child safe environment and embeds the Child Safe Standards.

"Children thrive when families and educators work together in partnership to support young children's learning."

(Early Years Learning Framework, p.9)

THE APPROVED PROVIDER/MANAGEMENT AND FAMILY DAY CARE EDUCATORS WILL ENSURE:

- families are always welcome to spend time at their child's FDC residence and share special moments with their children, provided
 - their entry would not pose a risk to the safety of the children at the residence
 - recommendations from the Public Health Unit or other Government authority suggests families and visitors do not enter Early Childhood Education and Care Services (ECEC) due to an outbreak of an infectious diseases
- families are aware of our open-door policy and are welcome to join in learning activities and celebrate events and special days held at the residence or family play sessions

- families are provided with information about special days and events they may want to participate in.
For example:
 - Disco
 - Easter Hat Parade
 - Mother's Day morning teas
 - Father's Day BBQ breakfast
 - Open Day
 - Grandparents Day
 - Graduation Ceremonies or events
 - Christmas Celebrations
 - Excursions/Incursions
 - Cultural visits
 - Story Time
 - Cooking Experiences
- FDC educators will provide families with information about their usual routine to ensure any visits are planned during normal activities
- FDC educators are flexible and will try to accommodate involvement by family members on different times and days of the week
- that reasonable steps are taken to ensure any parent, family member or visitor that may pose a risk to the safety of the children and FDC educator are not permitted entry.

FAMILIES CAN:

- visit the FDC residence at all times- subject to any Public Health Orders or Government recommendations for families or visitors not entering ECEC (e.g., during an outbreak of an infectious disease)
- participate in our program by sharing their skills with the children. This may include playing an instrument, telling a story, sharing cultural traditions, cooking experiences, workshops etc.
- make an appointment with the FDC educator or coordinator to discuss their child. This may include evaluating their child's program and providing feedback, raising concerns or setting new goals.
- donate recyclable material that can be used within our early childhood program
- discuss any changes that have occurred in the child's life such as changes in family circumstances, moving to a new house, death of a family member or friend in order for the FDC educator to best support children through difficult times
- attend events and celebrations that are organised throughout the year

- share feedback, ideas and thoughts about the FDC Service
- remain informed about what is happening within the FDC Service through discussions, newsletters, social media etc.
- assist our FDC Service provide a child safe environment by notifying management of any change to current court orders or parenting orders.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Open Door Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

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

Australian Government Department of Education [Skills and Employment](#). (2009). *Belonging, Being & Becoming: The early years learning framework for Australia*.

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

Early Childhood Australia Code of Ethics. (2016).

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

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

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Annual policy maintenance • continuous improvement/reflection section added • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
NOVEMBER 2021	<ul style="list-style-type: none"> • inclusion of Public Health Orders/Gov’t recommendations that may prevent families/visitors from entering ECEC service during pandemic • National Regulations added • Reference to implementing Child Safe Standards added • Sources checked for currency 		NOVEMBER 2022

NOVEMBER 2020	<ul style="list-style-type: none"> • Minor editing to policy • inclusion about planning visits around normal routines • sources checked and updated 	NOVEMBER 2021
NOVEMBER 2019	New policy drafted for Family Day Care services	NOVEMBER 2020

QA- 7

7 GOVERNANCE AND LEADERSHIP

7.1 ORIENTATION OF FAMILIES POLICY

Enrolment and orientation to a Family Day Care service is an exciting and sometimes, an emotional time for children and families. It is important to manage this time with sensitivity and support, building partnerships between families, the Family Day Care Service, our Family Day Care educators, and importantly, trust with the child. Such partnerships enable the Service and families to work toward the common goal of promoting consistent quality outcomes for individual children and the Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTNERSHIPS		
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role.
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in their service and contribute to service decisions.
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected, and families share in decision-making about their child's learning and wellbeing.
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
6.2	Collaborative partnerships	Collaborative partnerships enhance children's inclusion, learning and wellbeing.
6.2.3	Community and engagement	The service builds relationships and engages with its community.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
177	Prescribed enrolment and other documents to be kept by approved provider
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents

RELATED POLICIES

<p>Arrival and Departure Policy</p> <p>Administration of Medication Policy</p> <p>Anaphylaxis Management Policy</p> <p>Asthma Management Policy</p> <p>Child Safe Environment Policy</p> <p>Code of Conduct Policy</p>	<p>Delivery of Children to, and Collection from EEC</p> <p>Service Premises Policy</p> <p>Enrolment Policy</p> <p>Incident, Injury, Trauma and Illness Policy</p> <p>Payment of Fees Policy</p> <p>Privacy and Confidentiality Policy</p> <p>Sick Children Policy</p>
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PURPOSE

We aim to ensure children and families are provided with an orientation procedure that allows the family to transition into the Family Day Care Service positively and well-informed, meeting the children and families' individual needs. We strive to establish respectful and supportive relationships between families and the Family Day Care Service to promote positive outcomes for children whilst adhering to legislative requirements.

SCOPE

This policy applies to children, families, educators, educator assistants, management, **Approved Provider, Nominated Supervisor** and visitors of the Family Day Care Service.

IMPLEMENTATION

Orientation is an important process for children, families, educators/educator assistants and the Family Day Care Service to gain vital information about the individual child's needs, interests, and strengths. To enable children to feel safe and secure, and to set the foundations for a trusting partnership, we feel that it is necessary for the family to attend an orientation visit. This visit or visits assist the child to adjust to a new setting and helps to make the transition from home to the Family Day Care residence/or venue a smooth and positive experience.

ORIENTATION OF THE FAMILY DAY CARE SERVICE

Prior to an orientation visit, the Family Day Care coordinator unit will discuss the following to gain a better understanding in supporting the family:

- the cultural and/or linguistic background for families from non-English speaking backgrounds (external support may be required)
- the family's needs in relation to work or other commitments
- the hours care will be required (including weekend or after-hours care)
- the family's previous knowledge or experience of other children's services, including Family Day Care Services
- any additional needs of the child and/or their family
- any court orders or parenting orders that are applicable to the child
- information about the Family Day Care Service philosophy and curriculum
- the child's interests
- family goals and expectations
- strategies to help settle into the Family Day Care Setting
- any allergies or dietary needs of the child
- emergency or health care plans for the child if relevant
- the Family Day Care Service routines

THE APPROVED PROVIDER/MANAGEMENT/COORDINATOR WILL:

- provide information about suitable FDC educators for their child to parents/family
- organise orientation visits to FDC educator's residence and provide information about:
 - the name of the FDC educator and educator assistant (if relevant)

- directions to the service residence
 - where to park
 - suggested dates and time to visit
- follow up parents after orientation visit and proceed with the enrolment process OR offer alternative orientation visits to other FDC educators
- ensure the orientation process is well organised, flexible and informative
- provide opportunities for the child and family to visit the Family Day Care residence/or venue and familiarise themselves with the environment. The child may be invited to participate in the activities and experiences if they feel comfortable.
- ensure the FDC educator creates a welcoming environment and interact positively with the child and family
- respect the child and family at all times, acknowledging the individuality of each parenting style
- encourage families to ring, email or visit the FDC educator or service as often as they like when their child has commenced care
- reassure families that if their child is distressed over a long period of time during orientation and transition to care, the FDC educator will contact them
- contact support agencies for children with additional needs to assist in transition
- encourage families to provide feedback about the Orientation process
- ensure families are informed that critical information from their child's enrolment form is communicated with FDC educators- (emergency contacts, authorised nominees, court orders, immunisation status, medical and health conditions where relevant)
- provide families with a list of documents that will be required for enrolment- (birth certificates, immunisation records, relevant court orders, parenting orders etc).

EDUCATORS/EDUCATOR ASSISTANTS WILL:

- greet children and families upon arrival
- discuss with families the best transition process for their child
- reassure families that they will phone parents if the child remains distressed
- encourage families to stay as long as they need to in order to reassure their child
- seek information about the child and family throughout the orientation process
- discuss suggestions for developing a routine to say goodbye to their child each day
- create a welcoming and inviting environment
- invite families to FDC play-sessions and other opportunities to connect with a larger group of families with young children in their area

7.1.1 DURING THE PRE-ENROLMENT AND/OR ORIENTATION OF THE FAMILY DAY CARE SERVICE FAMILIES WILL BE:

- provided with an enrolment form to be completed (assistance to complete this form is available if required)
- provided with an outline of the FDC policies which will include fee payment, sun safety, incident, injury, trauma or illness and medical authorisation
- provided with information about Child Care Subsidy (CCS) and myGov website
- provided with a Service Family Handbook
- asked to provide their child's immunisation history statement when enrolling their child- Australian Childhood Immunisation Record
- advised of the enrolment fee and bond
- shown the signing in/out process
- advised of appropriate clothing for the child to wear including appropriate shoes
- advised of what the child will be required to bring each day
- informed about policies regarding children bringing in toys from home
- informed about wearing sun safe hats and application of sunscreen.
- required to discuss medical management plan and allergies (if applicable).
- advised about the daily report/journal and how parents can view this
- introduced to the routine and educational program. This includes portfolios (if applicable) and the observation cycle.
- informed about FDC Service communication methods including meetings, interviews, newsletters, emails etc.
- able to set family goals for their child
- asked to confirm their preferred method of communication
- taken on a tour around the FDC residence
- invited to visit the FDC residence on other occasions to assist in the orientation process.

EVALUATION AND FOLLOW UP

Once the child has attended the FDC Service for a few days, the educator will ensure they:

- speak directly with the family to ask how their child and the family has settled into the routine of childcare
- welcome any questions or concerns the family may have

- provide information to the family of how their child has settled in these early days (interests, friends, songs they like to sing, craft activities etc.)
- request families to offer suggestions of how the FDC Service could improve the orientation process
- request families to complete the Orientation Satisfaction Survey for New Families (see Appendix 1).

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Orientation of Families Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

7.1.2 Absent Claim Policy for Family Day Care Educators

Objective

To ensure transparency, consistency, and adherence to government guidelines regarding the claiming of absent days for children under the care of Nurture Childcare and Education Services' family day care educators.

Policy:

Casual Care and CWA Forms:

Educators must complete the CWA (Complying Written Arrangement) form for any child booked on a casual basis. If a casually booked child fails to attend on the specified day, the educator must have a completed CWA form on record if claiming absent of casual child and must upload on child's note and should have email/s or message/s of communication as proof of genuine claim. Service's Nominated supervisor reserves the right to claim or reject the claim of that absent.

- **First and Last Day Attendance:**
During the orientation period, educators must inform parents that children are required to attend the first and last day of their care. Failure to do so will result in parents being liable for payment for all booked days, regardless of attendance, in line with childcare subsidy guidelines.
- **Recording Absences:**
Educators are responsible for accurately recording all child absences. Proof of absences, such as emails or messages from parents specifying the reason for the child's absence, must be maintained and can be asked any time by the service nominated supervisor in order to inspect them and can be reject the claim if no evidence was kept at the time of claim or late emails or messaged will not be entertained.
- **Replacement Children:**
If an educator chooses to replace a permanently booked child with another due to the former's absence, the educator must have a valid reason and proof for the permanent child's absence e.g., message or email by the parents prior or on the day of absent claimed.
- **Overseas Visits:**
Although there's an allowable six-week period for claiming absences, Nurture Childcare and

Education Services strictly adheres to government guidelines concerning prolonged absences, such as overseas visits. As such, the service reserves the right to decline claims for these absences. Educators and parents intending to make such a claim must:

- Inform the service's nominated supervisor in writing, at least two weeks prior to the overseas visit.
- Clearly state the duration of the overseas visit and express the intent to retain the child's spot permanently.
- Provide a valid reason for the absence claim, specifying whether the decision was solely the parents' or was also suggested by the educator.

Claims made post the two-week notice period or after visiting overseas without prior notification will be rejected. Educators must have to send their intention to claim the absents with the message or with the email of parents at-least two weeks prior to overseas visit. Absents will not be entertain espically when educator has replacement of other casual or permanent child in care.

- **Regular Absence Claims:**
Nurture Childcare and Education Services reserves the right to reject claims for children or families who frequently claim absences without adequate reasoning or proof. Should an educator request proof of absence from parents and not receive it, the service can deny the claim based on a doubtful situation. In such cases, educators have the right to claim the full fee from parents.
- **Educator Unavailability:**
If educator refuses care due to personal reasons yet claims subsidy for those days, parents must report this to the service's nominated supervisor.

Rationale:

Ensuring the integrity of the subsidy claim process is paramount. Frequent and undocumented absences are potentially subject to misuse, placing both educators and the service at risk of non-compliance with Australian family law and associated regulations. This policy aims to foster accountability, ensure accurate documentation, and uphold the trust placed in us by both families and the governing body.

Review:

This policy will be reviewed annually, or when necessary, based on feedback or changes in regulations.

By adhering to this policy, we aim to ensure that Nurture Childcare and Education Services maintains its reputation for transparency, trustworthiness, and dedication to the children and families we serve.

7.1.3 Absent Claim Policy: Adherence to Government Guidelines

Objective:

To ensure that all stakeholders, including educators and parents, adhere to the strict guidelines provided by the Australian government concerning absentee claims.

Policy Clarifications Based on Government Guidelines:

Understanding the Six-Week Guideline:

While government resources mention the possibility of claiming up to six weeks of absences, it should not be misconstrued as an automatic entitlement. This provision does not grant parents or educators the leverage to pressurize the nominated supervisor into approving these claims.

- **Purpose of Absentee Provisions:**

The government's guidelines clearly state that the intent behind allowing absentee claims is not for parents or educators to exhaust the maximum limit. The essence of these provisions is to assist families during genuine situations where the child cannot attend care, not to allow educators to benefit unduly from the associated subsidy.

- **Service's Discretionary Powers:**

Nurture Childcare and Education Services' nominated supervisor is obliged to exercise strict discretion when evaluating absence claims. All claims must pass through meticulous scrutiny to ensure they align with the spirit of the Australian Family Assistance Law. The service holds the right to decline claims if it is found that the proper procedure hasn't been followed by parents or educators.

- **Accountability & Consequences:**

The responsibility to adhere to the rules and regulations set by the government rests squarely on the shoulders of the childcare service. Incorrect procedures or misuse of the absentee provisions can result in sanctions or other consequences for the service. Given this accountability, the service is well within its rights to demand strict compliance from both educators and parents.

Rationale:

The core principle of the absentee claim provisions under the Australian Family Assistance Law is to extend support to families during genuine circumstances where the child is unable to attend childcare. It is not designed to provide an undue advantage to educators or to be taken advantage of by parents. Every claim impacts the integrity of the service and its adherence to national regulations. Hence, this policy has been framed to ensure transparency, uphold the service's reputation, and maintain the trust placed in us by the governing bodies and the families we serve.

Nurture Childcare and Education Services retain the right of reject the absent claims without Prior notification.

- **Review:**

This policy will be periodically reviewed based on feedback, updates in the Australian Family Assistance Law, or other pertinent regulations.

- **Through steadfast adherence to this policy, Nurture Childcare and Education Services aspires to demonstrate its unwavering commitment to regulatory compliance, while continually serving the best interests of children and families.**

1.1.4 Cashless Payment & Outstanding Fees Policy

Objective:

To ensure a secure, transparent, and accountable payment system for both educators and parents while adhering to government guidelines and promoting a cashless economy.

1. Cashless Transactions:

- Educators and parents are strictly prohibited from dealing in cash for any childcare services.
- Acceptable payment methods include bank transfers, EFT, and other approved electronic payment methods.
- The onus of ensuring timely payments through these means rests solely on parents. Parents refusing to comply with this stipulation will face immediate childcare termination.

2. Payment Deadlines & Interest:

- Gap fees not paid on time will incur a monthly interest of 2% (24% annually).
- After a missed payment, parents will be sent three email reminders over a span of three weeks. If the payment is still not received after this period, an interest will be levied.
- If no response or payment is received after two reminders, childcare services may be terminated immediately.

3. Payment Arrangements:

- Parents experiencing financial challenges can approach the service to discuss alternative payment arrangements and service is committed to support to families in the time of trouble.
- If no communication or payment is made, details may be shared with debt collection agencies. Parents thus waive their right to privacy in this scenario, as stipulated in our privacy policy. (Will not pay all the payment will be disclosed their private information to the dept collection agencies and will be exclude from the privacy policy in which it is stated that information will not be revealed to any private body or organisation. Service will reveal all the parents' details including their Name, Date of birth, address and child name for the purpose of to whom care was provided and for which child gap was not paid and to serve the of notice to parents. Parents can't claim, sue, or blame to service to provide their private information to third party in order to collect gap money. By enrolling to child in the service parents will accept the Nurture childcare and Education Service policy and procedure and it is always available via email, message, QR code, and through HubHello third party software, through service website etc., Any persona seeking service policy and procedure must have make sure that they have copy of most updated policy. To find if they have most updated copy they should contact to service via email or message to provide them correct copy of policy because service may take time to update most updated copy into online means due to busy or less man power available to do that. Service will not take responsibility of any policy and procedure is most recent, which is not been asked to FDC Educators or service directly. Any payment which is not deducted successfully can have extra charge and parents must have to pay to the finance services providers. No documents responsibility will be taken if any document will not be asked directly from service)

4. Acceptance of Policy:

- By enrolling a child at Nurture Childcare and Education Services, parents will considered automatically accept and agree to adhere to all our policies and procedures.
- Our policy and procedure documents are readily available through various channels. Parents are responsible for ensuring they have the latest version.

5. Transaction Fees:

- Any Direct debit failed transactions might incur additional charges by financial service providers. These are exclusive of the fees owed to the service or educators.
- Parents are advised to maintain sufficient funds in their accounts to avoid additional charges. Savings accounts are typically the most recommended for fee payments due to lower transaction costs. Other means of payment might have higher cost of transactions e.g., Credit, cheque account, credit card, debit cards etc., So always make sure you guys are paying least transaction fee by contacting Educator or service provider directly.

6. Payment Proofs & Absentee Fees:

- Educators receiving payments directly into their accounts should provide bank statements or screenshots as proof.
- Parents may also be required to furnish payment proofs at the service's request if any dispute arise in between service and parents due to nonpayment or late payments.
- Gap fees for any absences claimed by educators are the sole responsibility of the parents. Not paying any gap fee for absents or disputing absents must have to pay gap fee for that and later can be leave for the service decision. Service will check the evidence or proofs of claiming by educator and will inform to parents for the decision if any administration error happened or done by Educator.

7. Disputed Payments:

- Disputes over payments should be raised promptly. However, parents must not withhold payments during dispute resolution to avoid interest and additional charges.
- A collection notice fee of \$25.00 will be charged post the third email reminder.

8. Contact Information:

- Parents are responsible for ensuring that their contact information with the service is up-to-date. The service shall not be held accountable for any issues arising from outdated or incorrect contact details.

9. Compliance with Government Guidelines:

- All payment methods used must align with approved governmental systems.
- Cash payments are strictly prohibited in adherence to these guidelines.

10. Responsibility of Parents:

- It is the duty of parents to be informed about the most suitable payment methods and ensure compliance.
- Parents must promptly follow up on any queries or discrepancies in payment without challenging the established procedures of Nurture Childcare and Education Services.

Conclusion:

This policy serves to protect the interests of both Nurture Childcare and Education Services and our esteemed educators. By promoting a cashless system, we aim for transparency, efficiency, and safety in all our transactions. Parents are encouraged to be proactive in understanding and adhering to this policy to ensure a seamless experience for their children.

Review:

This policy is subject to periodic reviews based on feedback, regulatory updates, or operational needs. It's crucial to remain updated on the latest policy guidelines by maintaining regular communication with our service. Service can make any changes without prior notice if policy is not affecting any stakeholder

SOURCE

Australia Children's Education & Care Quality Authority. (2014).
Australian Government Department of Education, [Employment and Workplace Relations](#). (2009). *Belonging, Being & Becoming: The early years learning framework for Australia*.
Australian Government Department of Education [Skills and Employment](#). (2012). *My Time, Our Place: Framework for School Age Care in Australia*.
Education and Care Services National Regulations. (2012& 2018)
Guide to the National Quality Framework. (2017). (Amended 2020).
Revised National Quality Standard (2018).
The Australian parenting website Raising children
Australian Family laws
Guidelines of Department of communities
<https://raisingchildren.net.au/preschoolers/play-learning/preschool/starting-preschool>
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none">• Annual policy maintenance• minor formatting edits within text• hyperlinks checked and repaired as required• continuous improvement/reflection section added• link to Western Australian Education and Care Services National Regulations added in 'Sources'• Removed Orientation Survey from Appendix		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
NOVEMBER 2021	<ul style="list-style-type: none">• Policy reviewed- no major changes• sources checked for currency		NOVEMBER 2022
NOVEMBER 2020	<ul style="list-style-type: none">• minor changes to policy to reflect procedure for orientation for FDC services• additional references included and sources checked• Orientation Survey added to policy as Appendix		NOVEMBER 2021

NOVEMBER 2019	Related policies added Additional information added to points Evaluation and feedback information added Sources checked for currency and new information added	NOVEMBER 2020
NOVEMBER 2018	Additional information added to points. Rearranged the order of points for better flow Sources/references alphabetised	NOVEMBER 2019
SEPTEMBER 2018	New policy drafted	NOVEMBER 2019

7.2 PRIVACY AND CONFIDENTIALITY POLICY

Privacy is acknowledged as a fundamental human right. Our Family Day Care Service has an ethical and legal responsibility to protect the privacy and confidentiality of children, individuals and families as outlined in Early Childhood Code of Ethics, Education and Care Services National Regulations and the Privacy Act 1988 (Cth). The right to privacy of all children, their families, family day care educators and other staff of the FDC Service will be upheld and respected, whilst ensuring that all children have access to high quality early years care and education. All educators and staff members will maintain confidentiality of personal and sensitive information to foster positive trusting relationships with families.

NATIONAL QUALITY STANDARD (NQS)

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

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
168	Education and care services must have policies and procedures
181	Confidentiality of records kept by approved provider

181-184	Confidentiality and storage of records
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RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.desec.gov.au/resources-child-care-providers/resources/child-care-provider-handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook

RELATED POLICIES

CCS Governance Policy Cyber Safety Policy Dealing with Complaints Policy Enrolment Policy Family Communication Policy Governance Policy	Interaction with Children, Family and Staff Policy Orientation of New Families Policy Payment of Fees Policy Photograph Policy Record Keeping and Retention Policy Writing Reviewing and Maintaining Policies
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PURPOSE

To ensure that the confidentiality of information and files relating to the children, families, staff, and visitors using the FDC Service is upheld at all times. We aim to protect the privacy and confidentiality of all information and records about individual children, families, educators, staff and management by ensuring continuous review and improvement on our current systems, storage, and methods of disposal of records. We will ensure that all records and information are held in a secure place and are only retrieved by or released to people who have a legal right to access this information. Our Service takes data integrity very seriously, we strive to assure all records and data is protected from unauthorised access and that it is available to authorised persons when needed. This policy provides procedures to ensure data is stored, used and accessed in accordance with relevant policies and procedures, example enrolment policy, CCS Account policy.

SCOPE

This policy applies to staff, coordinators, FDC educators, FDC educator assistants, approved provider, nominated supervisor, **visitors** and management of the FDC Service.

IMPLEMENTATION

Under National Law, Section 263, Early Childhood Services are required to comply with Australian privacy law which includes the *Privacy Act 1988* (the Act) aimed at protecting the privacy of individuals. Schedule

1 of the *Privacy Act* (1988) includes 13 Australian Privacy Principles (APPs) which all services are required to apply. The APPs set out the standards, rights and legal obligations in relation to collecting, handling, holding and accessing personal information.

The Notifiable Data Breaches (NDB) scheme requires Early Childhood Services, Family Day Care Services, and Out of School Hours Care Services to provide notice to the Office of the Australian Information Commissioner (formerly known as the Privacy Commissioner) and affected individuals of any data breaches that are 'likely' to result in 'serious harm'.

Businesses that suspect an eligible data breach may have occurred, must undertake a reasonable and expeditious assessment to determine if the data breach is likely to result in serious harm to any individual affected. A breach of an Australian Privacy Principle is viewed as an '*interference with the privacy of an individual*' and can lead to regulatory action and penalties.

(Source: OAIC Australian Privacy Principles)

Further information about the APPs is included in Appendix 1 of this policy.

The Approved Provider/Coordinator will:

- ensure the FDC Service acts in accordance with the requirements of the Australian Privacy Principles and *Privacy Act 1988* by developing, reviewing, and implementing procedures and practices that identify:
 - the name and contact details of the FDC Service
 - what information the FDC Service collects and the source of information
 - why the information is collected
 - who will have access to information
 - collection, storage, use, disclosure, and disposal of personal information collected by the FDC Service
 - any law that requires the particular information to be collected
 - adequate and appropriate storage for personal information collected by the FDC Service
 - protection of personal information from unauthorised access.
- provide Staff and Educators with relevant information regarding changes to Australian privacy law and Service policy
- ensure all relevant staff understand the requirements under Australia's privacy law and Notifiable Data Breaches (NDB) scheme
- maintain currency with the Australian Privacy Principles (this may include delegating a staff member to oversee all privacy-related activities to ensure compliance).

- ensure personal information is protected in accordance with our obligations under the *Privacy Act 1988* and *Privacy Amendments (Enhancing Privacy Protection) Act 2012*
- ensure all records and documents are maintained and stored in accordance with Education and Care Service National Regulations
- regularly back-up personal and sensitive data from computers to protect personal information collected
- ensure all computers are password protected and install security software- antivirus protection
- ensure families are notified of the time particular records are required to be retained as per
- Education and Care Services National Regulations [regulation 183 (2)]
- ensure the appropriate and permitted use of images of children
- ensure all employees, students, volunteers, and families are provided with a copy of this policy
- deal with privacy complaints promptly and in a consistent manner, following the FDC Service's *Dealing with Complaints Policy* and procedures
- ensure families only have access to the files and records of their own children
- ensure information given to Educators will be treated with respect and in a professional and confidential manner
- ensure individual child and staff files are stored in a locked and secure cabinet
- ensure information relating to staff employment will remain confidential and available only to the people directly involved with making personnel decisions
- ensure that information shared with the FDC Service or FDC educator by the family will be treated as confidential unless told otherwise
- complete a *Privacy Audit* every 12 months or following a breach of data to ensure the FDC service meets lawful obligations, identifies areas for improvement and to detect potential areas of breach in privacy law
- follow the *Data Breach Response Procedure* and complete a *Data Breach Response Template* following any breaches in data at the FDC service.
-

The Educator/Educator assistants will:

- adhere to FDC Service policies and procedures, supporting management
- ensure volunteers and families are aware of the *Privacy and Confidentiality Policy*
- ensure written consent is obtained from parents and/or guardian of children who will be photographed or videoed by the FDC educator and/or service
- ensure documented information and photographs of children are kept secure but may be accessed at any time by the child's parents or guardian

- ensure families only have access to the files and records of their own children
- ensure that information shared with us by the family will be treated as confidential unless told otherwise
- ensure only necessary information regarding the children’s day-to-day health and wellbeing is given to non-primary contact educators; for example, food allergy information
- ensure that information provided to FDC educators will be treated with respect and in a confidential and professional manner
- not discuss individual children with people other than the family of that child, except for the purposes of curriculum planning or group management. Communication in other settings must be approved by the family beforehand.
- treat private and confidential information with respect in a professional manner
- maintain individual and Service information and store documentation according to this policy at all times
- not share information about the individual or service, management information, or other staff as per legislative authority
- ensure information regarding the health and wellbeing of a child is not shared with others unless consent has been provided, in writing, or provided the disclosure is required or authorised by law under relevant state/territory legislation - [\(See Child Protection Policy for further information regarding legal obligations to sharing information as per CISS or FVISS Schemes in Victoria.\)](#)

Australian Privacy Principles- Personal Information

Nurture Childcare and Education services is committed to protecting personal information in accordance with our obligations under the *Privacy Act 1988* and *Privacy Amendments (Enhancing Privacy Protection) Act 2012*.

Personal information includes a broad range of information, or an opinion, that could identify an individual. Sensitive information is personal information that includes information or an opinion about a range of personal information that has a higher level of privacy protection than other personal information.

(Source: OAIC-Australian Privacy Laws, Privacy Act 1988)

Personal information will be collected and held securely and confidentially about you and your child to assist our Service provide quality education and care to your child whilst promoting and maintaining a child safe environment for all stakeholders.

7.2.1 Personal information our Service may request regarding enrolled children:

- Child's name
- Gender
- Date of birth
- Address
- Birth Certificate
- Religion
- Language spoken at home
- Emergency contact details and persons authorised to collect individual children
- Children's health requirements
- Immunisation records- (Immunisation History Statement)
- Developmental records and summaries
- External agency information
- Custodial arrangements or parenting orders
- Incident reports
- Medication reports
- Child Care Subsidy information
- Medical records
- Permission forms – including permission to take and publish photographs, video, work samples
- Doctor's contact information
- Centrelink Customer Reference number (CRN)
- Dietary requirements
-
- Personal information our Service may request regarding parents and caregivers
-
- Parent/s full name
- Address
- Phone number (mobile & work)
- Email address
- Bank account or credit card detail for payments
- Centrelink Customer Reference number (CRN)
- Custody arrangements or parental agreement
-

- Personal information our Service may request regarding staff and volunteers
- Personal details
- Tax information
- Banking details
- Working contract
- Emergency contact details
- Medical details
- Immunisation details [including COVID-19 vaccinations]
- Working With Children Check verification
- Educational Qualifications
- Medical history
- Resume
- Superannuation details
- Child Protection qualifications
- First Aid, Asthma and Anaphylaxis certificates
- Professional Development certificates
- PRODA related documents such as RA number and background checks

7.2.2 Method of Collection

Information is generally collected using standard forms at the time of enrolment.

Additional information may be provided to the FDC Service through email, surveys, telephone calls or other written communication.

Information may be collected online through the use of software such as CCS software or program software

7.2.3 How we protect your personal information

To protect your personal and sensitive information, we maintain physical, technical and administrative safeguards.

All hard copies of information are stored in children's individual files in a locked cupboard.

All computers used to store personal information are password protected. Each FDC educator and staff member will be provided with a unique username and password for access to CCS software and program software. Educators and staff will be advised not to share usernames and passwords.

Access to personal and sensitive information is restricted to key personal only.

Security software is installed on all computers and updated automatically when patches are released

Data is regularly backed up on external drive and/or through a cloud storage solution

Any notifiable breach to data is reported

All staff are aware of the importance of confidentiality and maintaining the privacy and security of your information.

Procedures are in place to ensure information is communicated to intended recipients only, example invoices and payment enquiries

Access to personal and sensitive information

Personal and sensitive information about FDC educators, staff, families and children will be stored securely at all times. Families who have access to enrolment or program information online will be provided with a unique username and password. Families will be advised not to share username and passwords. The Approved Provider will ensure that information kept in a child's record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates
- a parent of the child to whom the information relates, except in the case of information kept in a staff record
- the Regulatory Authority or an authorised office
- as expressly authorised, permitted or required to be given by or under any Act or law [See: Child Information Sharing Scheme (CISS) Family Violence Information Sharing Scheme (FVISS) Victoria]
- with the written consent of the person who provided the information.

Disclosing personal and sensitive information

Our FDC Service will only disclose personal or sensitive information to:

- a third-party provider with parent permission (for example CCS software provider)
- Child Protection Agency- Office of the Children's Guardian and Regulatory Authority as per our *Child Protection and Child Safe Environment Policies*
- as part of the purchase of our business asset with parental permission
- authorised officers (for example public health officer)
- the regulatory authority or an authorised officer
- as expressly authorised, permitted or required to be given by or required to be given by or under any Act or Law [Child Information Sharing Scheme, Family Violence Information Sharing Scheme VIC]

- with the written consent of the person who provided the information.

Complaints and Grievances

If a parent, employee or volunteer has a complaint or concern about our FDC Service, or they believe there has been a data breach of the Australian Privacy Principles, they are requested to contact the Principal office/ Approved Provider so reasonable steps to investigate the complaint can be made and a response provided. [See: *Dealing with Complaints Policy*]

If there are further concerns about how the matter has been handled, please contact the Office of Australian Information Commissioner on 1300 363 992 or:

https://forms.business.gov.au/smartforms/landing.htm?formCode=APC_PC

For any other general concerns, please contact the Principal office/Approved Provider directly on:

0862613970

APPENDIX

The Australian Privacy Principles (APPs) outline:

- The open and transparent management of personal information, including having a privacy policy
- An individual having the option of transacting anonymously or using a pseudonym where practicable
- The collection of solicited personal information and receipt of unsolicited personal information including giving notice about collection
- How personal information can be used and disclosed (including overseas)
- Maintaining the quality of personal information
- Keeping personal information secure
- Right for individuals to access and correct their personal information

The APPs place more stringent obligations on APP entities when they handle 'sensitive information'.

Sensitive information is a type of personal information and includes information about an individual's:

- health (including predictive genetic information)
- racial or ethnic origin
- political opinions
- membership of a political association, professional or trade association or trade union
- religious beliefs or affiliations
- philosophical beliefs

- sexual orientation or practices
- criminal record
- biometric information that is to be used for certain purposes
- Biometric templates.

Australian Privacy Principles (APPs)

APP 1 – Open and transparent management of personal information

Ensures that APP entities manage personal information in an open and transparent way. This includes having a clearly expressed and up to date APP privacy policy.

APP 2 – Anonymity and Pseudonymity

Requires APP entities to give individuals the option of not identifying themselves, or of using a pseudonym. Limited exceptions apply.

APP 3 – Collection of solicited personal information

Outlines when an APP entity can collect personal information that is solicited. It applies higher standards to the collection of 'sensitive' information.

APP 4 – Dealing with unsolicited personal information

Outlines how APP entities must deal with unsolicited personal information.

APP 5 – Notification of the collection of personal information

Outlines when and in what circumstances an APP entity that collects personal information must notify an individual of certain matters.

APP 6 – Use or disclosure of personal information

Outlines the circumstances in which an APP entity may use or disclose personal information that it holds.

APP 7 – Direct marketing

An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.

APP 8 – Cross-order disclosure of personal information

Outlines the steps an APP entity must take to protect personal information before it is disclosed overseas.

APP 9 – Adoption, use or disclosure of government related identifiers

Outlines the limited circumstances when an organisation may adopt a government related identifier of an individual as its own identifier or use or disclose a government related identifier of an individual.

APP 10 – Quality of personal information

An APP entity must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete. An entity must also take reasonable steps to ensure the personal information it uses or discloses is accurate, up to date, complete and relevant, having regard to the purpose of the use or disclosure.

APP 11 – Security of personal information

An APP entity must take reasonable steps to protect personal information it holds from misuse, interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.

APP 12 – Access to personal information

Outlines an APP entity's obligations when an individual requests to be given access to personal information held about them by the entity. This includes a requirement to provide access unless a specific exception applies.

APP 13 – Correction of personal information

Outlines an APP entity's obligations in relation to correcting the personal information it holds about individuals.

Source

Australian Childcare Alliance. (2019). Changes to Australia's privacy law: What ECEC services need to know: <https://childcarealliance.org.au/blog/115-changes-to-australia-s-privacy-law-what-ecec-services-need-to-know>
Australian Children's Education & Care Quality Authority. (2014)
Australian Government Department of Education Skills and Employment. *Child Care Provider Handbook (2018)*
<https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>
<https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook>

Australian Government Office of the Australian Information Commission – Australian Privacy Principles:
<https://www.oaic.gov.au/privacy-law/privacy-act/australian-privacy-principles>

Early Childhood Australia Code of Ethics. (2016).

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

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

Privacy Act 1988.

Revised National Quality Standard. (2018).

UN General Assembly (1989) United Nations Convention of the Rights of a child

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> Update of Department name from Department of Education, Skills, and Employment to Department of Education policy maintenance minor formatting edits within text hyperlinks checked and repaired as required link to Western Australian Education and Care Services National Regulations added in 'Sources' procedure removed (separate procedure available on Desktop) 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEW REVIEW DATE
MARCH 2022	<ul style="list-style-type: none"> Review policy as part of annual cycle no major changes to policy sources checked for currency 		MARCH 2023
AUGUST/ OCTOBER 2021	<ul style="list-style-type: none"> Update of Related Legislation Update of Related Policies Update of sources used within policy Additional information relating to Breach of Data Procedure/Template and Privacy Audit Inclusion of COVID-19 vaccination requirements -applicable to some states/territories 		MARCH 2022
MARCH 2021	<ul style="list-style-type: none"> Policy reviewed to align with 2021 review schedule Privacy and Confidentiality Procedure added to policy sources checked for currency 		MARCH 2022
OCTOBER 2020	<ul style="list-style-type: none"> Minor additions to include information related to data integrity minor adjustments regarding inclusion of staff information 		MARCH 2021

MARCH 2020	<ul style="list-style-type: none"> major re-write and update of the policy that includes information from the Office of the Australian Information Commissioner and Australian Privacy Principles Rearranged some content and added Appendix Related policies added Sources updated and checked for currency 	OCTOBER 2021
March 2019	New policy drafted for family Day care Services	March 2020

7.3 PROFESSIONAL DEVELOPMENT POLICY

Professional development is a term used which includes workshops, conferences, in-service training sessions, formal studying, readings, and research. A commitment by Early Childhood Educators to ongoing professional development is the key to effective continuous improvement and the provision of quality childcare. Engaging in professional development helps to identify individual educator's areas of strengths and areas requiring improvement.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

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

127	Family day care educator qualifications
136	First Aid qualifications
138	Application for qualification to be assessed for inclusion on the list of approved qualifications
168	Education and care service must have policies and procedures.

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook

RELATED POLICIES

CCS Governance Policy CCS Personnel Policy Code of Conduct Policy Enrolment Policy First Aid Policy	Payment of Fees Policy Record Keeping and Retention Policy Recruitment Policy Staffing Arrangement Policy Work, Health and Safety Policy
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PURPOSE

Professional development allows individuals to build and improve their knowledge and skills within the early childhood industry whilst keeping up to date with current research and recommended practice.

The Early Childhood Education sector continues to grow and change. These changes impact on licensing and assessment requirements as well as our interactions and documentation of individual children. To comply and improve we implement procedures for identifying areas in which our educators and staff can enhance skills and knowledge in the early childhood industry through relevant and effective professional development and training. We aim to review and update individual professional development plans based on performance appraisals detecting strengths, interests, and goals.

SCOPE

This policy applies to the Approved Provider, Coordinator/Educational Leader, Educators, and Educator Assistants of the Family Day Care Service.

IMPLEMENTATION

The Early Childhood Australia (ECA) Code of Ethics suggest that in relation to being professional, educators will take responsibility for reflecting on and assessing their professional values, knowledge and practice, and the positive contribution to the early childhood profession. Educators will engage in critical reflection, ongoing professional learning and support research that builds knowledge and that of the profession.

The Approved Provider/Coordinator will ensure:

- the nominated supervisor and administration staff are aware of Family Assistance Law legislation, enrolment processes and management of Child Care Subsidy as detailed in the *Child Care Provider Handbook* and keep up to date with changes and additions to the administration of Child Care Subsidy
- all FDC educators, coordinators and educator assistants hold the following qualifications
 - ACECQA approved and current first aid qualification including CPR
 - ACECQA approved and current emergency asthma management training
 - ACECQA approved current anaphylaxis management training
- ensure all FDC educator and educator assistants' Child Protection training is valid and updated every 12-18 months to maintain skills and knowledge required by National Regulations and best practice
- FDC educators and educator assistants undertake professional development in accordance with National Regulations and their individual professional development plan
- all FDC educators and staff are provided with professional learning for the Child Safe Standards
- all professional development completed by FDC coordinators and FDC educators is recorded
- relevant materials and information to enhance skills and knowledge is shared with other colleagues where possible
- a variety of professional development for FDC educators is provided which includes current research and readings, FDC team meeting discussions, in-house training, networking, conferences, etc.
- mentoring programs and management support networks are implemented for FDC educators and educator assistants to receive guidance and inspiration
- they are positive role models for FDC educators and educator assistants

- FDC educators and educator assistants are supported to attend professional development by committing resources in order to develop new skills and knowledge that can be shared within the FDC Scheme
- ensure all FDC educator and educator assistants attend a minimum of 4 professional development and /or in-service courses over a 12-month period.
- collaborate with FDC educators and educator assistants to identify training needs across the service and source appropriate training and mentoring
- ensure strategies are implemented by FDC educators and educator assistants to make practical use of the information gained from professional development

The Educational Leader will:

- review the Professional Development cycle with Nominated Supervisor
- meet with FDC educators and discuss outcomes of the *Ambitions and Reflections Plan*
- complete the simple SWOT analysis for each educator (Strengths, Opportunities, Weaknesses and Threats).
- maintain the Professional Development Record for each educator following the completion of training and workshops
- complete a Professional Development Plan with each educator and discuss with the Nominated Supervisor
- source and schedule in-services, webinars, workshops and other professional development opportunities as per educator Professional Development Plan
- facilitate educators to share new knowledge and skills learnt at training and workshops with other FDC educators at Network meetings
- facilitate reflective practice as a form of ongoing professional learning for all staff
- support educators to undertake WHS training as a part of their in-service training.

Educator/Educator assistant will:

- ensure Child Protection training is valid and updated every 12-18 months to maintain skills and knowledge required by National Regulations and best practice
- hold a current ACECQA approved first aid, qualification and ACECQA approved emergency asthma and anaphylaxis management qualifications at all times
- ensure CPR refresher training is completed annually
- complete annual adrenaline auto injector training through ASCIA
- attend a minimum of 4 professional development and/or in-service courses over a 12-month period

- seek assistance and direction from the Approved Provider/ Coordinator regarding the in-services and training
- participate in professional learning about Family Assistance Law and Child Care Subsidy
- engage in the Professional Development Plan activities with the Educational Leader as per the Professional Development Agenda, including completing the *Ambitions and Reflections* form, and completing in the Professional Development Plan with the Educational Leader
- following the attendance of training and workshops, complete a Professional Development Review form.

Examples of professional development and in-service opportunities

Networking with other services and professionals	Mentoring and coaching programs
In-house or external training (workshops, courses)	Self-paced training packages
Sharing information gained from formal studies	Hands-on job training
Knowledge and skills sharing	Conferences
Visitors from local areas	Meeting discussions
Reading professional publication and websites	Viewing professional DVD's
Engage in professional reflection (journals)	Reading recently published ECE texts
Subscribing to professional newsletters	Inquiry conversations
Webinars	Subscribing to professional newsletters
Formal TAFE, college or University courses (check with ACECQA for list of approved qualifications)	

SOURCE

- Australian Children's Education & Care Quality Authority. (2014).
- Australian Government Department of Education, Skills and Employment. *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).
- Australian Government Department of Education Skills and Employment Child Care Provider Handbook <https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>
- Early Childhood Australia Code of Ethics. (2016).
- Education and Care Services National Law Act 2010. (Amended 2018).
- [Education and Care Services National Regulations](#). (2011).
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
- Guide to the National Quality Framework. (2017). (Amended 2020).
- Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
AUGUST 2021	<ul style="list-style-type: none"> • Update of Related Legislation • Update of Related Policies • Check of links within policy 		MAY 2022
MAY 2021	<ul style="list-style-type: none"> • merged <i>Curriculum (Pedagogy) and Educators Training Policy</i> into this policy to prevent duplication of information/policy • sources checked for currency 		MAY 2021
DECEMBER 2020	Update of Policy Name- Professional Development Policy Additional references to Professional Development resources Addition of Educational Leader content		MAY 2021
MAY 2020	re-wording of some sentences to improve flow of text additional content added additional regulation related to Child Protection law and FDC qualifications		MAY 2021
MAY 2019	New policy drafted for Family Day Care services		MAY 2020

7.4 PERFORMANCE MANAGEMENT POLICY

Our Family Day Care Service is committed to supporting the performance of staff members and engaged educators. We aim to build the capacity of educators to care and educate children enrolled in our FDC Service. We believe that Performance Management has significant benefits for our FDC Service as it leads to inspired and enhanced performance from each educator, co-ordinator, and staff member.

Performance Review meetings are viewed as an opportunity for each staff member or educator to plan proactively for the year ahead.

This policy will provide guidance for our management team on how to monitor performance, plan and review work objectives and understand staff and educator achievements. FDC educators are engaged by

the FDC service as an independent contractor and are required to adhere to our FDC service policies and procedures, including Performance Management. Where there is underperformance, we will work to resolve this promptly and effectively in accordance with an individual *Performance Improvement Plan* developed in conjunction with the staff member or FDC educator.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 4: STAFFING ARRANGEMENTS		
4.1	Staffing arrangements	Staffing arrangements enhance children's learning and development.
4.1.2	Continuity of staff	Every effort is made for children to experience continuity of educators at the service.
4.2	Professionalism	Management, educators and staff are collaborative, respectful and ethical.
4.2.1	Professional collaboration	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.3	Development of professionals	Educators, co-ordinators and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

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
117B	Minimum requirements for a person in day-to-day charge
117C	Minimum requirements for a nominated supervisor

168(2)(i)	Policies and procedures are required in relation to a code of conduct for staff members
169	Additional policies and procedures- family day care services
170	Policies and procedures to be followed

RELATED POLICIES

Assessment of FDC educators, FDC educator assistants and persons residing at FDC residence Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Dealing with Complaints FDC Monitoring, Support and Supervision of FDC educators and assistants Governance Policy	Interactions with Children, Family and Staff Policy Privacy and Confidentiality Policy Probation and Induction Orientation Policy Professional Development Policy Recruitment Policy Responsible Persons Policy Staffing Arrangements Policy Work Health and Safety Policy
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PURPOSE

We aim to provide an effective Performance Management process to assist FDC educators, educator assistants, coordinators and staff members to assess their work performance against their job description, whilst establishing a positive work culture and professional workplace.

SCOPE

This policy applies staff, FDC educators, educator assistants, nominated supervisor and management at the Family Day Care Service.

IMPLEMENTATION

Performance Management plays an important role in linking staff performance goals and expectations through balanced feedback and reviews and help meet organisational objectives.

Through the Performance Review, management can acknowledge and identify the individual strengths, talents and interests of each staff member and FDC educator whilst supporting the diverse knowledge and skills each person brings to the role and FDC Service.

Each staff member and FDC educator will participate in a Performance Review every 12 months. The review process will assist staff and FDC educators develop an understanding and expectation of their role, reflect on achievements and challenges and plan goals that may assist in accomplishing

performance outcomes and expectations in the future. At all times of the Performance Management process, confidentiality and sensitivity shall be maintained to a high standard.

Induction, Orientation and Probation program

Management will ensure each staff member and FDC educator undertakes an induction and orientation program upon employment or engagement at the Service. Staff members and FDC educators will receive a job description as part of the appointment of employment or engagement of the FDC Service, and this will assist to set expectations and requirements of the position. Staff members and FDC educators will participate in *Probationary Meetings* that are scheduled within the first week of employment or engagement of service and at the end of the three-month probationary period. Feedback will be provided to the staff member or FDC educator regarding performance and management will provide support and opportunities for setting professional development goals.

Staff Performance Review

Performance Reviews are best completed on a regular and systematic manner to allow management to provide feedback on a staff member or FDC educator's work performance and for staff and FDC educators to reflect on their own performance. A *Performance Review* meeting will be conducted every 12 months with each staff member and FDC educator to review their work performance, outline expectations and responsibilities and set professional goals. The *Performance Review Form* can be used to assess staff member or FDC educator's goals and objectives, areas of strength, responsibilities and discussion as to what extent these have been met.

Managing Underperformance

Appropriate management of underperformance plays a key role of Performance Management. Should the Nominated Supervisor/Coordinator identify any performance issues or concerns the *Underperformance Management Procedure* should be initiated including the implementation of a *Performance Improvement Plan* if required.

Indicators of poor or underperformance or unsatisfactory behaviour include:

- the staff member or FDC educator not performing tasks associated with the role according to the job description

- the staff member or FDC educator not carrying out the work to the standard as set by the job description
- the staff member or FDC educator displaying unacceptable, disruptive or negative behaviour either at the workplace (principal office) or residence/approved venue
- the staff member or FDC educator not following policies and procedures of the FDC Service.

Management will review past Performance Review reports to identify any previous concerns and review the staff member or FDC educator's job description to identify any concerns or responsibilities that are not being met. Identification of the underperformance or unsatisfactory behaviour will consider the seriousness of the issue, how long the issue has existed and the staff member or FDC educator present performance and how this varies to what is expected of the staff member or FDC educator.

A Performance Management Meeting will be arranged with the staff member or FDC educator once underperformance or unsatisfactory behaviour has been clearly identified. Management will provide clear communication with staff and FDC educators to clarify:

- performance indicators (why there is an issue)
- expectations around ethics, values and behaviour
- how their underperformance or behaviour impacts the workplace environment and
- why there is a concern from management.

Staff members and FDC educators will be informed of expectations and performance standards and requested to participate in a *Performance Improvement Plan* if required.

Performance Improvement Plan

A *Performance Improvement Plan* will be developed with the staff member or FDC educator outlining actions and goals to be implemented. Performance expectations and what is to be achieved over a specific period will be discussed and documented with the staff member or FDC educator.

During the *Performance Improvement Plan* process the staff member or FDC educator will be supported to address and resolve instances or patterns of underperformance or unsatisfactory behaviour. If the staff member or FDC educator has not taken reasonable steps to address or resolve their performance or unsatisfactory behaviour and the *Performance Improvement Plan* has not been followed, the staff

member or FDC educator will be advised of the next steps in the Performance Management process which may include:

- extension of the *Performance Improvement Plan* time frame
- provision of extra support, guidance or mentoring
- issuing of formal warnings and ultimately if the issue cannot be resolved, termination of employment.

A review of the *Performance Improvement Plan* is to be conducted to discuss the staff member or educator's progression and to provide feedback of the goals and outcomes set. If the staff member or educator is showing satisfactory improvement of the identified issue the *Performance Improvement Plan* will be resolved and processes implemented to ensure improvements will be maintained.

Performance Improvement Plan

If a staff member or FDC educator's performance or behaviour does not improve to the required standard, termination of their employment or engagement of service may be an option. A staff member or FDC educator cannot be dismissed in circumstances that are '*harsh, unjust or unreasonable*.' It is vital to be fair to staff members and FDC educators, giving reasons for dismissal, and an opportunity to respond to those allegations. If the staff member or FDC educator's performance does not improve following formal Performance Management Meetings and the implementation and completion of a *Performance Improvement Plan*, then it may be appropriate to issue a formal warning or consider dismissal of employment or engagement contract.

Following a decision to terminate employment or engagement of service management will provide the staff member or FDC educator with written notice of the day of termination when ending their employment or engagement. The written notice must provide details of the staff member or FDC educator's last day and a reason why the employment or engagement of service was terminated. In relation to staff members, employment notice periods will be determined in accordance with the appropriate award. Please note the *Educational Services (Teachers) Award 2020* provides a greater minimum period notice than that required under the *National Employment Standards*. FDC educators should refer to their service contract or arrangement regarding notice periods of termination of engagement of contract.

Serious Misconduct – Termination of employment

Employers are required to adhere to the Fair Work Act when terminating a staff member or an FDC educator's employment or engagement of service due to the engagement in 'serious misconduct'.

Serious misconduct involves a staff member or FDC educator deliberately behaving in a way that is inconsistent with continuing their employment or engagement of service, it may include the following:

- causing serious and imminent risk to the health and safety of another person or to the reputation or profits of their employer's business
- theft, embezzlement, tax evasion
- fraud, misapplication, corruption
- assault, taking of bribes
- being intoxicated at work
- refusing to carry out a lawful and reasonable instruction that is part of the job
- criminally prosecutable offences directly related to employment (child abuse or neglect)

A meeting is to be arranged with the staff member or FDC educator regarding the termination of employment or engagement contract due to serious misconduct. A support person should be offered to the staff member or FDC educator for the meeting. The manager is to explain the reasons for the termination of employment or engagement of contract and the staff member or FDC educator provided with a letter explaining the terms of the termination of employment or engagement of contract. (See: *Termination of Employment Procedure*).

Management/Nominated Supervisor will:

- follow the *Performance Review Procedure* for regular and systematic review of work performance and behaviour
- ensure all staff and educators comply with the *Code of Conduct* at all times
- provide FDC educators, coordinators and staff with a comprehensive *Probation, Induction and Orientation program*
- provide all staff members and FDC educators with a clear and concise job description upon employment or engagement of service
- conduct Performance Review meetings with staff members and FDC educators every 12 months
- prepare accordingly before any Performance Review meeting with staff members or engaged FDC educators
- provide time to discuss the process of the review meeting, duration of meeting and provide points for discussion which may include:
 - self-reflection of performance
 - identifying highlights during the year

- achievement of professional development goals
 - personal characteristics
 - job knowledge and work output
 - motivation
 - leadership
 - family relationships
 - administration skills
 - people management skills
 - career aspirations
 - identifying challenges
- set a mutually convenient time to meet and conduct the *Performance Review*
 - provide feedback to each staff member and FDC educator articulating areas of strength and weaknesses and identifying new goals and/or Quality Improvement Plan (QIP) areas to be a focus of the staff member or educator during the next 12 months
 - highlight and discuss any areas where underperformance is identified
 - maintain confidentiality and uphold professional integrity at all times
 - ensure the staff member or educator and manager signs the Performance Review document
 - provide a copy of the document to the staff member or FDC educator

In the case of underperformance,

- provide staff member or FDC educator with 24 hours' notice of any Performance Management meeting and offer a silent support person to support the staff member or FDC educator
- be specific with any concerns or issues to be raised during the Performance Management meeting
- document any Performance Management meetings using appropriate forms and templates
- develop and implement a *Performance Improvement Plan* with the individual staff member or FDC educator and adhere to the *Managing Staff Underperformance Procedure* if required
- identify outcomes and appropriate goals to assist the staff member or FDC educator to improve performance within an agreed timeline
- take appropriate action when performance does not meet the agreed outcomes and goals
- provide an *Official Performance Warning Letter* to the staff member or FDC educator formally as part of the *Managing Staff Underperformance Procedure* as required
- adhere to the *Termination of Employment Procedure* when terminating employment of a staff member or engagement of a FDC educator

- provide the staff member or FDC educator with a *Termination of Employment letter* upon termination of employment or engagement of service
- adhere to the *Termination of Employment (serious misconduct) Procedure* when terminating employment or engagement of contract of a staff member or FDC educator due to serious misconduct
- provide the staff member or FDC educator with a *Termination of Employment letter* upon termination of employment or engagement of service due to serious misconduct.

FDC educators, coordinators and staff members will:

- perform work to the standard as expected as identified within their job description
- participate collaboratively in annual *Performance Review* meetings as a condition of their employment or engagement of service
- reflect on any achievements or challenges that have occurred within the past 12 months to contribute to the *Performance Review*
- address any concerns or issues regarding work performance and highlight areas for improvement or development
- consider any circumstances or events that may have affected performance. e.g., periods of ill health, excessive workloads
- assist to develop goals and expectations during the *Performance Review* process
- complete any training or professional development identified as part of a *Performance Improvement Plan*.

SOURCE

ACECQA (2017). *Family Day Care Compliance Guide*. <https://www.acecqa.gov.au/sites/default/files/2019-06/FDC-ComplianceGuide-ApprovedProvider.pdf>

Early Childhood Australia Code of Ethics. (2016).

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

Fair Work Ombudsman: Best Practice Guide: [Managing underperformance Best Practice Guide \(2020\)](#)

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

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

Revised National Quality Standard. (2018).

Work Place Law <https://www.workplacelaw.com.au/posts/better-safe-than-sorry-best-practice-dealing-poor-performance>

Workplace Relations Act 1996 (Cth).

Victoria Government. Business Victoria. (2020). Review staff performance <https://business.vic.gov.au/business-information/staff-and-hr/staff-management/review-staff-performance>

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2022	NEXT REVIEW DATE	MAY 2023
SEPTEMBER 2021	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
SEPTEMBER 2021	New policy DRAFT for LDC		MAY 2022

7.5 MAKE-UP DAY POLICY

Make-up days are not mandatory within [\[insert name of Family Day Care Service\]](#) however, we believe it is important to work in collaboration with families and assist where possible. Make-up days will be at the discretion of the Family Day Care educator and dependent upon licensing requirements and ratios.

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.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
159	Children's attendance record to be kept by family day care educator
168	Education and care service must have policies and procedures

RELATED POLICIES

Enrolment Policy	Governance Policy
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PURPOSE

'Make-up days' are days whereby a child attends the Family Day Care Service to 'make-up for' an absence due to illness or holidays. At the discretion of the FDC educator, make-up days are a benefit accessible to

families under certain circumstances, which includes maintaining licenced number of children requirements and staff to child ratios.

SCOPE

This policy applies to the Approved Provider, Coordinator, educators, and families of the Family Day Care Service.

IMPLEMENTATION

Make-up days *may* be available for families if their child has been absent due to illness or holidays.

- to be eligible for a make-up day, the family is required to contact the FDC educator **before 8am** on the day the child will be absent, advising if the absence is due to illness or planned holiday. This allows the FDC educator to offer the child's place to another child who is on the make-up day waiting list or requires occasional care.
- if the family has not requested a specific day but had their child's name placed on the make-up day waiting list, they are required to contact the FDC educator **between 8-9 am** on the day they wish to use the make-up day offer
- priority will be given to those who have been absent due to illness, as keeping a child at home when she/he is sick helps to reduce the spread of infection within our FDC Service
- a maximum of **8** make-up days per child per calendar year is available for families
- any make-up days that are not used by the end of the calendar year will be forfeited
- the FDC Service takes no responsibility, nor will a refund be given for make-up days that have been unable to be used, or absences which exceed the **8** make up day condition
- make-up days that are booked in and missed without notifying the FDC Service/FDC educator prior to **8 am** on the arranged make-up day for whatever reason, will be forfeited
- a doctor's certificate must be produced for the enrolled absence in order to be eligible for a make-up day
- as the FDC Service/FDC educator is not obliged to offer make-up days, refunds will not be given for absences where the family chooses not to take an offered make-up day
- if circumstances prevent the FDC Service from offering a make-up day, refunds for absent day/s will not be provided
- if a family terminates their child's position, all make-up days are forfeited without a refund of fees paid for absences.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Australian Government Department of Education, Skills and Employment. *Belonging, Being and Becoming: Early Years Learning Framework for Australia*. (2009).
 Early Childhood Australia Code of Ethics. (2016).
[Education and Care Services National Regulations](#). (2011).
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
 Guide to the National Quality Framework. (2017). (amended 2020).
 Revised National Quality Standard. (2018).

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	MAY 2021	NEXT REVIEW DATE	MAY 2022
MODIFICATIONS	<ul style="list-style-type: none"> policy maintenance - no major changes to policy minor formatting edits within text hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
MAY 2021	<ul style="list-style-type: none"> added National Regulations minor additions- re: Family Day Care educator 	MAY 2022	
MAY 2020	minor editing and formatting minor editing/word changes updated source reference	MAY 2021	
MAY 2019	New policy drafted for Family Day Care Services	MAY 2020	

7.6 SOCIAL MEDIA POLICY

We recognise both the benefits, and challenges, of using Facebook and social media in our Family Day Care Service. This policy has been developed to provide educators/educator assistants, 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
182	Confidentiality of records kept by family day care educator
183	Storage of records and other documents

RELATED POLICIES

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

Being part of our Family Day Care Service entails a position of trust and responsibility. We aim to ensure that our FDC Service, children, educators/educator assistants 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, educators/educator assistants, management and visitors of the Family Day Care 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 our Family Day Care 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 educators/educator assistants.

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, and LinkedIn.
- Image sharing sites e.g., Instagram, Snapchat, and Imgur.
- 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.

Family Day Care Service Facebook Account

Our Family Day Care Service has a Facebook account to converse and share information with our families and community, which is administered by management.

Only current enrolled families and educators/educator assistants will have access to the Family Day Care Service Facebook page. The page is locked as “Privacy type: Closed: Limited public content. Members can see all content.” The Approved Provider/ Nominated Supervisor will be responsible for accepting requests to join from new families.

The intent for our Family Day Care Service Facebook page is to:

- keep families in touch with what's happening at in the FDC Service, **including upcoming and special events**
- connect with other parents and share thoughts about programs, policies, and procedures
- **provide an avenue to ask other 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

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

Regarding the FDC Service Facebook page, our Service will:

- **obtain written authorisation from a child's parents prior to posting any comment or photos of their child to the page**
- 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
- adhere to our *Dealing with Complaints Policy* and procedures to investigate any occurrences where a person working at the FDC Service may:
 - posts photos or information of the Service or children

- o defame, harass or bully any other person who works at the FDC Service or is connected to the Service.
- ensure that any staff or educator found guilty of any Facebook misconduct (on both the Service Facebook page and any other Facebook private page) is aware that this may result in disciplinary procedures or termination of employment.

Regarding all social media, Management, educators/educator assistants, 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 Family Day Care service on their personal Facebook or any other social media account
- post any information about the Family Day Care 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 Family Day Care Service.

Personal Social Media Accounts

Staff members are to use their own personal discretion when adding a family of the Family Day Care Service as a 'friend' on Facebook or any other social media. The Service does not recommend that staff add families of the Family Day Care 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 Family Day Care 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 Family Day Care service.

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

Continuous Quality Improvement

Our FDC Service will continue to evaluate and assess our online safety practices through critical reflections, checklists, professional learning and discussions with families and staff.

FDC educators and educator assistants will complete online training through the eSafety Commissioner to ensure staff remain up to date with current research and are aware of how to report inappropriate content on social media sites.

Resources

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>

Source

Australian Children’s Education & Care Quality Authority. (2014).
Dictionary by Merriam-Webster: <https://www.merriam-webster.com/>
Early Childhood Australia Code of Ethics. (2016).
[Education and Care Services National Regulations](#). (2011).
eSafety Commissioner: <https://www.esafety.gov.au/educators/esafety-early-years-program-for-educators>
Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
Guide to the National Quality Standard. (2017). (Amended 2020).
Privacy Act 1988.
Privacy and Personal Information Protection Act 1998.
Revised National Quality Standard. (2018).
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
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POLICY REVIEWED	AUGUST 2022	NEXT REVIEW DATE	AUGUST 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • link to Western Australian Education and Care Services National Regulations added in 'Sources' • minor formatting edits within text • hyperlinks checked and repaired as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
AUGUST 2021	<ul style="list-style-type: none"> • <i>Related Policies section - Dealing with Complaints Policy</i>- name change (Grievance Policy) • minor edits- formatting • sources checked for currency 	AUGUST 2022	
AUGUST 2020	<ul style="list-style-type: none"> • National Principles of Child Safe Standards added • information regarding continuous improvement- eSafety Commissioner added • minor editing • addition of Tik Tok reference • additional resources added for e-learning 	AUGUST 2021	
AUGUST 2019	Terminology contextualised to FDC. Policy modified into a 'social media' policy. Additional information added to points. Sources checked for currency. New source list created. Incorrect URLs deleted. Related policies added	AUGUST 2020	
SEPTEMBER 2018	New draft policy	AUGUST 2019	

7.7 STUDENT AND VOLUNTEER POLICY

Nurture Childcare and Education Services values the participation of students and volunteers. Having students and voluntary workers with FDC educators helps to inform the community about our program and the value of the work we do. Students and voluntary workers are welcome at the Family Day Care Service; however, the children's care and safety are our first priority.

NATIONAL QUALITY STANDARDS (NQS)

QUALITY AREA 7: GOVERNANCE		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.

7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members’ performance is regularly evaluated and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

120	Educators who are under the age of 18 to be supervised
145	Staff Records
149	Volunteers and Students (refers to centre-based services, but can align to FDC services)
165	Record of visitors
166	Children not to be alone with visitors
168	Policies and Procedures
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
172	Notification of change to policies or procedures

RELATED POLICIES

Bullying, Discrimination and Harassment Policy Code of Conduct Policy Child Protection Policy Child Safe Environment Policy Dealing with Complaints Policy Family Communication Policy Interactions with Children, Families and Staff Policy	Privacy and Confidentiality Policy Respect for Children Policy Staffing Arrangements Policy Supervision Policy Work, Health and Safety Policy
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PURPOSE

Our Family Day Care Service supports participation of work placement students (including work experience students) and volunteers wanting to develop professional skills and knowledge in their effort

to become Early Childhood Professionals. We aim to build relationships with community members, providing appropriate learning opportunities for students and volunteers to contribute to our program. To ensure a professional and pleasurable learning experience, students and volunteers will be encouraged to participate in the daily routine and assist in accordance with their qualification level to work with children under the National Quality Framework requirements.

SCOPE

This policy applies to the Approved Provider, Coordinator, Educators, Educator Assistants, children, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

We have a strong commitment to provide a range of opportunities for family members, volunteers and students to participate in programs and activities while adhering to clear guidelines regarding appropriate interactions and communication with staff, and other adults and children at the Family Day Care Service.

“In genuine partnerships families and educators’ value each other’s knowledge and roles, communicate freely and respectfully and engage in shared decision making” (Early Years Learning Framework, 2009).

Please Note This policy has been changed from 29/04/2022 after the Visit of ECRU

The Approved Provider/Coordinator will:

Not provide work placement to any education centre which has FDC Scheme, interests in same like business, working as a coordinator in FDC, partnership in same like business, has same like sister contacts or business due to business confidentialities or conflict of interest.

Will not provide Work placement which student has not completed 70% of their Course content and must have to provide Competence report provided by Training Organisation.

Will not provide work placement to those students who are not passing the Service test, Interview

Will not provide work placement for those students/ Training organisations who are not contacting to service directly to take permission of Student placement

Will not take permission from service and will take work placement student directly and Educator/Student/Training organisation will be reported to Dept. of Education

Will not approve work placement provided if Service is not involved in the process Of work placement or been bypass without informing to Service providers

Except of all above conditions service will: -

Check the competence of Educator who will provide work placement to student and must have good record and all time compliant by Service provider and ECRU.

Provide work placement even for short time for students who will work directly as FDC Educator because of their work obligations service can directly deal with any complaints or concerns arise by parents.

Must have to provide Working with Children (Not receipt, Police Clearance, First Aid full certificate. Covid certificate, fit and proper form of Student, Child protection certificate

All Document Must have to provide at-least two weeks before starting of work placement

Ensure that Educator has got written permission from parents and Permission forms has been submitted to service at-least two weeks before

- discuss opportunities for students and volunteers to work with FDC educators
- provide the student/volunteer with a Student and Volunteer Handbook
- advise the student or volunteer to take a poster with a photo introducing themselves and outlining the reason for their placement to display in the home of their designated FDC Educator.
- ensure students or volunteers are never left alone with children or included in the ratio of adult to children
- ensure students and volunteers are aware that they must not discuss concerns, issues or complaints with parents, guardians and/or visitors
- introduce the student or volunteer to the FDC educator
- assist the student or volunteer to complete the *Educator Acknowledgement Checklist* (see Appendix 1)
- show the student or volunteer where they can access the Family Day Care Service policies
- ensure the student or volunteer has signed a confidentiality agreement prior to commencing their placement
- liaise with learning institutions and accept suitable student placements under the institution's supervision
- assist learning institutions to place suitable students with individual FDC educators
- ensure the student's paperwork and insurances are current
- ensure each student or volunteer holds a current Working with Children Check [or similar in each state/territory prior to commencing their placement]
- verify each student or volunteers Working with Children Check
- ensure students and volunteers provide an immunisation status (including COVID-19 vaccination or a medical contradiction certificate if required. Please check your state/territory requirements).

Family Day Care Educators will:

- conduct an orientation for the student or volunteer including taking the student or volunteer on a tour of the FDC residence/venue, showing emergency exits, and facilities
- negotiate with the student or volunteer the times/hours to be worked, and dates of the placement

- ensure students or volunteers bring in a poster with a photo introducing themselves and outlining the reason for their placement and details of their place of study/organisation/school
- inform families, children, and educator assistants when work placement students and/or volunteers are present at the FDC residence/venue, including their role and hours they will be attending
- discuss any relevant important information about specific children to the student or volunteer (i.e., court orders, additional needs, dietary needs) so that the student or volunteer is aware of potential issues
- maintain open communication with students and volunteers along with their practicum teachers about their performance
- support all student's practicum requirements to the best of their ability during the placement
- share appropriate skills and knowledge with each student and volunteer as reasonably practicable
- be aware of student and volunteer expectations
- have the time and proficiencies to support each student and volunteer in their placement as reasonably practicable
- encourage students and volunteers to seek help and advice as required
- be a positive role model, showing appropriate behaviour and conduct themselves in a professional manner
- guide the student or volunteer throughout the day
- make the student or volunteer feel welcome
- discuss the progress of written work and performance with the student or volunteer
- discuss any concerns raised by the student with the student's supervisor
- ensure students or volunteers are directly supervised at all times during children's nappy change times
- encourage students and volunteers to use their initiative
- ensure the student or volunteer remains up to date with their assessments/tasks to be completed
- never leave the student or volunteer alone with a child or children
- provide honest and accurate feedback to the student's training institution supervisor as required
- ensure the student/volunteers signs the visitor register upon arrival and departure from the FDC residence/venue

Work Experience Students and Volunteers Must:

Contact to Service Supervisor or Coordinator to see if any Educator is available to provide training on practicum bases.

Student must have to complete at least 70% of theory content before starting training or work placement for the safety and security of children and Educators.

Student must have sound knowledge of service policy and procedure and should demonstrate whenever asked to do so

Student must not relate to from the institute where that institute has already family day care service due to conflict of interest and privacy of our service.

- learn about the children through interaction and practical experience
- develop the skills and knowledge needed to care for and educate children
- learn about the importance of working as part of a team in the Early Childhood Profession- working with FDC educator, coordinator and other FDC educators during playgroups etc.
- learn and accommodate the expectations of the qualified educator/educator assistant
- inform their FDC educator and coordinator/nominated supervisor in writing of what will be expected of them by their training body, University or School, or any other training organisation, and provide time sheets and evaluation forms.
- keep up to date with all written work requirements
- work a variety of shifts to gain knowledge of different aspects of FDC operations
- bring in a poster introducing themselves that will include:
 - Name
 - Photo
 - Course they are studying
 - RTO/university/school they are studying with (Must not own family day care service)
 - Dates and times they will be at the FDC Residence
 - The focus of their study
- discuss any problems the student may be experiencing with the educator
- adhere to all FDC Service policies and procedures
- never remove a child from direct FDC educator supervision
- provide immunisation status (including COVID-19 vaccination or a medical contraindication certificate if required. Please check your state/territory requirements).

Probity Checks

- All students and volunteers will supply identity details to the Nominated Supervisor/approved provider

- All students and volunteers will hold a current Working with Children Check [for similar in each state/territory] prior to commencing their placement
- All students will have a meeting with the Nominated Supervisor/approved provider to receive information regarding the following Family Day Care Service policies:
 - Child Protection
 - Child Safe Environment
 - Privacy and Confidentiality
 - Dealing with Complaints
 - Work, Health and Safety
 - Code of Conduct
 - Photograph
 - Social Media

Students at risk

If FDC educators feel that the student is at risk of failing their practicum, the following steps will be taken:

1. the FDC educator will alert the Nominated Supervisor/Approved Provider of any concerns with the student
2. the FDC educator and Nominated Supervisor/Approved Provider will discuss concerns with the student
3. the FDC educator or Nominated Supervisor/Approved Provider will arrange for the student's training institution teacher to visit the FDC residence and discuss concerns that have ascended
4. the student's educational institution and Nominated Supervisor will govern the outcome of the practicum.

Termination of Student Practicum or Volunteer placement:

Termination of student's or volunteer's placement will occur if the student or volunteer

Will not provide the

- harms or is at risk of harming a child in their care
- is under the influence of drugs or alcohol
- fails to notify the Family Day Care Service and /or FDC educator if they will not be attending on a particular day prior to commencement time
- does not adhere to starting times or break times

- is observed using repeated inappropriate behaviour at the Family Day Care residence/venue
- does not comply with all policies and procedures addressed in the student package
- does not provide the photo with an introduction on commencement
- does not keep up to date with their work placement tasks
- removes any child or children from the direct supervision of the FDC educator.

RESOURCE

Childcare Centre Desktop- Human Resources

Student and Volunteer Handbook

SOURCE

Department of Education, Education and Skills (2009). *Belonging, being and becoming: The early years learning framework for Australia*.

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

Education and Care Services National Regulations. (2011).

Fair Work Act 2009 (Cth).

Fair Work Commission: Anti-bullying jurisdiction.

Guide to the National Quality Framework. (2018). (Amended 2020).

Office of the Director of Equal Opportunity in Public Employment. (1996). [Dealing with employee work-related concerns and grievances: Policy and guidelines](#):

Revised National Quality Standards. (2018).

Safe Work Australia. (2016). [Guide for preventing and responding to workplace bullying](#)

TAFE NSW [Student responsibilities in work placement](#)

Work Health and Safety Act, 2011.

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	July 2021	NEXT REVIEW DATE	July 2022
MODIFICATIONS	<ul style="list-style-type: none"> • edits to ensure consistency of student and volunteer throughout policy • additional policies added for student and volunteer checklist 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
OCTOBER 2020	<ul style="list-style-type: none"> • Additional regulations added • requirement for all visitors to sign in/out of FDC residence added 		OCTOBER 2021

	<ul style="list-style-type: none"> Supporting resource added- Student/Volunteer Handbook Additional sources added and links edited/checked Reviewed Appendix 1: Student and Volunteer Acknowledgment Checklist 	
OCTOBER 2019	<ul style="list-style-type: none"> Sources checked and updated. Minor punctuation and wording edited. Related policies added. 	OCTOBER 2020
DECEMBER 2017	<ul style="list-style-type: none"> References corrected, added &/or updated. Sources/references alphabetised. Additional information added to points. Rearranged the order of points for better flow. Minor formatting (line spacing & paragraph spacing) for consistency 	MARCH 2018
DECEMBER 2017	<ul style="list-style-type: none"> Modifications made to comply with changes to the National Quality Standard 	MARCH 2018
MARCH 2017	<ul style="list-style-type: none"> Modifications made to adhere with Family Day Care requirements. 	MARCH 2018

Appendix 1:

7.7.1 STUDENT AND VOLUNTEER ACKNOWLEDGMENTS CHECKLIST

NAME	
INSTITUTION	
PLACEMENT DATES	

ORIENTATION PACK	INCLUDED
Student/Volunteer Policy	
Student/Volunteer Detail Form	
Working With Children Check Information	
Student/Volunteer Handbook	

Student/Volunteer sign in/sign out register	
Family Day Care Statement of Philosophy	

ORIENTATION PACK	DISCUSSED Yes/No
FAMILY DAY CARE SERVICE	
Student/Volunteer Detail Form	
Working with Children Check Number – WWCC and expiry date recorded	
Immunisation status (including COVID-19 vaccination, if required. Please check your state/territory requirements)	
Introduced to FDC educator and educator assistant	
Shown where & how to sign in/out	
Explained breaks and shown a place to take breaks	
Shown the toilet and bathroom facilities	
Explained hand washing procedure – how and when	
Shown all store rooms and sheds	
Shown around the indoor and outdoor environment	
Shown the meeting point and location of all evacuation procedures	
Shown how to use kitchen appliances. e.g. microwave, oven, kettle etc	
Reinforced dress policy	
Communicated routines and shown where this is displayed in each room	
Gone through student handbook, underlining the Family Day Care Service philosophy and expectations	
Explained qualifications highlighting fundamental duties and responsibilities	
Clarified management structure within the FDC service	
Reinforced the FDC Service’s privacy and confidentiality agreement	

Shown where copies of the FDC Policies are situated for future access and referral	
Explained the role of the regulatory authority [in each state/territory]	
Explained the Assessment and Rating process and National Quality Standards	
Discussed NO Smoking In the workplace (Code of Conduct)	
FAMILY DAY CARE SERVICE POLICIES AND PROCEDURES	
Dealing with Complaints	
Supervision	
Child Safe Environment	
Child Protection	
Respect for Children	
Sun Safety	
Behaviour Guidance	
Code of Conduct	
Sleep and Rest	
Safe Transportation	
Photography	
PROCEDURES	
Sleep Procedure	
Nappy Change Procedure	
Toddler Nappy Change Procedure	
Toileting Procedure	
Cleaning Procedure	
Sick Leave	
Supervision	

YOUR SUPERVISOR IS:			
<input type="checkbox"/> I have read and agree to abide by the Family Day Care Service policies and procedures outlined in the acknowledgement checklist.			
STUDENT'S NAME:			
STUDENT'S SIGNATURE:		DATE:	
SUPERVISOR NAME:			
SUPERVISOR'S SIGNATURE:		DATE:	

7.7.2 STUDENT EVALUATION

STUDENT'S NAME:		DATE:	
STUDENT'S SIGNATURE:			

FEEDBACK	Rating - circle (1 – Unacceptable - 10- Exceptional)									
Interactions with children	1	2	3	4	5	6	7	8	9	10
Participation with families	1	2	3	4	5	6	7	8	9	10
Programming	1	2	3	4	5	6	7	8	9	10
Children's experiences	1	2	3	4	5	6	7	8	9	10
Ensuring children's safety	1	2	3	4	5	6	7	8	9	10
Health and Hygiene	1	2	3	4	5	6	7	8	9	10
Collaboration	1	2	3	4	5	6	7	8	9	10
Showing initiative	1	2	3	4	5	6	7	8	9	10

Ability to ask questions	1	2	3	4	5	6	7	8	9	10
Personal Appearance	1	2	3	4	5	6	7	8	9	10
Ability to follow policies and procedures	1	2	3	4	5	6	7	8	9	10
STRENGTHS:										

AREAS FOR IMPROVEMENT:

7.8 GOVERNANCE POLICY

The Governance Policy provides the overall direction, effectiveness, supervision and accountability of a Service. Management is responsible for guiding the direction of the service, ensuring that its goals and objectives are met in line with the philosophy, and all legal and regulatory requirements governing the operation of the service. All Educators must ensure that they follow all Regulations, law and Service policy procedure in order to support smooth Service operations. All Educators must have to make sure that they have to communicate through email for all information they required for CCS, Ratio of children, Kindy Child attendance, any payment not made by parents, any new child enrolment, any information which can create dispute in future must be communicated through electronic means of through a way which can be used as evidence for future. Verbal communication or any word of mouth is not acceptable and any claim made by educator that they sought verbal information will be consider educator negligence and will not be consider as evidence of action taken by educator. Verbal communication can be taken as general advice and should not be consider as permanent decision. For proper guidance and support educator must seek written document from service officials. E.g., coordinator, nominated supervisor, Directors, Managers etc., Service personnels or officials will take responsibility for any written information given to Educators/Parents.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision-making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinators and staff members performance is regularly evaluated and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL LAW AND REGULATIONS	
Sec. 13	Matters to be taken into account in assessing whether fit and proper person
Sec. 14	Regulatory Authority may seek further information
Sec. 21	Reassessment of fitness and propriety
Sec. 51	Conditions on service approval
Sec. 162	Offence to operate education and care service unless responsible person is present
Sec.172	Offence to fail to display prescribed information
Sec. 173	Offence to fail to notify certain circumstances to Regulatory Authority
Sec. 174	Offence to fail to notify certain information to Regulatory Authority
Sec. 175	Offence relating to requirement to keep enrolment and other documents
Sec.188	Offence to engage person to whom prohibition notice applies
Sec.269	Register of family day care educators, co-ordinators and assistants
29	Condition on service approval-insurance
30	Condition of service approval-family day care educator insurance

31	Condition on service approval-quality improvement plan
55	Quality improvement plan
73	Educational program
74	Record of child assessments or evaluations for delivery of educational program
84	Awareness of child protection law
85	Incident, injury, trauma and illness policies and procedures
104	Fencing
106	Laundry and hygiene facilities
116	Assessments of family day care residences and approved family day care venues
117	Glass
117B	Minimum requirements for person in day-to-day charge
127	Family day care educator qualifications
128	Family day care co-ordinator qualifications
143A	Minimum requirements for a family day care educator
153	Register of family day care educators, co-ordinators and educator assistants
154	Record of staff engaged or employed by family day care service
157	Access for parents
159	Children's attendance record kept by family day care educator
160	Children's attendance record to kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
165	Record of visitors
167	Record of service's compliance
168	Education and care services must have policies and procedures
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies and procedures
173	Prescribed information to be displayed
176	Time to notify certain information to Regulatory Authority
177	Prescribed enrolment and other documents to be kept by approved provider

178	Prescribed enrolment and other documents to be kept by family day care educator
179	Family day care educator to provide documents on leaving service
180	Evidence of prescribed insurance
182	Confidentiality of records kept by approved provider
181-184	Confidentiality and storage of records
185	Law and regulations to be available

RELATED POLICIES

Acceptance and Refusal Authorisation Policy Administration of First Aid Policy Arrival and Departure Policy Assessment of FDC educators, educator assistants and persons residing at FDC care residence Assessment, Approval and Re-assessment of FDC residence and/or venue CCS Governance Policy Code of Conduct Policy Child Protection Policy Child Safe Environment Policy Control of Infectious Diseases Policy Dealing with Complaints Policy Delivery of Children to, and collection from EEC Service Policy Emergency and Evacuation Policy Engagement and Registration of Family Day Care Educators Enrolment Policy	Interactions with Children, Staff and Families Policy Keeping a Register of FDC educators, co-ordinators and educator assistants Policy Medical Conditions Policy Nutrition Food Safety Policy Payment of Fees Policy Privacy and Confidentiality Policy Probation and Induction Orientation Policy Record Keeping and Retention Policy Safe Transportation Policy Sleep and Rest Policy Staffing Arrangements Policy Student and Volunteer Policy Sun Safety Policy Visitors to Family Day Care Residence Policy Water Safety Policy
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PURPOSE

Our Family Day Care Service aims to ensure all legal and financial requirements are implemented and recognised through appropriate governance practices, providing quality education and care, meeting the principles, practices and elements of the Early Years Learning Framework, My Time Our Place- Framework for School Age Care and the National Quality Standard.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Coordinator, educators and educator assistants of the Family Day Care Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure that policies and procedures are in place in relation to the governance and management of the service (regulation 168) and that they take reasonable steps to ensure those policies and procedures are followed (regulation 170). ACECQA 2021

Governance is the process that directs and controls our Family Day Care Service, ensuring accountability, and supporting decision making. The Approved Provider, coordinator and educators of the Service accept the legal responsibilities associated with establishing, administering, and maintaining the Service. Our Service has the following positions:

Approved Provider	[Name]
Coordinator	[Name]
Educational Leader	[Name]
Responsible Person	[Name]
Educator	[Name]
Educator Assistant/s	[Name]

THE APPROVED PROVIDER IS LEGALLY RESPONSIBLE FOR:

- ensuring compliance by all FDC educators and educator assistants with the Education and Care Services National Law and Education and Care Services National Regulations
- complying with Family Assistance Law
- appointing suitably qualified Coordinators and FDC educators in the Service
- supporting the coordinators in their role, providing adequate resources to ensure effective administration of the Family Day Care service
- developing a clear and agreed philosophy which guides business decisions and the work of management, staff and engaged educators
- displaying the prescribed information as listed in Regulation 173 including the current rating levels for each quality area stated in the National Quality Standard
- ensuring background checks, including criminal history and Working With Children Checks/Clearance are completed for all staff, FDC educators and educator assistants and adults over 18 years of age residing in the FDC residence [amend for your state/territory requirements]

- determining whether or not a person working in the service is a ‘fit and proper person’
- provide information to the regulatory authority upon request in relation to being a ‘fit and proper person’
- implementing a probation and induction orientation program to ensure employees are aware of their roles and responsibilities, understanding of the values and organisational culture of the Service, policies and procedures, child protection law and other legislation
- acting honestly and with due diligence
- ensuring that families of enrolled children have access to enter the premises (regulation 157)
- ensuring there is a sound foundation of policies and procedures that complies with all legislative and regulatory requirements, and that enables the daily operation of each Family Day Care Service to be in line with the Approved Provider’s philosophy and goals
- maintaining up to date and current policies and procedures for compliance by all FDC educators
- ensuring FDC educator and educator assistant’s hold, or be actively working towards, a Cert 3 qualification and qualification requirements are current
- ensuring coordinators hold an approved diploma level education and care qualification, or hold a former approved diploma level qualification completed before 1 January 2012 or, hold a qualification that ACECQA has determined to be an equivalent diploma level educator qualification
- ensuring FDC educators are monitored, supported and supervised in accordance to regulations
- implementing annual assessments of approved FDC residences and approved venues
- ensuring that requirements relating to the physical environment, space, equipment and facilities are met
- ensuring a record if kept of all visitors to a FDC residence or approved venue (Regulation 165)
- ensuring all requirements relating to staff records are kept
- ensuring all FDC educator documents are provided to the approved provider when the educator ceases to be engaged or registered with the FDC service
- notifying families at least 14 days before changes to policy or procedures that:
 - affect the fees charged or the way they are collected
 - significantly impact the service’s education and care of children, or
 - significantly impact the family’s ability to utilise the service.
- ensuring the education program is based on an approved learning framework (EYLF) and (MTO) and contributes to each child’s sense of identity and wellbeing
- ensuring policies and procedures are followed in the event that a child is injured, becomes ill or suffers a trauma (Reg.85)

- confirming incident, injury, illness or trauma records are stored in a kept in a safe and secure place until the child is 25 years of age. In the event of a death of child while being cared for by the Service or may have occurred as a result of an incident, the records must be kept until seven years after the death.
- being an employer, including all legal and ethical responsibilities that this entails
- appointing staff and monitoring their performance
- ensuring all FDC educators and staff have a clear understanding of the hierarchy of management
- providing clear and direct written and verbal feedback and instruction that is suitable and appropriate to the task
- ensuring FDC educators keep evidence of current public liability insurance at the FDC residence or venue
- ensuring the FDC Service remains financially viable and can meet its debts and other obligations as they fall due
- managing control and accountability systems
- reviewing the FDC Service's budget and monitoring financial performance and management to ensure the service is always solvent and has sound financial strength
- approving annual financial statements and providing required reports to government bodies and maintaining appropriate delegations and internal controls
- complying with funding agreements where appropriate
- reviewing the work process regularly
- supporting and assisting Coordinators and FDC educators in completing a Quality Improvement Plan (QIP) for the Service and updating it at least annually
- ensuring the QIP is updated upon request by the regulatory authority and submitted to the regulatory authority upon request (Reg. 31, 56)
- developing coherent aims and goals that reflect the interests, values and beliefs of all stakeholders of the Service
- establishing clearly defined roles and responsibilities for all FDC personnel
- evaluating and improving the performance of all FDC personnel
- complying with all other [Submit state/territory] and Australian governments' legislation that impacts upon the management and operations of a Service
- ensuring a copy of the Education and Care Services National Regulations and National Law is available at all times at the service for use by educators, staff, families and visitors (Reg. 185)

SERVICE PHILOSOPHY

- The development and review of the philosophy and policies will be a continuous process on an annual basis or when required.
- The philosophy and associated statement of purpose will reinforce all other documentation and the practices of the Service. The philosophy will reflect the principles of the approved national framework -*Belonging, Being and Becoming: The Early Years Learning Framework for Australia* and *My Time, Our Place: Framework for School Age Care in Australia*.
- There will be a collaborative and consultative process to support the development and maintenance of the philosophy that will include children, parents and Educators.
- All documents will be dated and include nominated review dates.

CODE OF CONDUCT

The standards of behaviour outlined in our *Code of Conduct Policy* provide guidance for all educators to make personal and ethical decisions related to confidentiality, recruitment, duty of care, record keeping, professional relationships and appropriate use of resources within our service.

CONFIDENTIALITY

- The FDC educator will maintain the confidentiality and privacy of each child in their care and their family and shall not disclose any information to a third party other than the Family Day Care Approved Provider or Coordinator, or as legally required to do so to comply with Child Information Sharing Scheme or Family Violence Information Sharing Scheme [edit to reflect information sharing schemes in your state/territory]
- Confidential conversations will be conducted in a quiet area away from other children, parents. Such conversations in relation to the health and wellbeing of the child will be documented and filed in a confidential manner.
- Reports, notes and observations in relation to FDC educators, other service staff and children must be objective, accurate and free from bias and negative comments including use of labels.
- Students, volunteers and/or visitors to the FDC educator's residence and/or venue will ensure that information in regard to FDC educators, FDC service staff, children and families is not discussed outside of the context in which it was heard.
- Any information received or transmitted via mobile telephone (including text/SMS) or any other electronic device (e.g. email) shall be treated with the same confidentiality as any other written form of communication and must be stored confidentially.

ETHICAL DECISION-MAKING

Our FDC Service will make decisions which are consistent with our policies and procedures which work in conjunction with the Education and Care National Law and National Regulations, our approved learning frameworks (EYLF and MTOP), and the ethical standards within the ECA Code of Ethics.

REVIEW AND EVALUATION OF THE FDC SERVICE

- Ongoing review and evaluation will support the continuing development of the Service. We will ensure that the evaluation involves all stakeholders.
- The development of a Quality Improvement Plan (QIP) will form part of the reflection procedure. Reflection on what works within the Service and what needs additional development will be included in the QIP.

MAINTENANCE OF RECORDS

- The Service will adhere to record keeping requirements outlined in the National Regulations (177).
- Records will be kept of all visitors to the FDC residence or approved venue while children are being educated and cared for as outlined in the National Regulations (165)
- The Service will adhere to the storage of confidential records outlined in the National Regulations (181-184).
- The Service has a responsibility to keep sufficient records about FDC educators engaged in the service, families and children in order to operate dependably and lawfully.
- The Approved Provider must ensure the family day care educator provides all documents referred to in Regulation 178 upon ceasing to be engaged by or registered with the service
- The Service will safeguard the interests of the children, their families and staff, using procedures to ensure appropriate privacy and confidentiality practice is upheld.
- The Approved Provider assists in determining the process, storage place and timeline for storage of records using the National Regulations as a minimum standard.
- The Service's orientation and induction processes will include the provision of significant information to coordinators, educators, educator assistants, children and families to comply with National Regulations and Standards.
- The Approved Provider will need to ensure that the record retention procedure meets the requirements of the following government departments:
 - Australian Tax Office (ATO).
 - Family Assistance Office (FAO).

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Governance Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management

SOURCE

Australian Children’s Education & Care Quality Authority. (2014). FDC Guidance *Record keeping in Family Day Care Services* https://www.acecqa.gov.au/sites/default/files/2018-03/FDC_RecordKeeping.pdf

Australian Children’s Education & Care Quality Authority. *Compliance Guide Approved Provider* (2017) <https://www.acecqa.gov.au/sites/default/files/2019-06/FDC-ComplianceGuide-ApprovedProvider.pdf>

ACECQA. (2021). Policy and procedure guidelines. *Governance and Management Guidelines*.

Australian Government. Department of Education. *Child Care Provider Handbook*. (2019)–(2022) <https://www.desec.gov.au/child-care-package/ccp-resources-providers/child-care-provider-handbook> <https://www.education.gov.au/child-care-package/child-care-provider-handbook>

Early Learning Association Australia (ELLA) *Employee management and development kit* (2014) <https://elaa.org.au/resources/free-resources/employee-management-development-kit/>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018). [Education and Care Services National Regulations](#). (2011)

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

Guide to the National Quality Framework. (2018). (Amended 2020).

Revised National Quality Standards. (2018)

[Western Australian Education and Care Services National Regulations](#)

Work Health and Safety Act 2011 (Cth)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • Annual policy maintenance • Additional information added regarding Regulation 31/56/176/185 • minor formatting edits within text • hyperlinks checked and repaired as required • continuous improvement/reflection section added • link to Western Australian Education and Care Services National Regulations added in ‘Sources’ 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
NOVEMBER 2021	<ul style="list-style-type: none"> • Additional law/regulations added- ACECQA Guidelines to Policy and Procedure document (August 2021) • Related policies added 		NOVEMBER 2022

	<ul style="list-style-type: none"> Further roles/responsibilities for Approved Provider included Sources checked for currency	
SEPTEMBER 2020	Deleted reference to Management Committee- Managing conflict of interest (not required for FDC) National Regulations added to sources	NOVEMBER 2021
NOVEMBER 2019	Additional information added to points Sources checked for currency and improved	NOVEMBER 2020
NOVEMBER 2018	Additional information added to points. Rearranged the order of points for better flow Sources/references alphabetised.	NOVEMBER 2019
DECEMBER 2017	Modifications made to comply with changes to the National Quality Standard	MARCH 2018
MARCH 2017	Modifications made to adhere to Family Day Care Service.	MARCH 2018

7.9 WITHDRAWAL OF A CHILD POLICY

To enable our Family Day Care Service to fill positions and maintain utilisation, families are required to provide notice when withdrawing their child from our Family Day Care Service.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
160	Child enrolment records to be kept by approved provider and family day care educator
168	Education and care services must have policies and procedures

177	Prescribed enrolment and other documents to be kept by approved provider
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents

RELATED LEGISLATION

Child Care Subsidy Secretary's Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.education.gov.au/child-care-package/child-care-provider-handbook

RELATED POLICIES

Acceptance and Refusal Policy Enrolment Policy	Orientation of Families Policy Termination of Enrolment Policy
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PURPOSE

We aim to ensure families gain a clear understanding of the Family Day Care Service's requirements when withdrawing their child.

SCOPE

This policy applies to children, families, educators/educator assistants, **Approved Provider, Nominated Supervisor**, management and visitors of the Family Day Care Service.

IMPLEMENTATION

Families are to be made aware during the enrolment and orientation process about the Family Day Care Service requirements should they wish to withdraw their child from the Service.

WITHDRAWING FROM THE FAMILY CARE SERVICE

- Families are required to provide management with **two weeks written notice** when withdrawing their child from the Family Day Care Service.
- The letter must state:
 - the date they are writing the withdrawal notice and
 - the child's last day of attendance.
- Written withdrawal notification can be emailed or handed to management.

- This letter will be placed into the child’s file and archived once they have left the Family Day Care Service.
- All records related to a child’s enrolment must be kept securely until the end of 3 years after the last day of the child’s attendance.
- Management will add an end date into the Family Day Care Service software program to ensure compliance with the Family Assistance Office and Centrelink.
- Fees will be charged up to the end of the **two weeks** from the date at which notice was received in writing, whether or not the child has attended the Family Day Care Service during those two weeks.
- A final account is to be processed by administration and noted on the withdrawal form. The final account is to be issued immediately to the family advising of the balance (payment is due or no payment due as applicable).
- A copy of the final account and withdrawal form is to be kept in child’s file.
- Families must ensure the account is paid prior to final attendance.
- If payment has not been received the debt recovery process is to start immediately.
- If the child does not attend during their **two weeks of notice**, Child Care Subsidy (CCS) will not be paid after their last day of attendance (including if the child does not attend on their last day) and full fees will be applicable (This is a policy of the Family Assistance Office in relation to Child Care Subsidy).
- At the end of the placement and if all criteria regarding fees and notice of withdrawal have been met, then the initial Bond payment made on enrolment will be refunded to the family within two weeks of the child’s last day.
- If at any time during the child’s enrolment it is felt that it is necessary to discuss the viability of the placement due to a concern regarding the duty of care to the child or other children in our care, the Family Day Care Service will immediately contact the Parent/Authorised Person/s to discuss all options. This may include the termination of the child’s position (*See Termination of Enrolment Policy*).

CONTINUING ENROLMENT IN THE NEW YEAR

- Prior to the end of each year, families will be provided with a letter to confirm their child’s continuing enrolment for the New Year.
- Failure to return this letter may result in their child not being considered for a future position.
- **Families with children going to school the following year will be required to complete the Re-enrolment form confirming that their child will be going to school the following year, adding an end date to their child’s care.**

- Families who require care in the New Year until the school year starts, will need to advise management in writing on the re-enrolment form, stating their child's last date of attendance at the Family Day Care Service. Any extensions to the advised date will be assessed by management and subject to availability which will be confirmed in writing for families.
- The Complying Written Arrangement will be updated
- Families who require changes to their hours of care for school age children must indicate new times, days etc on the re-enrolment form.
- Families eligible for CCS are responsible for ensuring that all information requested by Centrelink is provided to them in order to ensure no interruption to CCS payments.

EDUCATORS/EDUCATOR ASSISTANTS WITH CHILDREN AT THE SERVICE

Educators/educator assistants are welcome to enrol their child at the Family Day Care Service. However, if an educator/educator assistant is terminated from their position, the Family Day Care Service reserves the right to terminate the child's position due to conflict of interest.

WITHDRAWAL PRIOR TO COMMENCEMENT OF CARE

If a family has accepted the offer of a placement, then decides to withdraw from the Family Day Care Service before the agreed commencement date, the written notice period applies. If less than the written notice period is given prior to the agreed commencement date, full payment of the two weeks holding deposit/bond is payable to the Family Day Care Service and is non-refundable.

14 WEEK RULE (CCS)

An enrolment will end for Child Care Subsidy purposes if a child does not attend a session of care at our Family Day Care Service for 14 continuous weeks. This ensures that enrolments at our FDC Service are current and do not remain open indefinitely in the Child Care Subsidy system.

UPDATING AND ENDING ARRANGEMENTS AND ENROLMENT

When the arrangement for care ends, the approved provider must update an enrolment notice in the Child Care Subsidy System within seven days of the change or event which caused the change to the arrangement.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Withdrawal of a Child Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP - RELATED RESOURCES

Enrolment Information Update Form	
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SOURCE

Australian Government Department of Education–Skills and Employment. (2019) (2022) Child Care Provider handbook <https://www.education.gov.au/child-care-package/child-care-provider-handbook>

<https://www.desec.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>

Australian Government Services Australia Child Care Subsidy

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

Early Childhood Australia Code of Ethics. (2016).

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

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

Revised National Quality Framework. (2017). (Amended 2020).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	NOVEMBER 2022	NEXT REVIEW DATE	NOVEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • hyperlinks checked and repaired as required • minor formatting edits within text • continuous improvement/reflection section added • link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
NOVEMBER 2021	<ul style="list-style-type: none"> • Updated reference to Department of Education, Skills and Employment and Family Law in policy • Updated sources/links to DESE • minor edits 	NOVEMBER 2022	
NOVEMBER 2020	<ul style="list-style-type: none"> • addition of Family Law legislation • minor additions to policy re: 14-week rule • policy reviewed and sources checked for currency 	NOVEMBER 2021	
NOVEMBER 2019	National Regulations added Related policies added Sources checked for currency and edited	NOVEMBER 2020	
SEPTEMBER 2018	Terminology changed (CCB to CCS). Additional information added to points. Sources/references alphabetised.	NOVEMBER 2019	

	References corrected, added &/or updated. Incorrect links deleted and replaced with correct ones. Minor formatting (line spacing & paragraph spacing) for consistency throughout policy.	
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7.10 RECORD KEEPING AND RETENTION POLICY

The Approved Provider, Coordinator and educators of the Family Day Care Service are responsible for overseeing and ensuring records are maintained and stored in accordance with relevant legislation contained in the National Law and National Regulations, National Quality Standard and Family Assistance Law.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.
7.2.2	Educational leadership	The educational leader is supported and leads the development and implementation of the educational program and assessment and planning cycle.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW	
29	Condition on service approval—insurance
31	Condition on service approval—quality improvement plan
55	Quality improvement plans

74	Documenting of child assessments or evaluations for delivery of educational program
87	Incident, injury, trauma and illness record
92	Medication record
102	Authorisations for excursions
102D	Authorisations for service to transport children
116	Assessment of family day care residences and approved family day care venues
118	Educational leader
146	Staff Record – Nominated Supervisor
147	Staff record – Staff Members
149	Volunteers and students
151	Record of educators working directly with children
153	Register of family day care educators, coordinators and assistants
154	Record of staff engaged or employed by family day care service
158	Children’s attendance record is to be kept by approved provider
159	Children’s attendance record to be kept by family day care educator
160	Child enrolment records to be kept by approved provider and family day care educator
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
167	Record of service’s compliance
168	Education and care services must have policies and procedures
173	Prescribed information to be displayed
177	Prescribed enrolment and other documents to be kept by approved provider
180	Evidence of prescribed insurance
181	Confidentiality of records kept by approved provider
183	Storage of records and other documents
184	Storage of records after service approval transferred
185	Law and regulations to be available
S162A	Persons in day-to-day charge and nominated supervisors to have child protection training

RELATED LEGISLATION

Child Care Subsidy Secretary’s Rules 2017	Family Law Act 1975
A New Tax System (Family Assistance) Act 1999	Work Health and Safety Act 2011
Family Assistance Law – Incorporating all related legislation for Child Care Provider Handbook in Appendix G https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook	

RELATED POLICIES

Arrival and Departure Policy	Excursion Policy
Administration of First Aid Policy	Governance Policy
Administration of Medication Policy	Immunisation Policy
CCS Governance Policy	Incident, Injury, Trauma and Illness Policy
Child Safe Environment Policy	Medical Conditions Policy
Child Protection Policy	Photograph Policy
Dealing with Complaints Policy	Professional Development Policy
Death of a Child at the Service Policy	Privacy and Confidentiality Policy
Delivery of Children to, and from EEC Service	Responsible Person Policy
Premises Policy	Student and Volunteer Policy
Enrolment Policy	Supervision Policy

PURPOSE

We aim to maintain and manage appropriate records in a private and confidential manner, working in accordance with legislative requirements and best practice.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Coordinator, Educators, Educator Assistants, families, and visitors of the Family Day Care Service.

IMPLEMENTATION

The Approved Provider is responsible for compliance with record keeping requirements in accordance with Education and Care Services National Law and National Regulations. To maintain approval for Child Care Subsidy, providers must also keep certain records in accordance with Family Assistance Law.

This policy encompasses requirements for National Law and National Regulations and Family Assistance Law. Records that are required for Family Assistance Law must be kept for seven years and are highlighted in red.

PRESCRIBED RECORDS TO BE KEPT BY APPROVED PROVIDER:

The following records are to be retained in a secure location at the Family Day Care (FDC) Service Principal office:

- complaints made to the provider, or to any of the services of the provider, relating to compliance with Family Assistance Law (records must be kept for seven years)
- children's attendance records (regardless of eligibility for Child Care Subsidy) (Regulation 158) (to be kept until the end of 3 years after the child's last attendance [Regulation 183] and for Family Assistance Law, (records must be kept for seven years)

- record of any absences from care for all children (regardless of eligibility for Child Care Subsidy- records must be kept for seven years)
- statements or documents demonstrating that additional absence days in excess of the initial 42 absence days satisfy requirements (records must be kept for seven years)
- copies of invoices and receipts issued for the payment of childcare fees (records must be kept for seven years)
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record of coordinators, educators, educator assistants and any adult over 18 years residing in the FDC residence (records must be kept for seven years)
- any evidence or information produced to obtain police checks and Working With Children Checks for personnel and to support any statements about these checks in an application for provider or service approval. These records are also required for Family Assistance Law (records must be kept for seven years)
- copies of all Statements of Entitlement issued and any statements issued to advise that there was a change of entitlement - Child Care Subsidy (records must be kept for seven years)
- written record of any notice given to a state or territory body about a child at risk of abuse or neglect (records must be kept for seven years)
- copies of the evidence and information provided with an application for approval about persons with management or control of a provider and persons responsible for the day-to-day operation of the service (records must be kept for seven years)
- educational leader records (Regulation 118) (*Further details below*)
- child assessments or evaluations for delivery of the educational program (Regulation 74) (to be kept for 3 years after the child's last day of attendance [Regulation 183])
- an incident, injury, trauma and illness record (Regulation 87) (to be kept until child is 25 years [Regulation 183]) (*Further details below*)
- medication records (Regulation 92) (Keep until the end of 3 years after the child's last attendance [Regulation 183]) (*Further details below*)
- register of educators, coordinators and educator assistants (Regulation 153) (*Further details below*)
- record of staff and educators engaged or employed by the Service (Regulation 154) (*Further details below*)
- children's attendance records (Regulation 159) to be kept until the end of 3 years after the child's last attendance [Regulation 183]

- any record relating to the death of a child whilst being educated and cared for by the Service or as a result of an incident whilst being educated and cared for, until the end of 7 years after the death of a child.
- child enrolment records (Regulation 160, 161, 162) (to be kept until the end of 3 years after the child's last attendance [Regulation 183]) (*Further details below*)
- record of visitors (Regulation 165)
- record of volunteers and students (Regulation 149)
- records of the Responsible Person at the Service (Regulation 150 and National Law S162A)
- record of the Service's compliance with the Law (Regulation 167) (*Further details below*).
- record of assessments of Family Day Care residence or approved venues (including risk assessment) (Regulation 116)
- record of each nominated supervisor and any person in day-to-day charge of the Service (Regulation 146)
- PRODA RA Number (*for specified personnel- people managing or employed in child care in roles regarding the approval and operation of a service and permitted to undertake actions through the Child Care Subsidy System- Child Care Provider Handbook*)
- evidence of the current prescribed insurance for a family day care residence or venue (Regulation 180) Current policy of insurance for public liability with a minimum cover of \$10 000 000 (Reg. 29)
- evidence and records of the Service Quality Improvement Plan (QIP), the QIP must be prepared within 3 months of the service opening. The QIP must be reviewed and revised at least annually or when requested by the regulatory authority. The QIP must be submitted to the regulatory authority upon request (Reg. 31, 55, 56)
- a copy of the Education and Care National Law and Regulations must be available and accessible at the service at all times for use by the Nominated Supervisor, staff members, volunteers, parents and any person seeking to make use of the service.

RECORDS TO BE KEPT IN RELATION TO THE NOMINATED SUPERVISOR: (Reg: 146 and Law S162A)

- full name, address and date of birth
- evidence of any relevant qualifications held by the Nominated Supervisor
- if applicable, evidence that the Nominated Supervisor is actively working towards a qualification
- if this is the case, the following must be recorded:
 - Proof of enrolment

- Documentary evidence that the Nominated Supervisor has commenced the course, is making satisfactory progress towards the completion of the course, is meeting the requirements of maintaining the enrolment.
- For Nominated Supervisors who are working towards the completion of a Diploma level education and care qualification, proof that they hold an approved Certificate III level education and care qualification or have as completed the units of study that equate to an approved Certificate III level education and care qualification determined by ACECQA.
- evidence of any approved training (including first aid training and Child Protection) completed by the Nominated Supervisor
- the identifying number and expiry date of a Working with Children Check (WWCC), and Australian National Police Check **[insert relevant state/territory requirements]**
- the date the check, card, record or registration was and the date this was verified and by whom
- PRODA RA Number
- **evidence of the nominators written consent to the nomination**
- **evidence of Child Protection Training**

RECORDS TO KEPT IN RELATION TO THE REGISTER OF FDC EDUCATORS, COORDINATORS AND EDUCATOR ASSISTANTS: (Reg. 153)

Information held on the register must be kept until the end of 3 years after the date on which the Family Day Care educator, Coordinator or educator assistant ceased to be employed or engaged by or registered with the Service.

For the role of FDC educator, the register must include:

- the full name, address and date of birth of the educator
- contact details of the educator
- the address of the residence or approved FDC venue where the educator will be providing education and care to children as part of the Service, including a statement as to whether it is a residence or a venue
- the date that the educator was engaged by or registered with the FDC Service
- the date that the educator ceased to be engaged by or registered with the FDC Service (if applicable)
- the days and hours when the educator will usually be providing education and care to children as part of the Service
- if the educator is an approved provider, the number of the provider approval and the date the approval was granted

- evidence of any relevant qualifications held by the educator, or
- if applicable, evidence that the educator is actively working towards that qualification.
- If this is the case, the following must be recorded:
 - Proof of enrolment
 - Documentary evidence that the educator has commenced the course, is making satisfactory progress towards the completion of the course, is meeting the requirements of maintaining the enrolment.
 - For educators who are working towards the completion of a Diploma level education and care qualification, proof that they hold an approved Certificate III level education and care qualification or has completed the units of study in an approved Certificate III level education and care qualification determined by ACECQA.
- evidence of any approved training (including first aid training, current approved anaphylaxis management training, approved emergency asthma management training and approved Child Protection) completed by the educator.
- the identifying number and expiry date of a Working with Children Check (WWCC),) and Australian National Police Check **[insert relevant state/territory requirements]**
- date the check, card, record or registration was and the date this was verified and by whom
- PRODA RA Number
 - the full names and dates of birth of all persons aged 18 years and over who normally reside at the FDC residence
 - the full names and dates of birth of all children under 18 years of age who normally reside at the FDC residence
- evidence that the educator is adequately monitored and supervised by a FDC Coordinator including:
 - dates and times of any visits by the coordinator
 - dates and times of any telephone calls between the educator and Coordinator
 - details of any correspondence or written materials provided to the educator by the coordinator

For the role of Coordinator, the register must include:

- the full name, address and date of birth of the coordinator
- contact details of the coordinator
- the date that the coordinator was employed or engaged by the Service
- the date that the coordinator ceased to be employed or engaged by the Service
- if the coordinator is an approved provider, the number approval number and date granted

- evidence of any relevant qualifications held by the coordinator
- if the coordinator is providing education and care to children, evidence that the Coordinator has completed:
 - current approved first aid training
 - current approved anaphylaxis management training and
 - current approved emergency asthma management training
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record
- the date the check, card, record or registration was and the date this was verified and by whom.

For the role of educator assistant, the register must include:

- the full name, address and date of birth of the educator assistant
- contact details of the educator assistant
- the name of the FDC educator to be assisted
- the address of the residence or approved FDC residence or venue
- the date that the educator assistant was engaged or registered with the Service
- the date that the educator assistant ceased to be engaged or registered with the Service
- evidence of any relevant qualifications held by the educator assistant
- evidence that the educator assistant has completed-
 - current approved first aid training
 - current approved anaphylaxis management training and
 - current approved emergency asthma management training
- the identifying number and expiry date of a Working with Children Check (WWCC), current vulnerable people check or criminal history record

RECORDS TO BE KEPT IN RELATION TO STAFF ENGAGED OR EMPLOYED BY THE FDC: (Reg. 154)

The Approved provider must keep a record of:

- the name of the person currently designated as the educational leader/Coordinator (in accordance with Regulation 118)
- in relation to a Nominated Supervisor, the information set out in Regulation 146
- in relation to each other staff member of the FDC service, the information set out in Regulation 147 and
- in relation to volunteers and students, the information set out in regulation 149.

RECORDS TO BE KEPT IN RELATION TO STUDENTS AND VOLUNTEERS: (Reg. 149)

- the full name, address and date of birth of each student or volunteer

- management must also keep a record for each day on which the student or volunteer participates in the FDC Service, the date and hours of participation.

RECORDS TO BE KEPT IN RELATION TO VISITORS (Reg. 165)

- the FDC Educator must keep a record of all visitors to the FDC residence or approved venue while children are being educated and cared for
- the record must include:
 - the name of each visitor
 - time of arrival and departure
 - signature of the visitor.

RECORDS TO BE KEPT IN RELATION TO CHILD ENROLMENT: (Reg 160)

The Approved Provider and the FDC educator must keep an enrolment record that includes information set out in sub regulation (3) for each child educated and cared for by the educator. An enrolment record must include the following information:

- the full name, date of birth and address of the child-[birth certificate, passport, identify papers]
- the name, address and contact details of:
 - each known parent of the child
 - any person who is to be notified of any emergency involving the child if any parent of the child cannot be immediately contacted
 - any person who is an authorised nominee
 - any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
 - any person who is authorised to authorise an educator to take the child outside the education and care service premises
 - any person who is authorised to authorise the education and care service to transport the child or arrange transportation for the child
 - details of any court orders, parenting orders or parenting plans provided to the approved provider relating to powers, duties, responsibilities or authorities of any person in relation to the child or access to the child
 - details of any other court orders provided to the approved provider relating to the child's residence or the child's contact with a parent or other person
 - gender of the child
 - language used in the child's home
 - cultural background of the child and parents

- any special considerations for the child (e.g., cultural, religious, dietary requirements or additional needs)
- authorisations signed by a parent or a person named in the enrolment record as authorised to consent to the medical treatment of the or nominated supervisor to seek:
- medical treatment for the child from a registered medical practitioner, hospital or ambulance service
- transportation of the child by any ambulance service
- authorisation to take the child on regular outings [Reg 102]
- authorisation for regular transportation of the child (if relevant) [Reg 102D (4)]

HEALTH INFORMATION TO BE KEPT IN ENROLMENT RECORD (Reg: 162)

- the name, address and telephone number or the child's registered medical practitioner or medical service
- the child's Medicare number if available
- details of any specific healthcare needs of the child including any medical conditions or allergies including whether the child has been diagnosed as at risk of anaphylaxis, including details of any medical management plan
- details of any dietary restrictions for the child
- the immunisation status of the child
- a notation that states that a staff member or approved provider has sighted a child's health record

RECORDS TO BE KEPT IN RELATION TO ENROLLED CHILDREN (Reg: 74)

- documentation relating to child assessments or evaluations for delivery of the education program, including:
 - assessments of the child's developmental needs, interests, experiences and participation in the education program
 - assessments of the child's progress against the outcomes of the educational program
- For each child over preschool age, educated and cared for by the FDC Educator further evidence is required as follows:
 - evaluations of the child's wellbeing, development and learning. (SA, ACT, VIC, TAS, WA)
 - evidence of the development of the program for children over preschool age (NSW, NT, QLD)

RECORDS TO BE KEPT IN RELATION TO INCIDENT, INJURY, TRAUMA AND ILLNESS: (Reg: 87)

A family day care educator must keep an incident, injury, trauma and illness record in accordance to this regulation. The approved provider must keep a copy of all records at the principal office.

- Details of any incident in relation to a child or injury received by a child or trauma to which a child has been subject while being educated and cared for by the FDC educator. The following must be included:
 - the name and age of the child including date of birth
 - gender
 - the circumstances leading to the incident, injury or trauma
 - the time and date the incident occurred, the injury that was received or the child was subjected to the trauma.
- Details of any illness, which becomes apparent while the child is being educated and cared for by the FDC educator. The following must be included:
 - the name and age of the child including date of birth
 - gender
 - the relevant circumstances surrounding the child becoming ill and any apparent symptoms
 - temperature record and time temperature was taken
 - the time and date of the apparent onset of the illness
 - date child was last at the service
- Details of the action taken by the FDC educator in relation to any incident, injury, trauma or illness which a child has suffered while being educated and cared for by the FDC educator. The following must be included:
 - any medication administered, or first aid provided
 - any medical personnel contacted
 - details of any person who witnessed the incident, injury or trauma including signature of witness
 - the name of any person who the education and care service notified or attempted to notify of any incident, injury trauma or illness a child has suffered while being educated and cared for by the FDC educator and the time and date of the notification and notification attempts
 - the name and signature of the person making an entry in the record and the time and date that the entry was made
 - signed and dated parent/guardian acknowledgement of record

- this record must be recorded as soon as is practicable, but not later than 24 hours after the incident, injury, trauma or onset of illness occurred
- the record must show that a serious incident is entered into the [NQA IT System](#)

RECORDS TO BE KEPT IN RELATION TO MEDICATION: (Reg: 92, 95)

It is a legal requirement that FDC educators keep medication records that include details set out in National Regulation 92 (3) for each child being educated and cared for and for whom medication is to be administered.

- the name of the child
- the authorisation to administer medication (including self-administration is applicable) signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication
- the name of the medication to be administered
- the time and date the medication was last administered
- the time and date or the circumstance under which the medication should be next administered
- the dosage of the medication to be administered
- the manner in which the medication is to be administered
- If the medication is administered to the child:
 - the dosage that was administered.
 - the manner in which the medication was administered.
 - the name and signature of the person who administered the medication.
 - if another individual is required to check the dosage, the name and signature of that person.

RECORDS TO BE KEPT IN RELATION TO CHILDREN'S ATTENDANCE: (Reg 159)

A family day care educator must keep a record of attendance that records-

- the full name of each child being educated and cared for at the FDC residence or approved FDC venue
- the date and time each child arrives and departs
- the signature of:
 - the person who delivers the child to the FDC residence or venue or collects the child from the residence or venue
 - if the signature of the person who delivers the child cannot be reasonably obtained, the family day care educator.

RECORDS TO BE KEPT IN RELATION TO THE FAMILY DAY CARE SERVICE'S COMPLIANCE WITH THE LAW: (Reg: 167)

Details of any amendments of the Service Approval made by the Regulatory Authority including:

- the reason stated by the Regulatory Authority for the amendment
- the date on which the amendment took, or takes, effect
- the date (if any) that the amendment ceases to have effect
- details of any suspension of the service (other than a voluntary suspension) including:
 - the reason stated by the Regulatory Authority for the suspension
 - the date on which the suspension took, or takes, effect
 - the date that the suspension ends
- details of any compliance direction or compliance notice issued to the approved provider in respect of the service, including:
 - the reason stated by the Regulatory Authority for issuing the direction or notice.
 - the steps specified in the direction or notice
 - the date by which the steps specified must be taken.
- this information must not include any information that identifies any person other than the approved provider
- a record of certified supervisors placed in day to day charge of the education and care service.
- the Approved Provider must ensure that the documents referred to above in relation to a child enrolled at the Service are made available to a parent of the child on request. Accordingly, if a parent's access to the kind of information referred to in this documentation is limited by an order of a court, the approved provider must refer to the court order in relation to the release of information concerning the child to that parent.
- the record of compliance referred to above must be available for access on request by any person.

EVIDENCE OF PRESCRIBED INSURANCE (Reg: 180)

A FDC educator must keep evidence of the educator's current public liability insurance at the FDC residence or FDC venue and make the evidence available for inspection by the Regulatory Authority or an authorised officer under the Law.

STORAGE OF RECORDS (Reg: 183, 184)

Records made by our FDC Service will be stored in a safe and secure location for the relevant time periods as set out above and only made accessible to relevant individuals.

Records related to an incident, illness, injury or trauma must be kept until the child is aged 25 years.

If the record relates to the death of a child while being educated and cared for by the Service or as a result of an incident while being educated and cared for by the Service, the records must be kept for 7 years after the death.

In the case of any other record relating to a child enrolled at the education and care service, until 3 years after the last date on which the child was educated and cared for by the service.

All records required to maintain approval as listed in *Child Care Providers Handbook*, must be kept for **seven years**. Written records include records that are made and stored electronically, as long as they are stored safely and any changes, apart from incidental changes related to their storage and display, are also recorded. (p. 79).

If a service is transferred under the law, documents relating to a child must not be transferred without the express consent of the child's parents.

CONFIDENTIALITY OF RECORDS (Reg: 181 and 182)

The Approved Provider, Coordinator, educators, and educator assistants will ensure that information kept in a record is not divulged or communicated through direct or indirect means to another person other than:

- the extent necessary for the education and care or medical treatment of the child to whom the information relates
- a parent of the child to whom the information relates, except in the case of information kept in a staff record
- the Regulatory Authority or an authorised officer
- as expressly authorised, permitted or required to be given by or under any Act or law.
- with the written consent of the person who provided the information.

INFORMATION TO BE DISPLAYED (Reg: 173)

FDC Services must have the following information displayed:

- in relation to the provider approval:
 - the name of the approved provider
 - the provider approval number
 - any conditions on the provider approval
- in relation to the service approval:
 - the name of the education and care service
 - the service approval number
 - any conditions on the service approval
- the name of each nominated supervisor
- in relation to the rating of the service:
 - the current rating levels for each quality area stated in the National Quality Standard and
 - the overall rating of the service.
- in relation to any service waivers or temporary waivers held by the service, the details of the waivers including:
 - the elements of the NQS and the regulations that have been waived, and
 - the duration of the waiver, and
 - whether the waiver is a service waiver or a temporary waiver.

The Service must also display:

- the hours and days of operation of the education and care service
- the name and telephone number of the person at the education and care service to whom complaints may be addressed.
- the name and position of the responsible person in charge of the service at any given time
- the name of the educational leader at the service
- the contact details of the Regulatory Authority
- if applicable, a notice at the FDC approved residence or venue stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the FDC service approved venue and attends the FDC residence or venue
- if applicable, a notice stating that there has been an occurrence of an infectious disease at the FDC residence or FDC venue
- information relating to the educational program (Regulation 75)
- the weekly menu is displayed (Regulation 80)
- emergency and evacuation floor plans and instructions are displayed (Regulation 97 (4))

- the certificate issued by the regulatory authority displaying the current rating levels of the National Quality Standards and the overall rating of the service. If applicable display the certificate stating the highest rating level (ie excellent rating). (Regulation 173 (3))

ADDITIONAL RECORDS TO BE KEPT FOR FAMILY ASSISTANCE LAW (if applicable)

- a Complying Written Agreement (CWA) for all enrolments registered to claim Child Care Subsidy (CCS). Updated CWAs must be signed if there are changes to the original enrolment conditions.
- documentation relating to an Additional Child Care Subsidy (ACCS) claim

Appendix 1: Family Assistance Law

Family Assistance Law is a broad term that encompasses the following legislation:

[A New Tax System \(Family Assistance\) Act 1999](#)

[A New Tax System \(Family Assistance\) \(Administration\) Act 1999](#)

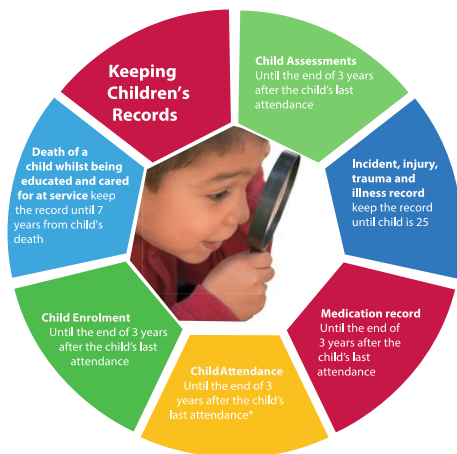
[Child Care Subsidy Minister's Rules 2017](#) (Minister's Rules)

[Child Care Subsidy Secretary's Rules 2017](#) (Secretary's Rules)

Any other instruments (including regulations) made under the [A New Tax System \(Family Assistance\) Act 1999](#) and the [A New Tax System \(Family Assistance\) \(Administration\) Act 1999](#)

Schedules 5 and 6 to the [A New Tax System \(Family Assistance and Related Measures\) Act 2000](#).

Appendix 2: ACECQA graphic image



*For preschool programs provided by a school, the service should keep child attendance records in accordance with their state education law or department policy.



https://www.acecqa.gov.au/sites/default/files/acecqa/files/NQF/Record_keeping_A4.pdf

SOURCE

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

Australian Government Department of Education **Skills and Employment** Child Care Provider Handbook



<https://www.dese.gov.au/resources-child-care-providers/resources/child-care-provider-handbook>

<https://www.education.gov.au/early-childhood/resources/child-care-provider-handbook>

Australian Government Department of the Officer of the Privacy Commissioner: www.privacy.gov.au

Australian Legal Information Institute: www.austlii.edu.au

Australian Taxation Office: www.ato.gov.au

Child Care Subsidy Secretary's Rules 2017.

Early Childhood Australia: www.earlychildhoodaustralia.org.au

Education and Care National Regulations. (2011).

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

NSW Government Department of Community Services: www.community.nsw.gov.au

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

Privacy Act 1988.

Revised National Quality Standard. (2018).

Western Australian Education and Care Services National Regulations

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	SEPTEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
MODIFICATIONS	<ul style="list-style-type: none"> Update of Department name from Department of Education, Skills, and Employment to Department of Education Additional regulation information included (Reg. 31, 55, 56, 185) policy maintenance minor formatting edits within text hyperlinks checked and repaired as required link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATION	NEXT REVIEW DATE	
DECEMBER 2021	<ul style="list-style-type: none"> Additional authorisations for transportation added- Reg 160 Additional section Health Information in enrolment record Deleted requirement for birth certificate Additional information to be displayed added ACECQA graphic added Sources checked 	DECEMBER 2022	
AUGUST 2020	<ul style="list-style-type: none"> Update of Related Legislation Update of Related Policies Update of sources used within policy 	DECEMBER 2021	
OCT-DEC 2020	<ul style="list-style-type: none"> additions in relation to enrolment records (Reg. 160) additional information related to police checks/ PRODA RA number evidence of prescribed insurance added (Reg. 180) 	DECEMBER 2020	

MARCH 2020	Inclusion of related Family Law regulations Additional records to be kept for Family Law and Child Care Subsidy Length of time records to be kept added Appendix added in relation to Family Law legislation	DECEMBER 2020
DECEMBER 2019	Added Related policies Records to be kept following death of a child in a Service Regulations added to sub sections Added heading: Records to be kept in relation to visitors	DECEMBER 2020
DECEMBER 2018	Added FDC-specific regulations. Order of sections changed to reflect Regulation numbers. Added heading: <i>Prescribed records to be kept by approved provider</i> Added regulation numbers to the <i>prescribed records</i> section. Deleted 'archive' definition at end. Sources/references corrected, updated, and alphabetised. Websites added to sources. Relevant CCS laws & reference added.	DECEMBER 2019
SEPTEMBER 2017	New Policy for Family Day Care drafted	DECEMBER 2018

7.11 RELIEF STAFF POLICY

Our Family Day Care Service aims to maintain continuity of education and care and abide by the Education and Care National Regulations and National Quality Standard by engaging quality relief approved Family Day Care (FDC) educators to permit permanent educators temporarily close due to annual leave, sick leave or other approved leave.

Whenever possible, the educator assistant employed to assist the approved FDC educator will be engaged to provide relief education and care for children, however on some occasions, alternative care will be offered to families.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.

7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.
7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2.3	Development of professionals	Educators, co-ordinations and staff members' performance is regularly evaluated, and individual plans are in place to support learning and development.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
10	Meaning of actively working towards a qualification
82	Tobacco, drug and alcohol-free environment
120	Educators who are under the age of 18 to be supervised
145	Staff Records
149	Volunteers and Students
168	Policies and Procedures

RELATED POLICIES

Child Protection Policy Child Safe Environment Policy Code of Conduct Policy Enrolment Policy Keeping a Register of Family Day Care Educators, Coordinators and Educator Assistants Policy	Interactions with Children Families and Staff Policy Privacy and confidentiality policy Recruitment Policy Respect for Children Policy Safe Transportation Policy Sleep and Rest Policy Tobacco Drug Alcohol Free Policy
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SCOPE

This policy applies to the Approved Provider, **Nominated Supervisor**, Coordinator, educators, and educator assistants of the Family Day Care Service.

PURPOSE

Our Service is committed to be a child safe Early Education and Care Service and uphold the 10 Child Safe Standards as recommended by the National Office for Child Safety **for Child Safe Standards applicable to**

your state/territory]. Our recruitment and screening processes for permanent, engaged educators and relief staff play a vital role in protecting children from harm.

IMPLEMENTATION

Family Day Care educators may need to temporarily close their service due to annual leave, sick leave or other approved leave. Our FDC Service aims to ensure minimal disruption to the quality of education and care provided by our educators and will offer families access to alternative places when necessary.

THE FAMILY DAY CARE EDUCATOR WILL:

- advise the Coordinator/Responsible Person that relief care is required- stating dates, reason and time
- notify the Family Day Care Service by Verbally, email or writing of the intent to take holiday leave no less than **Two Weeks** before commencing a holiday
- notify parents that relief care will be required on the stated dates
- ensure parents complete a Parent Consent to Relief Care form
- provide opportunity (if possible) to meet with the relief FDC educator
- advise parents that relief care must be paid directly to the relief FDC educator
- ensure the relief FDC educator is aware of any medical requirements of children in care
- advise the Coordinator/Responsible Person as soon as possible if they are unable to provide education and care to children on a particular day/week due to illness.

THE COORDINATOR/RESPONSIBLE PERSON WILL:

- confirm and approve the required leave of the FDC educator
- ensure the relief FDC educator's approval and registration with the Service is current
- ensure the relief FDC educator's Public Liability Insurance is current and available to sight at all times
- ensure the relief FDC educator has completed an induction with the FDC service including:
 - the FDC Services' policies and procedures
 - Code of Conduct
 - roles and responsibilities including mandatory reporting and reportable conduct scheme
 - Child Safe Standards [as applicable in each state/territory]
 - emergency evacuation procedures
 - children's medical and/or dietary requirements [medical management plans]

- privacy and confidentiality requirements [including child information sharing schemes as applicable in each state/territory]
- behaviour guidance strategies implemented
- Work, Health and Safety
- ensure the relief FDC educator has proof of *actively working towards* at least an approved certificate III level education and care qualification (see: [ACECQA qualifications checker](#))
- verify a current Working with Children Check; Vulnerable Person check or Police/Criminal Check (as per state/territory requirements)
- ~~verify COVID-19 vaccination status or a medical contraindication certificate if required – [check your state/territory requirements]~~
- ensure any other required qualification is valid - (CPR, First Aid, approved asthma management training, approved anaphylaxis management training, approved child protection training)
- ensure emergency evacuation procedures are current at the FDC residence or approved venue
- check relief FDC educator’s vehicle safety certificate, inspection of child restraints, vehicle registration and insurance
- check children’s medical and/or dietary requirements and conditions
- maintain the Family Day Care educator register
- ensure maximum numbers of children in care do not exceed regulatory requirements
- documented risk assessment has been completed and approved for the Relief FDC residence
- risk assessment for transportation and/or excursions are completed and current
- written parental permission is received for regular outings and regular transportation
- provide support and guidance to the relief FDC educator as required.

THE RELIEF FAMILY DAY CARE EDUCATOR WILL:

- confirm bookings with the FDC educator and directly with families
- provide an opportunity to meet with parents and children as a form of orientation to their residence prior to commencement of relief care
- ensure all required qualifications/training information is up to date and the Service management has relevant copies
- provide evidence of mandatory vaccinations (~~including COVID-19 vaccinations or a medical contraindication certificate if required – [check your state/territory requirements]~~)
- ensure mandatory documentation is on display
- adhere to maximum numbers of children in care as per regulatory requirements

- maintain attendance records on arrival and departure
- submit required documentation to receive Child Care Subsidy
- adhere to Family Day Care Service policies and procedures at all times
- provide quality education and care to children as per National Quality Framework and align to the learning framework- Early Years Learning Framework (EYLF,) My Time Our Place (MTOP)
- document observations of children’s learning and programming evidence
- ensure families have signed all required permission notes-
 - Relief educator permission/consent
 - excursion consent forms
 - regular transportation consent forms
 - regular outing consent forms
- not consume alcohol, tobacco or other drugs whilst educating or caring for children (Reg.82).

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Relief Staff Policy* will be reviewed on an annual basis in consultation with children, families, staff, educators and management.

SOURCE

Australian Children’s Education & Care Quality Authority. (2014).
 Education and Care Services National Law Act 2010. (Amended 2018).
[Education and Care Services National Regulations](#). (2011).
 Fair Work: <https://www.fairwork.gov.au/employee-entitlements/types-of-employees/casual-part-time-and-full-time>
 Guide to the National Quality Framework. (2017). (Amended 2020).
 Guide to the National Quality Standard. (2017).
 Revised National Quality Standard. (2018).
[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V6.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> • policy maintenance - no major changes to policy • removal of COVID mandated vaccination requirement 		



	<ul style="list-style-type: none"> • continuous improvement/reflection section added • link to Western Australian Education and Care Services National Regulations added in 'Sources' 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
OCTOBER/DECEMBER 2021	<ul style="list-style-type: none"> • additional information regarding COVID-19 vaccinations mandated in some jurisdictions (NSW/VIC) • information related to induction of relief FDC educator added • review as part of annual review cycle (December 2021) 	DECEMBER 2022
DECEMBER 2020	<ul style="list-style-type: none"> • additional regulations added • Child Safe Standards added • minor edits 	DECEMBER 2021
DECEMBER 2019	New policy drafted for FDC services	DECEMBER 2020

Under the *Education and Care Services National Law and Regulations*, an approved provider must ensure that policies and procedures are in place under regulation 168 and 169. While it is important to have policies and procedures in an early childhood education and care service, it is equally important that the policies are regularly reviewed, and amendments made to cater for changes in legislation and researched best practice, and changes to service procedures that aim to support ongoing quality improvement.

Engagement in regular review of policies and procedures ensure that they align with quality practice within the Service and are responsive to feedback identified through the service's risk management and quality improvement systems. [Guide to National Quality Framework, 2017 (amended 2020)]

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 6: COLLABORATIVE PARTERSHIPS WITH FAMILIES AND COMMUNITIES		
6.1.1	Engagement with the service	Families are supported from enrolment to be involved in the service and contribute to service decisions
QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1	Governance	Governance supports the operation of a quality service.
7.1.1	Service philosophy and purposes	A statement of philosophy guides all aspects of the service's operations.
7.1.2	Management Systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

7.1.3	Roles and Responsibilities	Roles and responsibilities are clearly defined and understood and support effective decision making and operation of the service.
7.2	Leadership	Effective leadership builds and promotes a positive organisational culture and professional learning community.
7.2.1	Continuous improvement	There is an effective self-assessment and quality improvement process in place.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
30	Conditions on service approval – family day care educator insurance
55-56	Quality Improvement Plan
168	Education and care services must have policies and procedures
169	Additional policies and procedures- family day care service
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

PURPOSE

To ensure compliance with the National Quality Framework, our Family Day Care (FDC) Service will review our policies and procedures on an annual basis, or more frequently if required due to changes having occurred within the FDC Service, or if considered best practice in respect of current research. We aim to work in collaboration with our Family Day Care educators and families, gathering feedback when updating our policies and procedures to ensure that the needs of children being educated and cared for are always being met.

SCOPE

This policy applies to the Approved Provider, Coordinator, educators, and educator assistants of the Family Day Care Service.

IMPLEMENTATION

Policies and procedures are an integral part of the documentation required to meet legislative requirements for all early childhood education and care services. Policies and procedures clearly outline the processes all educators engaged by the Family Day Care service will follow and assist all educators and staff to understand their roles and responsibilities. They ensure a consistent approach and

embedded practice across all operations and practices of a service and help to inform families how the Family Day Care service operates.

THE APPROVED PROVIDER/MANAGEMENT WILL ENSURE:

- our policies and procedures are underpinned by the *Early Years Learning Framework* and ECA Code of Ethics and address the *Education and Care Services National Law and National Regulations*, *National Quality Standard* and other state/territory laws as applicable
- all policies and procedures will be made available for families and FDC educators to view at all times
- all policies developed will be made in consultation with management, staff and families of children attending the FDC Service
- our educators and educator assistants will ensure that all policies and procedures are reviewed as per the document review routine, or more often if required (e.g. due to changes in regulations, legislation, and/or Service practices). This gives both families and educators opportunities to suggest aspects or areas that may need to be modified or improved.
- each document has a recommended review date stated in the 'Review' section of the policy document and changes are clearly made through version control
- FDC educators, educator assistants, coordinators, and family members are invited to have input into the policies and procedures at any time of the year, not only at the scheduled review time for a particular policy
- all policies will be signed, sourced/referenced, and dated at each review and educators and other staff will continuously seek out relevant new information and research to be included in policies in order to provide the best possible environment and practices
- policies will be informed by relevant authorities to ensure best practice- e.g.: KidSafe, Cancer Council, Red Nose
- all stakeholders at the Service must be informed of any changes to policies. This will occur in writing and be provided to families, FDC educators, other staff, management, the committee, and any other applicable individuals
- families will have the opportunity to revise and help plan policies via Newsletters and specific letters to families discussing the policy or a draft of the proposed policy and given the opportunity to respond.
- all policies that are being either reviewed or developed will be displayed on the FDC residence's noticeboard, so that all stakeholders are aware of progress at all times and can be involved in the review

- all revised/updated policies are included in the Policy Folder/document. Updates will be made to the Family Handbook, Staff Handbook and other related documents.
- policies are accessible to all families and provide a translation service for policies for families who do not have English as their first language.

LEGISLATIVE REQUIRMENTS

All Family Day Care Services must have policies and procedures in place relating to the categories listed in Regulation 168 and Regulation 169 of the National Regulations. FDC Services may have additional policies and procedures dependent upon their unique situation and operation requirements.

In accordance with Regulation 172, the FDC Service must ensure that parents of children enrolled at the Service are notified at least 14 days before making any change to a policy or procedure that may have a significant impact on:

- the Service's provision of education and care to any child enrolled at the FDC Service or
- the family's ability to utilise the FDC Service.

The FDC Service must ensure that parents of children enrolled at the service are notified at least **14** days before making any change that will affect the fees charged or the way in which fees are collected.

If the FDC Service considers that the notice period would pose a risk to the safety, health or wellbeing of any child enrolled at the service, the approved provider must ensure that parents of children enrolled at the service are notified as soon as practicable after making a change.

The FDC Service must ensure that copies of the current policies and procedures are available for inspection at the FDC residence or approved venue upon request.

The Approved Provider must ensure the following Policies are in place (Reg.168):

- Health and Safety
 - Nutrition, food and beverages, dietary requirements
 - Sun protection
 - Water safety
 - The administration of first aid
 - Sleep and rest for children
- Incident, injury, trauma and illness
- Dealing with Infectious Diseases

- Dealing with Medical Conditions
- Emergency and Evacuation
- Delivery of Children to, and Collection from, education and care service premises
- Excursions
- Transportation
- Child Safe Environment
- Staffing
 - Code of Conduct
 - Determining the Responsible Person
 - Participation of Volunteers and students
- Interactions with Children
- Enrolment and Orientation
- Governance and Management
 - Confidentiality of records
- Acceptance and refusal of authorisations
- Payment of Fees
- Dealing with Complaints

The Approved Provider must ensure the following additional Policies are in place (Reg.169):

- Assessment of proposed family day care venues and proposed family day care residences and reassessment of approved family day care venues and family day care residences, including matters to meet the requirements of regulation 116;
- Engagement or registration of family day care educators;
- Keeping of a register of family day care educators, family day care co-ordinators and family day care educator assistants under regulation 153;
- Monitoring, support and supervision of family day care educators, including how the service will manage educators at remote locations;
- Assessment of family day care educators, family day care educator assistants and persons residing at family day care residences, including the matters required under regulation 163;
- Visitors to family day care residences and venues while education and care is being provided to children as part of a family day care service;
- The provision of information, assistance and training to family day care educators;
- The engagement or registration of family day care educator assistants.

CONTINUOUS IMPROVEMENT/REFLECTION

The *Writing and Reviewing Policies Policy* will be reviewed on an annual basis in conjunction with children, families, staff, educators and management.

CHILDCARE CENTRE DESKTOP RESOURCES

Notification of change to policy and procedures form	Policy Evaluation Procedure Policy Evaluation Worksheet
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SOURCE

Australian Children's Education & Care Quality Authority. (2012). *How to Develop and Update Policies Successfully (without the stress)*.

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

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

Revised National Quality Standard. (2018).

[Western Australian Education and Care Services National Regulations](#)

REVIEW

POLICY REVIEWED BY	[NAME]	[POSITION]	[DATE]
POLICY REVIEWED	DECEMBER 2022	NEXT REVIEW DATE	DECEMBER 2023
VERSION NUMBER	V6.12.22		
MODIFICATIONS	<ul style="list-style-type: none"> • Sources checked for currency • Minor edits throughout policy • Additional section added for Continuous Improvement • Additional section added for Related Resources • Additional information added regarding Regulation 168 and 169 – Required Policies • link to Western Australian Education and Care Services National Regulations added in 'Sources' 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
DECEMBER 2021	<ul style="list-style-type: none"> • Small edits to policy reflected in development of Policy Evaluation Procedure (new) • additional Quality Area added (QA6) • additional source added 	DECEMBER 2022	
DECEMBER 2020	<ul style="list-style-type: none"> • additional information added to implementation and responsibilities of management • small edits throughout policy • page numbers added 	DECEMBER 2021	

DECEMBER 2019	New policy drafted for FDC services	DECEMBER 2020
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