

# Absent and Missing Children

## POLICY STATEMENT

We aim to ensure the safety and welfare of the children by ensuring clear communication and co-operation between the Centre, parents and the school.

## CONSIDERATIONS

National Quality Standard Quality Area 2.3

## PROCEDURE

- Parents are to advise the Centre if their child will be absent on a day that they are booked into care.
- **If parents are aware before hand they must:**
  - Write a note in the Parent book, or inform a staff member in person who must record the information in the Parent book for the day of expected absence.
- **If parents do not know until the day they must in person:**
  - Ring the Centre and inform a staff member, as early as possible.
  - Where possible this change should be confirmed in writing.
  - This information must be recorded in the Parent book.
    - Parents must indicate the expected time of absence if it is expected to be for more than 1 day.
- Parents will be informed of this requirement on enrolment and through the parent information booklet detailing the great importance of the Centre knowing of a child's absence.

### **If a child does not arrive from school in the afternoon:**

Staff will:

- Ask the children of their knowledge of where the child might be (this should not be relied upon).
- Approach the school office or the child's teacher and ask for information regarding the child's attendance at school
- Check the school grounds
- Contact the parent immediately to check if the child should be attending the Centre.
- If parents are not available, staff will continue to call until contact is made. Emergency contacts may be utilized in an attempt to contact parents.
- Ensure all other children are well supervised during this time.
- If the child was absent, parents will be called to remind them of their failure to contact the Centre, and to find out if the child will attend on their next usual day of attendance.
- If the child attended school and is expected to attend the Centre, the staff member will continue to try and locate the child, and make contact with the parents.
- The police may be contacted if contact has not been made with parents by 6pm.
- Staff should document all incidents of absent/missing children, including their attempts to contact parents and contact with police.

# Acceptance and Refusal of Authorisations

## RATIONALE

The Education and Care Services National Regulations require services to ensure that an authorisation (permission) is obtained from parents in certain circumstances. For example, the Regulations stipulate an authorisation must be obtained for:

- Administering medication to children (Regulation 93)
- Children leaving the premises of a service with a person who is not a parent of the child (Regulation 99)
- Children being taken on excursions (Regulation 102)
- Access to personal records (Regulation 181)

Authorisation from parents may also be required if:

- A child is leaving the service to attend an extra-curricular activity away from the service, for example, attending a sporting activity, dance, drama, etc. that is run by a provider other than the OSHC service.
- Children are leaving the service to make their own way home.

## POLICY STATEMENT

Our policy on the acceptance and refusal of authorisations sets out the circumstances in which the service will require authorisation (permission) from parents. Authorisation from parents is required to ensure the safety of the children and staff may refuse a parent/guardian's request unless the authorisation is provided. For example, if a child is to attend an extra-curricular activity for which authorisation is required, but has not been given, this will result in the child not being able to participate in the activity. Preferably, authorisation is required in written format, however in some circumstances verbal authorisation may be accepted at the discretion of staff.

## CONSIDERATIONS:

- Children (Education and Care Services National Law Application) Act 2010
- Education and Care Services National Regulation 2011: clause 168
- National Quality Standard: Quality Area 7.3

## PROCEDURE

The Nominated Supervisor, or the person in day-to-day charge of the service will:

1. Ensure documentation relating to authorisation (permission) from parents/guardian contains:
  - the name of the child enrolled in the service;
  - the date;
  - signature of the child's parent / guardian or nominated person who is on the enrolment form;
  - the approximate time the child will return to the service if the child is leaving the service to attend an extra-curricular activity and the time they will return to the service (if applicable);
  - the original form/letter provided by the Centre;
2. Apply these authorisations to the collection of children, administration of medication, excursions and access to records.

3. Keep these authorisations in the child's enrolment record.
4. Ensure the child will not be permitted to leave the service to attend any extra-curricular activity until authorisation is obtained from the parent/guardian.
5. Ensure that children are not permitted to sign themselves out or leave the service without an authorised adult, unless written authorisation from the parent/guardian has been given.
6. Obtain written authorisation, if a person other than the parents/guardian or other nominated person cannot collect the child.
7. In certain circumstances verbal authorisation, may be accepted at the discretion of the senior staff member on duty. In these instances, staff will record in the diary, the time of the telephone call with the parent/guardian and name of the person who will be collecting the child. Identity of the person collecting the child should be confirmed by sighting ID – preferably photographic ID, for example, current driver's licence.
8. Exercise the right to refuse if written or verbal authorisations do not comply with the requirements outlined above.
9. Waive compliance for authorisation where a child requires emergency medical treatment for conditions such as Anaphylaxis or Asthma. The service can administer medication without authorisation in these cases, provided they contact the parent/guardian as soon as practicable after the medication has been administered.

# Accidents

## POLICY STATEMENT

We will ensure the safety and wellbeing of staff, children and visitors, within the Centre and on excursions, through proper care and attention in the event of an accident. The Centre will make every attempt to ensure sound management of the injury to prevent any worsening of the situation. Parents or emergency contacts will be informed immediately where the accident is serious.

## CONSIDERATIONS

National Standard 1; Element 2.1.4 (*“Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognized guidelines”*)

National Standard 1; Element 2.3.3 (*“Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented”*)

National Regulation 85 *“Incident, injury, trauma and illness policies and procedures”*

## PROCEDURE

*“The person caring for the child assumes responsibility for acting in the best interests of the child in the event of an injury. The careful exercise of this discretion is considered part of the staff’s duty of care.” (Guide to the Law for Children’s Services, NSW Community Child Care Co-op.)*

- Parents are required to provide written consent for staff to seek medical attention for their child if required before they start in the Centre. This will be recorded in the enrolment form.
- Parents will be required to supply the contact number of their preferred doctor or dentist, Medicare number and health insurance details.
- Staff will be required to supply two contact numbers in case of an emergency or accident.
- If a child, staff member or visitor has an accident while at the Centre they will be attended to immediately by a staff member who holds a first aid certificate, and the Nominated Supervisor informed
- In the case of medication being required in an emergency without prior consent of the parents/guardians, staff are to secure that consent from a registered medical practitioner, if possible and practical.
- Anyone injured will be kept under adult supervision until they recover or an authorised person takes charge of them.

### **In the case of a minor accident the first aid attendant will:**

- Assess the injury.
- Attend to the injured person and apply first aid as required.
- Ensure that disposable gloves are used with any contact with blood or bodily fluids.
- Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner.
- Ensure that anyone who has come into contact with any blood or fluids wash in warm soapy water

- Record the incident and treatment given in the accident book, indicating name, date, time, nature of injury, how it occurred, treatment given and to be signed by staff.
- Notify the parents either by phone after the incident if seen fit, or on their arrival to collect the child.

**In the case of a major accident requiring more than first aid, the first aid attendant will:**

- Assess the injury, and decide whether the child needs to be attended to by local doctor or whether an ambulance should be called, and notify the certified supervisor.
- If the child's injury is serious the first priority is to get immediate medical attention. Parents should be contacted straight away. If not possible, there should be no delay in organising proper medical treatment. Keep trying to contact the parents in the meantime.
- Attend to the injured person and apply first aid required.
- Ensure that disposable gloves are used with any contact with blood or bodily fluids.
- Stay with the child until suitable help arrives, or further treatment taken.
- Try to make the child comfortable and reassure them.
- If an ambulance is called and the child is taken to hospital a staff member will accompany the child and take the child's medical records.
- Record the incident and treatment given in the accident book, indicating name, date, time, nature of injury, how it occurred, treatment given by whom, to be signed by staff and witnessed if possible.
- Obtain parent signature confirming knowledge of the accident.

**The Nominated Supervisor or other responsible staff member will:**

- Notify the parents or emergency contact person immediately regarding what has happened and action being taken. Every effort will be made not to panic the parents.
- Ensure that all blood and bodily fluids are cleaned up in a safe manner.
- Ensure that anyone who has come in contact with any blood or bodily fluids washes in warm soapy water.
- Try to reassure the other children and keep them calm, keeping them informed about what is happening, and away from the injured child.

**Staff will adhere to the Hygiene policy in all accident situations.**

**Accidents which result in serious injury (including death) to a child, must be reported to:**

- Parents/Guardian
- Ambulance service
- Police
- Regulatory Authority (NSW Early Childhood Education and Care Directorate, using SI01 *"Notification of Serious Incident"* form)
- Clear emergency procedure should be maintained for the other children at the Centre.
- The Centre will notify the parent/guardian that a serious incident has happened and advise them to contact the relevant medical agency.
- This information should be provided in an extremely sensitive manner.

# Accounting and Financial Management

## POLICY STATEMENT

We aim to provide a quality service that meets the needs of the children by providing them with the resources they need and meet the needs of the parents by providing affordable care.

The Committee is responsible for all financial aspects and will ensure that all funding, government legislation and acts are fully followed, and that clear records of all the financial transactions are recorded and stored for the required time in a secure place.

## CONSIDERATIONS

Funding and operational agreements

Incorporation Act

Income Tax Assessment Act

Goods and Services Tax

Superannuation Act

Staff Awards

National Quality Standard Quality Area 7.3

## OBJECTIVES

- Manage income and expenses to protect the viability of the Centre.
- Provide information to the Committee to enable them to effectively manage the Centre's finances.
- Maintain cash at bank of at least \$4,000.
- Require timely payment of fees by all families, closely monitor outstanding fees and take prompt action to recover outstanding fees and limit potential bad debts.
- Pay all accounts promptly to avoid penalties.
- Fundraising will be encouraged and supported by the Committee, but will not be a part of the income required in the budget.
- Applications for all available grants and other forms of assistance will be encouraged and supported by the Committee, but will not be a part of the income required in the budget.
- Provide financial information to families, through reports provided at AGM and in response to ad hoc requests.

## BUDGETS AND FINANCIAL REPORTING

- A comprehensive budget will be prepared by the Treasurer at the beginning of each financial year, and presented to the Committee meeting for approval.
- The Treasurer will provide a report (by month) on the Centre's financial position at each Committee meeting. This information will be available to all parents.
- Reports will be provided to each Committee meeting and will comprise:
  - Balance of bank account
  - Profile and loss statement for the month
  - Report of income and expenditure (year to date)
  - Liabilities (outstanding accounts)
  - Receipts expected
- A detailed annual financial report will be prepared at the end of each financial year.

- An accurate financial report will be presented at the AGM, and provided to parents on request.
- Treasurer will be responsible for ensuring that financial transactions are recorded properly, and stored in a secure place.
- Treasurer will ensure the payment of staff on an agreed basis, according to the appropriate Award entitlements and that all tax and superannuation deductions are made.
- The Coordinator or other delegated person will be responsible for the day to day financial management of the Centre such as collection and banking of fees, and allocation of petty cash.
- Treasurer is responsible to ensure the audit takes place and that the balance sheet, income and expenditure statement and financial report are completed.
- Treasurer is responsible for ensuring that the financial report is submitted to the funding bodies within the time frame outlined in funding agreements.
- Treasurer is responsible for presenting an Audited Balance sheet and Income and Expenditure statement at the AGM. This should be undertaken by a qualified accountant who is not a member of the committee.
- All financial records will be kept for a period of 7 years and will be made available for inspection by the relevant government Department officers.
- Treasurer will ensure that all financial returns are completed and lodged on time, including Business Activity Statements, PAYG and superannuation returns.

## PROCEDURES

### *AUTHORISATION TO EXPEND FUNDS*

- All expenditure over \$1000 must be approved by the Committee.
- Committee may authorise the Coordinator to expend funds for groceries and other regular expenses. Specific monthly limits may be set for food, craft, etc.
- Committee may authorise the Treasurer to pay staff (including wages, superannuation, PAYG tax) and make BAS payments, and to pay other regular accounts such as telephone bills.
- Urgent expenditure may be approved by the Committee outside regular meetings, but must be minuted at the next scheduled meeting

### *USE OF CREDIT CARD*

- Committee may provide the Coordinator with a credit card to be used wherever possible to reduce the need for petty cash payments.
- Expenditure must be approved in advance, although the Committee may authorise expenditure to meet regular expenses (such as groceries), within a budget limit.
- An expense form is to be completed for each credit purchase, and presented to the Committee with the receipt attached.
- All credit card receipts are to be reconciled against the monthly statement, and variations queried.

### *USE OF CHEQUE BOOK*

- Two signatures are required on all cheques.
- Committee will determine who will have cheque signing authority, but normally the President, Treasurer, Secretary and Coordinator will have cheque-signing rights.

- All payments made by cheque are to be approved in advance by the Committee (subject to the above exceptions).

### *ONLINE BANKING*

- In general, cheques should be used to pay accounts, however online banking may be used to pay staff wages, and when urgent payment is required.
- The online account will require two persons to conduct transactions.
- Committee will determine who will have authority to make online banking payments, but normally the President and Treasurer will have authorisation.
- All online payments are to be approved in advance by the Committee (subject to the above exceptions).
- Clear details are to be included on all online payments to permit identification of each transaction.

### *BANKING AND HANDLING CASH*

- To reduce cash handling, parents should be encouraged to pay fees by some means other than cash.
- All cash received must be receipted immediately.
- Cash and cheques should be banked at least once per week.
- All payments received should be recorded in the Cash Book.

### *RECEIPT OF FEES*

- Parents should be encouraged not to pay by cash, but to use the means that cost the Centre least (online)
- All cash payments must be receipted immediately.
- All payments must be recorded immediately in the Cash Book.
- Fee payments must be reconciled weekly against Hubhello payment records.
- Fee payments must be reconciled monthly against bank account statements (deposits and online payments)

### *PROCESSING OF PAYMENTS*

- Receipts (or tax invoices) are to be obtained for all expenditure, wherever possible.
- An expense form must be completed for all expenditure, including credit card payments, cash payments, and invoices requiring payment.
- The expense form and receipt/invoice are to be filed in the "Accounts Paid" folder.
- Treasurer should be advised of any accounts (over \$1000) that require urgent payment or payment by cash. The Treasurer will obtain approval from the Executive, with formal approval then given by the full Committee at its next meeting.
- Details of all accounts requiring payment are to be presented to the Committee at its next meeting for approval.
- Once approved by the Committee, all expenses can be paid by the Treasurer.
- Completed expense forms (with receipt/invoice) to be filed, by month, in the "Accounts Paid" file.
- Accounts paid are to be reconciled against bank statements and cheque book each month.



# Administration of First Aid

## POLICY STATEMENT

*Annandale After School Centre* will provide and maintain a high level of care for children attending the service. The service will ensure that necessary educators will be suitably qualified in emergency first aid management and that first aid equipment and support will be available to all children, educators and visitors to the service and whilst on excursions. Ideally, all educators will undertake senior first aid, asthma management and anaphylaxis management training to ensure full and proper care of all is maintained (My Time Our Place 3).

## PROCEDURE

- The nominated supervisor is responsible for ensuring that a minimum of one educator/staff member who is currently qualified in senior first aid, asthma management and anaphylaxis management is present at the service at all times it is educating and caring for children. Evidence of the first aid training will be kept in staff files. (r136)
- The service will endeavour to have all educators holding a current first aid qualification.
- A current first aid certificate or willingness to undergo training will be advertised for all new positions.
- The service will budget for the cost of the first aid course or renewal for each educator as part of the training budget.
- An appropriate number of fully stocked and updated first aid kit, in regard to the number of children bearing educated and cared for, will be kept in the designated secure place in the service. Educators are to ensure that this is easily accessible and recognisable to all educators and volunteers and kept inaccessible to the children. (r89)
- A separate travelling first aid kit will be also maintained and taken on all excursions and outdoor activities including school pick up and drop off.
- The first aid kit will contain the minimum equipment suggested by a first aid specialist organisation i.e.; Red Cross or St John's Ambulance and a first aid manual will be kept at the service.
- A cold pack will be kept in the freezer for treatment of bruises and swelling.
- An inventory of the kits will be maintained and checked on a minimum monthly basis and signed off by the Nominated Supervisor. The checklists may be requested for sighting by management or from the NSW regulatory authority.
- An educator will be designated the duty of maintaining the kits to ensure that they are fully stocked, and that all items are within the use by date.

- At orientation, educators and volunteers will be made aware of the first aid kit/s, where they are kept and their responsibilities in relation to it.
- Qualified first aiders will only administer first aid in minor accidents or to stabilise the victim until expert assistance arrives in more serious accidents.
- Telephone numbers of emergency contacts, local doctor and poisons service will be located in an accessible location *next to the telephone*.
- In the event of an emergency, the educator administering the first aid must not leave the patient until emergency services or the parent arrives. A second educator should make all emergency calls.

**In the case of a minor accident, the first aid attendant will:**

1. Reassure the child
2. Assess the injury
3. Attend to the injured person and apply first aid as required.
4. Ensure that PPE is used with any contact with blood or bodily fluids.
5. Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner as per the INFECTIOUS DISEASE POLICY.
6. Ensure that anyone who has come in contact with any blood or fluids washes their hands thoroughly in warm soapy water. Notify the authorised nominee either by phone after the incident if seen fit or on their arrival to collect the child
7. Record the incident and treatment on an INCIDENT, INJURY, ILLNESS AND TRAUMA form:(r87)
  - Name and age of child
  - Date, time, and location of incident
  - Description of injury and circumstances of how it occurred, including witnesses.
  - Treatment given and name and signature of first aid attendant
  - Details of any medical personnel contacted.
  - Name and details of any parent or emergency contact notified or attempted to notify.
  - Time and date of report and name and signature of a person making report
  - Name and signature of nominated supervisor
8. Notify the authorised nominee either by phone after the incident if seen fit or on their arrival to collect the child

9. Authorised nominee signature confirming knowledge of the Incident, Illness, Injury and trauma report form will be gained at the soonest possible convenience. Notify the authorised nominee either by phone after the incident if seen fit or on their arrival to collect the child.

- Where the service has had to administer first aid and the incident is deemed serious as per Regulation 12, the Nominated Supervisor will ensure that the steps outlined in the “Management of Incident, Injury, Illness and Trauma” policy are followed and the Regulatory Authority is notified within 24 hours of either the incident or them becoming aware of the incident.

CONSIDERATIONS:

Education and Care Services National Law & Regulations	National Quality Standards & Elements	Links to other Service Policies	Other Documentation/Evidence
S167, 174  R85, 86, 87, 89, 136	Standards 2.1 and 2.2  Elements 2.1.2 and 2.2.2	<ul style="list-style-type: none"> <li>• Medical Conditions</li> <li>• Administration of Medication</li> <li>• Providing a Child Safe Environment Policy</li> <li>• Excursion Policy</li> <li>• Management of Incident, Injury and trauma Policy</li> </ul>	<ul style="list-style-type: none"> <li>• Parent Handbook</li> <li>• Staff Handbook</li> <li>• My Time, Our Place Framework</li> <li>• Incident, Illness, Injury and trauma report</li> <li>• Risk Assessments</li> </ul>



# Administration and Management

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# Allergies

## POLICY STATEMENT

We aim to provide safe and effective care of children by ensuring that staff are fully aware of reactions to, and management of, any child's allergies.

## PROCEDURE

- Parents will be asked to inform the Centre of any allergies the child may have at the time of enrolment.
- This information will be recorded on the child's enrolment form.
- Where a child has an allergy, the parents will be asked to supply a letter from their doctor explaining the effects if the child is exposed to whatever they are allergic to and to explain ways the staff can help the child if they do become exposed.
- If a food allergy exists, parents will be asked to supply any particular diet if required.
- All food allergies will be placed on a notice near the kitchen area to remind staff. A list of what they cannot eat along with alternatives will be recorded.
- All staff are to make themselves aware of this list.
- All relief staff will be informed of the list on initial employment.
- At least one staff member on duty will be trained on how to use an Epi-pen.
- Where it is necessary for other children to consume the particular food allergen (e.g., milk or other dairy foods) the child with the food allergy will be seated separately during meal times and all children will wash their hands before and after eating.

# Anaphylaxis

## POLICY STATEMENT

We aim to provide a safe and healthy environment in which children identified at risk of anaphylaxis can participate equally in all aspects of the children's program and experiences.

Staff will be aware of any child/children within the service who are at risk of this severe allergy, and will be equipped with the training and resources to manage and minimise the risk of an anaphylactic reaction occurring.

## CONSIDERATIONS

National Quality Standard Quality Area 2.1  
'Anaphylaxis' Development Factsheet, Network of Community Activities

## PROCEDURE

- Parents will be asked to inform the Centre if their child is at risk of an anaphylactic reaction.
- This information will be recorded on the child's enrolment form.
- Where a child is at risk of a severe anaphylactic reaction, parents will supply the centre with an anaphylaxis action plan for that child including:
  - Clear identification of the child (including child's photo)
  - Documentation of the allergic triggers
  - Documentation of the first aid response including prescribed medication
  - Identification and contact details of the doctor who has signed the action plan
- **The most common allergens affecting the children at this centre are: Tree nuts (e.g. cashews, peanuts, almonds, walnuts and pecan) Sesame, Wheat, Eggs, Dairy, Cow's milk, Soy, Whey, Fish and Shellfish, Kiwi, Banana, Strawberry, Avocado, Pineapple and certain insect Stings (particularly bee stings).**
- The anaphylaxis action plan will be reviewed regularly, and the information kept up to date. Families will inform the centre if there are any changes to the child's condition or to the action plan.
- All anaphylaxis action plans will be displayed in the best possible location in the centre.
- All staff will be aware of any child at risk of severe allergy within the service, and the associated allergen.
- All relief staff and volunteers will be informed of any anaphylaxis action plans upon initial employment.
- At least one staff member on duty will be trained on how to use an Epi-pen. Additionally, staff will receive regular refresher training in regard to anaphylaxis policy and procedures.
- All staff will be aware of the need to treat children's allergy information sensitively and confidentially.
- **The child's medication will be kept either in the aftercare office in the medical pouch or in their bag outside on the verandah in an allocated locker with their name clearly displayed.**

- **The medical management plan of each child will be reviewed with the parents when required by the child's medical practitioner.**
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# Animals

## POLICY STATEMENT

Although animals are not a necessary part of the program, we believe that animals can be a valuable source of learning and enjoyment for the children. Any animals that enter the centre must be safe and present no danger to the children in any way. Staff will ensure that everyone in the centre will treat with respect and in a humane way all animals, at all times. Strict supervision will be maintained.

## CONSIDERATIONS

### Animal Rights

## PROCEDURE

- The decision to keep a pet or have an animal visit the centre on a regular basis will be made by the Co-ordinator, based on an observed need or value to the children.
- The Co-ordinator must discuss this in their report at a management meeting and have approval of the management prior to any animal being able to enter the centre.
- Any animal or bird will only be considered with the clear understanding of them being safe and suitable with children, and an assurance that the animal will be properly cared for.
- No animal, bird or livestock will be allowed in the program area which is likely to be a source of infection or which in any way may be detrimental to the wellbeing of the children.
- Checks need to be made regarding individual children's allergies before considering an animal in the centre.
- All animals, which are kept in the centre, shall be maintained in a clean and healthy condition.
- All hygiene procedures will be followed regarding cleaning and disposal of waste.
- All animals will be located away from any food or food preparation areas.
- Everyone in the centre will treat with respect and in a humane way all animals, at all times.
- A staff member will be designated the duty of ensuring that the animal is appropriately fed and looked after. Alternately a roster of staff and children can be made to fulfil this duty.
- Appropriate food and water will be maintained and kept topped up at all times.
- Appropriate arrangements shall be made to ensure the animal is appropriately cared for over weekend and holiday breaks.
- Children will be educated on an ongoing basis on how to properly care for and handle animals.
- Children will be reminded about the hygiene practices required after handling any animal and staff will ensure that this is maintained.
- Supervision is to be maintained at all times.

# ASTHMA POLICY

## Policy Statement

We aim to ensure the following:

The Annandale After School Centre service integrates best asthma management strategies within its environment.

All children enrolled at the service who are diagnosed with asthma receive the appropriate management.

Staff respond appropriately to the care of children diagnosed with asthma during an asthma attack

Staff respond appropriately to the care of children who are experiencing difficulty breathing which may be their first asthma attack.

## Background

The prevalence of Asthma in children living in Australia is high with an estimated 1 in 10 children currently affected. Asthma is a serious life threatening condition and when symptoms occur, they need to be managed immediately. Children not previously diagnosed with asthma may have their first attack whilst attending the service. It is therefore important that the OSHC service takes responsibility for ensuring that appropriate asthma management strategies are implemented within the OSHC environment. This includes supporting OSHC staff in their duty of care to ensure that they have the current skills and knowledge to manage asthma effectively within the service, minimise its impact, and promote best practice asthma management strategies to parents.

## Relevant documents and legislation

Asthma Aware Out Of School Hours Guidelines 2013

Education and Care Services National Law 2010

Education and Care Services National Regulations 2011

National Quality Standards;

Quality Area 2, Children's Health and Safety

Quality Area 7, Leadership and Service Management.

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations.

Guide to the National Quality Standards.

Staying Healthy 5th Edition 2012, National Health and Medical Research Council.

Network of Community Activities policies and procedures;

Dealing with Medical Conditions and Administration of Medication

Management of incident, Injury, Illness and Trauma.

## Our Commitment

Asthma management is a shared responsibility. The key groups listed below within Annandale After School Centre support the following undertakings:

## OSHC Service Implementation

- Staff and management will work collaboratively to promote an asthma aware environment.
- Staff including new and casual will be familiar with the service asthma policy.
- Staff who are responsible for administering asthma medication and / or asthma first aid to a child attending the service will be required to participate in ACECQA approved Emergency Asthma Management Training, every 3 years.
- A minimum of one staff member who has participated in ACECQA approved Emergency Asthma Management Training is to be on duty at all times.
- Service Coordinators will facilitate opportunities for new and casual staff to receive feedback regarding important procedures in place for managing asthma within the OSHC environment, in particular the implementation of Nationally Recognised Asthma First Aid.
- Following notification of a child with a diagnosis of asthma, or previously treated with asthma medications, staff will ensure that the parents.
- **All children who carry their own medication in their bag are provided with their own locker clearly labelled with their name**
- **Where the parents choose to have their child's medication kept in the office the child will be allocated a pocket in a medical bag with their name clearly labelled.**
- **The medical management plan of each child will be reviewed with the parents when required by the child's medical practitioner.**

- Complete the Children's Service Asthma First Aid Record which includes parental permission for the child to self-administer asthma medication.

- Provide their child's individual asthma management / medical management plan in accordance with ACECQA's Medical Conditions Policy and Administration of Medical requirements.

NB. If a child is unwell and / or requires medication for a limited period of time documentation in accordance with ACECQA's Medical Conditions Policy and Administration of Medical requirements will be required.

- A list of children with a diagnosis of asthma, together with copies of the child's asthma first aid documentation, will be compiled and be visible to staff only. This information will be taken on all offsite excursions.
- Staff will ensure that the child's asthma medication is in its original container, clearly labelled with the name of the child, medication dose, frequency, route of administration, and expiry date.
- Staff will be aware of those children with asthma and encourage those permitted to self-administer to carry their reliever medication and delivery device with them at all times. Staff will know where to access reliever medication and delivery device if immediate access is required.

- A record of asthma "first aid treatment / medication given will be maintained via the Child Asthma First Aid Treatment Record or alternatively according to ACECQA regulation requirements for Medication Records. Parents will be notified if treatment has been provided.
- Make available asthma "first aid kits including for off-site excursions.
- Will display a nationally recognised asthma "first aid plan within a prominent location in the service.
- Identify and, where practical, minimise exposure to asthma triggers.
- Staff will obtain relevant information in regards to a child who also has identified allergies or is at risk of having a severe allergic reaction (anaphylaxis)
- Ensure all parents are aware of the Education and Care Services Regulation. No 94- Exception to authorisation requirement – anaphylaxis or asthma emergency.

### **Parents of children enrolled at the service responsibilities**

Inform staff, either on enrolment or on initial diagnosis if their child has a history / diagnosis of asthma.

Provide all relevant information regarding their child's asthma management through completion of the Children's Services Asthma First Aid Record (including permission for self-administration) or their child's individual asthma management /medical management plan.

Notify the service of any changes to their child's asthma management, and update this information on their child's relevant service documents.

Provide the service with an adequate supply of the child's appropriate medication (reliever) in original container, including the spacer device, both clearly labelled with the child's name, medication dose, frequency, route of administration, and medication expiry date.

Will ensure that they replace their child's reliever medication prior to the expiry date.

Will notify the service of known asthma triggers including minimisation strategies.

Will notify the service if their child also has identified allergies or is at risk of having a severe allergic reaction (anaphylaxis).

### **Children will:**

Where practical, be encouraged to carry their asthma reliever medication and spacer device and use this medication as soon as their symptoms develop.

Be encouraged to report to staff if they are experiencing asthma symptoms / difficulty in breathing, and / or if they have self-medicated.

### **Asthma First Aid**

An asthma first aid kits within the service will include the following:

- A reliever metered dose inhaler (Salbutamol) e.g. Ventolin, Asmol, Airomir that is in date and fits the accompanying spacer device
- A spacer device (e.g. La Petite Spacer, LiteAire Spacer)
- Instructions on how to use the spacer device
- Instructions on how to implement nationally recognised asthma first aid.

It is recommended that there is a minimum of 2 asthma first aid kits:

- One for use in the OSHC service.
- One to be taken on all off site excursions.
- The Asthma First Aid Kits should:
- be checked regularly for availability of correct contents and expiry dates of reliever medication.
- be stored in an accessible location with all staff being aware of this location.
- contain a spare unused spacer device to immediately replace the one that has been used.

The Nationally Recognised Asthma First Aid poster will be located in the centre.

## Responding to an Attack

- In the event of a child experiencing an asthma attack or difficulty breathing staff will follow :

The child's completed Children's Services Asthma First Aid Record or the child's individual Asthma Management /Medical Management Plan for children diagnosed with asthma

OR

Nationally Recognised Asthma First Aid for children not previously diagnosed with asthma, or in the event that the child's asthma management plan is unavailable at the time of an attack, (Note: individual asthma management plan is to be implemented once sourced)

### **\*Nationally Recognised Asthma First Aid Plan**

**Step 1.** Sit the child upright, remain calm and provide reassurance. Do not leave the child alone.

**Step 2.** Give 4 puffs of a blue/grey reliever puffer (Salbutamol e.g. Ventolin, Asmol, Airomir), one puff at a time, using a spacer if available (including a mask if required). Instruct the child to take 4 breaths from the spacer after each puff.

**Step 3.** Wait 4 minutes. If the child still cannot breathe normally give another 4 puffs of blue/grey reliever puffer

**Step 4.** If the child still cannot breathe normally, call an ambulance immediately (Dial 000) and continue giving 4 puffs of blue/grey reliever puffer every 4 minutes until the ambulance arrives

**Not sure if it's Asthma? CALL AN AMBULANCE IMMEDIATELY (DIAL 000)**

If the child stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

\* Adapted from Kids' First Aid for Asthma – National Asthma Council Australia. 2011.

Staff will call for an ambulance :

- If a child is experiencing a severe attack
- If a child not previously diagnosed with asthma is experiencing difficulty breathing.
- If a child is not improving as per the instructions in the Nationally Recognised Asthma First Aid Plan
- In accordance with the child's individual asthma management plan
- If staff have concerns or doubts.

All asthma treatment including asthma first aid to be recorded on the Asthma First Aid Treatment Record Card and filed with the services incident reports.

All parent/carers are to be notified of asthma first aid administration as soon as practicable.

## **Further Resources and Support**

**Network of Community of Activities** [www.networkofcommunityactivities.org.au](http://www.networkofcommunityactivities.org.au)  
Phone 02 9212 3244

Provides downloadable OSHC asthma management guidelines and asthma resources. Including a list of ACECQA approved emergency asthma management training facilitated through Network.

## **Sydney Children's Hospitals Network Sydney Children's Hospital Randwick NSW**

*Aiming For Asthma Improvement in Children Program*

Health Professional support and consultancy by experienced Asthma Nurse Consultants, regarding the implementation of Asthma Management Best Practice Procedures for Out of School Hours Care (OSHC).

Providers of ACECQA approved emergency asthma management training. Phone 02 9113 3396 or 0410 489 995  
Phone 02 9382 8376 or 0411 446 239  
Website: <http://www.seslhd.health.nsw.gov.au/AAIC/>

### **The Children's Hospital at Westmead NSW**

Respiratory Department

Providers of ACECQA approved asthma emergency management training. Support and consultancy regarding the implementation of the Best Practice Asthma Management Procedures for Out of School Hours Care (OSHC) Phone 02 9845 2293

Website: <http://www.chw.edu.au/site/directory/entries/asthma.htm>

### **Children's Asthma Resource Pack for Parents /Carers**

[http://www.chw.edu.au/parents/factsheets/pdf/childrens\\_asthma\\_information\\_pack.pdf](http://www.chw.edu.au/parents/factsheets/pdf/childrens_asthma_information_pack.pdf)

A resource pack for parents, developed in collaboration with The Sydney Children's Hospitals Network - Randwick and Westmead and Kaleidoscope- John Hunter Hospital,

### **Consumer Organisations:**

**National Asthma Council Australia (NAC):** [www.nationalasthma.org.au](http://www.nationalasthma.org.au)  
1800 032 495

**Kids with Asthma:** [www.kidswithasthma.com.au](http://www.kidswithasthma.com.au)

- Interactive child friendly website developed by NAC, which includes children's games and printable resources.

**Asthma Australia:** [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au) 1800 645 130

- Provides asthma information and resources with links to State Asthma Foundations.
- Asthma Information available in languages other than English:

### **NSW Health Multicultural Health Communication Service:**

[www.mhcs.health.nsw.gov.au/mhcs/topics/Asthma.html](http://www.mhcs.health.nsw.gov.au/mhcs/topics/Asthma.html)

- Parents and Carers Information Pack available in Chinese and Arabic

**Asthma Foundation of Victoria:** <http://www.asthma.org.au>

- Asthma information in Indonesian, Italian, Greek, Vietnamese, Chinese, Arabic, & Turkish.

**Health Translation Directory:** [www.healthtranslation.vic.gov.au](http://www.healthtranslation.vic.gov.au)

- Multilingual health resources that can be searched by topic.

### **References:**

National Health & Medical Research Council "Australian Guidelines for the Prevention and Control of Infection in Healthcare 2010".

Asthma Australia: [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au)

Kindergarten Union Children's Services. Policies and Procedures Asthma Management. 2012

National Asthma Council Australia: [www.nationalasthma.org.au](http://www.nationalasthma.org.au)

Policy endorsed 2<sup>nd</sup> November 2021

Evaluation and review due 2<sup>nd</sup> May 2023

National Asthma Council Australia (2006) Asthma Management Handbook

National Asthma Council Australia (2011) Kids First Aid for Asthma

The Children's Asthma Resource Pack for Parents and Carers, June 2010.

Sydney Children's Hospitals Network – Randwick and Westmead, & Kaleidoscope  
Hunter Children's Health Network.



# Behaviour Guidance

## **POLICY STATEMENT:**

*Annandale After School Centre Inc* believes that children have the right to feel physically and psychologically safe. We aim to provide an environment where all children and educators feel safe, cared for and relaxed and which encourages cooperation and positive interactions between all persons (My Time, Our Place Outcome 1).

This behaviour management policy is based on guidance, redirection and positive reinforcement. Educators will aim to guide rather than control the behaviour of the children in our care.

Basic rules will be established based on safety, respect for others, order and cleanliness and will be communicated to all families, children and educators along with consequences for inappropriate behaviour. The service recognises the importance of children's input into developing the basic rules and helping to determine appropriate consequences for inappropriate behaviour (My Time, Our Place Outcome 2). Our service promotes a positive approach to managing the behaviour of all children. Children will be encouraged to resolve problems, defeats and frustrations where appropriate. This can be achieved by exploring possible solutions, and helping children understand and deal with their emotions. This will depend on the child's age and level of development (My Time, Our Place Outcome 3).

The service will ensure no child being cared and educated for by the service is subjected to any form of corporal punishment or any discipline that is unreasonable in the circumstances.

The service will ensure that every reasonable precaution is taken to protect children being cared for or educated by the service from harm and any hazard likely to cause injury.

## **PROCEDURES:**

### **a) Guidelines**

- Educators will ensure that expectations relating to children's behaviour are clear and consequences for inappropriate behaviour are consistently applied.
- Educators will act as a positive role model for acceptable behaviour and encourage and reward acceptable behaviour.
- Educators will have access to training and support in positive approaches to behaviour management. This will be made available as part of the training

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budget.

- Whilst at the service, we expect that the children will comply with the following basic rules:
  - ✓ Respect each other
  - ✓ Respect other people's property and that of the service
  - ✓ Share with other children and be inclusive<sup>[SEP]</sup>
  - ✓ Accept and respect individual needs and differences
  - ✓ Clean up after activities
  - ✓ Be polite to educators and to each other
  - ✓ Follow the instructions from educators
  - ✓ Play only in the allocated areas and as directed by educators and not enter areas that educators have designated as “out of bounds”
  - ✓ Remain in the supervised area of the program until the authorised person collecting them has signed them out
  - ✓ Not participate in physical fighting (play or real), for example, spitting, throwing toys, stones or dangerous objects.
  - ✓ Not bully or engage in any form of aggressive behaviour
  - ✓ Use appropriate language at all times.

**b) Guiding Children’s Behaviour:**

- Steps that educators take towards establishing good behaviour management include:
  - ✓ Establishing positive relationships, which are the foundation for building children’s self-respect, self- worth and feelings of security
  - ✓ Observing children to identify triggers for challenging behaviours. Paying attention to the child’s developmental level and any program issues that may be impacting on the behaviour
  - ✓ Using positive approaches to behaviour guidance. Some of these include positive acknowledgement, redirection, giving explanations, encouragement, giving help, collaborating to solve problems and helping children to understand the consequences and impact of their behaviour
  - ✓ Supporting children by providing acceptable alternative behaviours when challenging behaviour occurs
  - ✓ Ensuring limits are consistent, carried out in a calm, firm manner, followed through and that children are helped to behave within the limits

- ✓ Involving the family and the child in appropriate ways in addressing challenging behaviour
- ✓ Using other professionals when necessary to help with behaviour guidance, for example, the Inclusion Support Facilitator (ISF)
- ✓ Identifying children's strengths and building on them
- ✓ Seeking support from other educators and management.

**c) Correction Steps:**

- When a child's behaviour is deemed inappropriate to either him/herself or others, or if a child's behaviour is intrusive to another person's enjoyment, then educators will actively intervene and take steps to attempt to resolve the situation.
- Inappropriate behaviour can include bullying, being uncooperative, not listening to reasonable requests from educators, or consistently disregarding the basic rules. In these instances, the following steps will be taken:
  - ✓ The educator will explain to the child that this type of behaviour is inappropriate.
  - ✓ The educator will re-direct the child to a different activity within the room (or outdoors).
  - ✓ If aggressive or inappropriate behaviour continues, the child will sit away from the group to calm down and think about their actions. After a short period of time, the educator will have a discussion with the child with respect to their actions, and then the child will return to play.
  - ✓ A discussion will be held with the child's family when the child is collected.

**d) Persistent inappropriate behaviour:**

- If inappropriate behaviour continues over a period of time, a meeting between educators, nominated supervisor, child and family will be arranged. The meeting agenda will cover:
  - ✓ Alternative approaches to behaviour guidance<sup>[SEP]</sup>
  - ✓ The child's life outside the service<sup>[SEP]</sup>
  - ✓ Any problems that may be causing the behaviour
- A mutual strategy for improving behaviour will be discussed and closely monitored by educators, the nominated supervisor and the child's family. Should it be necessary, and with the consent of the family, advice and assistance will be sought from relevant external specialists to address the matter.
- In extreme cases, to protect other children and educators, the service reserves the right to exclude the child from the service; this may be a temporary or

permanent measure. Exclusion will only be considered after:

- ✓ The child's family has been notified and given the opportunity to discuss their child's behaviour
- ✓ Educators, Nominated Supervisor and Approved Provider, have given careful consideration to the problem.
  
- ✓ Adequate support and counselling is sought (if necessary)
- ✓ Clear procedures have been established for accepting the child back into the service.

### **CONSIDERATIONS:**

<b>Education and Care Services National Regulations</b>	<b>National Quality Standard</b>	<b>Other Service policies/documentation</b>	<b>Other</b>
r73, 74, 76, 155, 156, 157,168.	1.2, 2.3, 3.1, 3.2, 5.1, 5.2, 6.1, 6.3	<ul style="list-style-type: none"><li>- Confidentiality</li><li>- Enrolment &amp; Orientation</li><li>- Providing a Child Safe Environment</li><li>- Interactions with Children</li><li>- Management of Incident, Injury and Trauma</li><li>- Child Protection</li></ul>	<ul style="list-style-type: none"><li>- Children (Education and Care Services National Law Application) Act 2010</li><li>- UN Convention on the Rights of the Child</li><li>- My Time, Our Place.</li></ul>

### **ENDORSEMENT BY THE SERVICE:**

Policy endorsed 2<sup>nd</sup> November 2021  
2023

Evaluation and review due 2<sup>nd</sup> May

**Approval date:**

—

**Date for review:**

—

Policy endorsed 2<sup>nd</sup> November 2021  
2023

Evaluation and review due 2<sup>nd</sup> May

# Bookings and Absence

## POLICY STATEMENT

We aim to provide an efficient and flexible booking system.

## CONSIDERATIONS

National Quality Standard Quality Area 7.3

## PROCEDURE

- Parents are invited to nominate their booking requirements on the enrolment form, indicating whether they require a permanent or casual booking, and which day/s they require.
- The Centre accepts permanent bookings for 1 to 5 sessions per week.
- Minor variations in permanent bookings will not be accepted, except under special circumstances.
- The Coordinator must be informed EACH DAY a child is to attend on a casual basis.
- Casual bookings may be made in advance, or by phone up to 3pm on the day of attendance.
- Casual bookings must be paid for on the day of attendance.
- There will be no charge for casual bookings that are cancelled prior to the day of attendance.
- Casual bookings not cancelled (when the child does not attend), or cancelled on the day of attendance must be paid for.
- Children who arrive at the Centre without a booking will be charged an emergency fee that is payable on the day.

## CHILD PROTECTION INFORMATION FOR STAFF

The safety and wellbeing of children is one of the primary responsibilities of all childcare services.

Annandale After School Centre's Child Protection Policy that states:

*We believe that the welfare of all children is of paramount importance and that the centre has an obligation to defend the child's right to care and protection. Staff and management have a responsibility to take action to protect children they suspect may be abused or neglected.*

As a childcare worker, you are a "mandatory reporter", and you are required by law to report to the Department of Communities and Justice if you suspect that a child is at risk of harm.

This folder contains information about:

- Obligations of a mandatory reporter
- What is risk of harm?
- Signs of possible abuse
- When you must make a report
- How to go about making a report (including a report checklist)
- What happens after you make a report

ALL STAFF ARE EXPECTED TO:

- READ THE MATERIAL IN THIS FOLDER
- READ THE CENTRE'S *CHILD PROTECTION POLICY*
- BE AWARE OF THEIR RESPONSIBILITIES IN RELATION TO CHILD PROTECTION

# Child Protection

## POLICY STATEMENT

We believe it is every child's right to be safe and protected from all forms of abuse, violence or exploitation. It is the legal and moral obligation of all adults who work in our Centre to ensure the safety and wellbeing of all children in our care. All staff, including casual staff, volunteers and students have a duty of care to ensure the safety and protection to all children who use the Centre.

The safety and welfare of all children is of paramount importance. Staff and management have a legal responsibility, as Mandatory Reporters, to take action to protect and support children they suspect may be at significant risk of harm.

We will carry out the responsibilities of Mandatory Reporters as indicated under legislation. This responsibility involves following the procedures as outlined by Community Services and the NSW Commission for Children and Young People.

## CONSIDERATIONS

NSW Children and Young Person's (Care and Protection) Act 1998

Commission for Children and Young People Act 1998

Child Protection (Prohibited Employment) Act 1998

Office of the Children's Guardian

NSW Department of Community Services Mandatory Reporting Guidelines

NSW Child Protection Interagency Guidelines (2006)

Legislation Amendment (Wood Inquiry Recommendations) Act 2009 No 13

Keep Them Safe – Information session/ overview participants manual 2009/ 2010

National Quality Standard Quality Area 2

## PROCEDURES

### Mandatory Reporting

- A Mandatory Reporter is anybody who delivers services to children as part of their paid or professional work.
- In OOSH services mandatory reporters are:
  - Staff that deliver services to children
  - Management, either paid or voluntary, whose duties include direct responsibility or direct supervision for the provision of these services.
- Staff are mandated to report to Community Services if they have current concerns about the safety or welfare of a child relating to section 23 of the NSW Children and Young Persons (Care and Protection) Act 1998

#### Section 23 (1)

##### a-b) Child is at significant risk of harm – Neglect

- basic physical or psychological needs not being met or are at risk of not being met
- parents/ carers unwilling or unable to provide necessary medical care
- parents/ carers unwilling or unable to arrange for the child or young person to receive an education

##### c) Child is at significant risk of harm – Physical / Sexual abuse

##### d) Child is at significant risk of harm – Domestic violence

##### e) Child is at significant risk of harm – Serious Psychological harm



f) Child is at significant risk of harm – Prenatal report

- Staff will undergo training in relation to child protection and reporting as part of the training budget.
- Any member of staff that forms a belief based on reasonable grounds that a child is at risk of harm should ensure they record the details of the report in a clear objective format.
- Reports should be treated with strict confidentiality in adherence to the Centre's Confidentiality Policy and Procedures.
- Any staff who forms a belief based on reasonable grounds that a child is at risk of harm should discuss their concerns with their Co-ordinator who may have information the staff member is not aware of. The Co-ordinator will then assist staff in running the online Mandatory Reporters Guidelines tool (see point below for more information) to determine whether the report meets the threshold for **significant** risk of harm.
- If directed by MRG to report to Community Services, staff should report their concerns to the Child Protection Helpline:
  - Mandatory Reporters phone 13 36 27
  - Non-Mandatory reporters phone 132 111
- When reporting to the Helpline it is important to have as much information as possible available. This might include child's information, family information, reporter details and outcomes of the MRG.
- If the Co-ordinator has been advised to, but has not reported to Community Services, the staff member is legally responsible to do so.
- Once a report is made to the CS Helpline no further report needs to be made unless new information comes to hand.
- **Mandatory Reporting Guidance tool**
  - A Mandatory Reporting Guidance tool has been developed to help frontline mandatory reporters, including OOSH workers determine whether the risk to a child or young person meets the new statutory threshold of 'risk of significant harm'. The MRG will guide reporter on what action should be taken. The MRG is an interactive tool and is available online at <https://reporter.childstory.nsw.gov.au/s/>
  - If still in doubt the Community Services Helpline will provide feedback about whether or not the report meets the new threshold for statutory intervention.
  - If new information presents concerning the child, the MRG tool should be run again.
  - Where concerns do not meet the significant harm threshold, the MRG tool may guide staff to 'Document and continue the relationship'. This requires the Centre to continue to support, provide services, and coordinate assistance and referral for the child and their family.

- The report page from the MRG should be printed and placed in the child/family file for future reference regardless of whether or not further action is recommended.
- For assistance with referral information.  
Human Services Network [www.hsnet.nsw.gov.au](http://www.hsnet.nsw.gov.au)  
Family Services NSW [www.familyservices.nsw.asn.au](http://www.familyservices.nsw.asn.au)

#### Information exchange

In order to provide effective support and referral it may be necessary to exchange information with other prescribed bodies including government agencies or non-government organisations and services.

- The NSW Children and Young Persons (Care and Protection) Act 1998 has been amended (2009) to include chapter 16A Information Exchange
- Chapter 16A requires prescribed bodies to take reasonable steps to coordinate decision making and the delivery of services regarding children and young people
- Under Chapter 16 A NSW Children and Young Persons (Care and Protection) Act 1998, Staff will exchange information that relates to a child or young persons safety, welfare or wellbeing, whether or not the child or young person is known to Community Services and whether or not the child or young person consents to the information exchange.
- The information requested or provided **must** relate to the safety, welfare or wellbeing of the child. Information includes:
  - A child or young persons history or circumstances
  - A parent or other family member, significant or relevant relationship
  - The agency's work now and in the past
- Where information is provided in good faith and according to legal provisions, under section 29 & section 245G NSW Children and Young Persons (Care and Protection) Act 1998; reporters cannot be seen as breaching professional etiquette or ethics or as a breach of professional standards. There can be no liability for court action.
- **Where a complaint is made about a staff member, or someone in the Centre**
  - Should an incident occur where a child needs to be questioned regarding an allegation made about a staff member, volunteer or person visiting the centre, the child's Parents/Carers will be contacted immediately and asked to come to the centre. If the Parents/Carers are unable to attend the centre then the staff must seek permission from them for the child to be questioned. Parents/Carers will be provided with the content of the interview and also informed of who will be present. A transcript of the interview will be taken and will be shared with the parents/carers. Copies of the transcript will also be shared on a strictly confidential basis with the President and Public Officer of the parent committee. Copies of the transcript will then be placed into an envelope marked confidential and put into the child's and staff members file. If the outcome of the interview deems that the incident was no longer of concern it does not need to be reported to the Office of the Children's Guardian.
  - Should an incident occur that involves a child being put at risk of harm from a member of staff, volunteer, trainee or person visiting the Centre, this is regarded as

**'reportable conduct'** and necessitates such conduct being reported to the Office of the Children's Guardians **within 7 business days**.

[www.kidsguardian.nsw.gov.au/](http://www.kidsguardian.nsw.gov.au/) Telephone: (02) 82193800

- Where the allegation is made to a staff member or member of management the facts as stated will be recorded in writing, using an Incident Report template that includes dates, times, names of person/s involved, name of person making allegation and the person making the report. This report should be kept on record and treated as strictly confidential.
- If the Co-ordinator or person in charge is suspected then the chairperson on the Management Committee should be informed.
- The relevant forms together with information and assistance are available on line at [www.kidsguardian.nsw.gov.au](http://www.kidsguardian.nsw.gov.au)
- The person making the report should follow the advice of the Office of the Children's Guardians.
- Management will also follow this advice.
- The matter will be treated with strict confidentiality.
- For the protection of both the children and the staff member involved, the staff member should be encouraged to take special leave or removed from duties involving direct care and contact with children, until the situation is resolved.
- Support should be provided to all involved. This support can be given in the form of counselling or referral to an appropriate agency.
- **Recruitment of staff**
  - All staff employed by the service including management, full time/ part time carers, volunteers and students will be subject to a Working with Children Check carried out by the **Office of the Children's Guardian**. Written approval from the prospective employee will be sought prior to this check being carried out.
- **Engagement of self-employed contractors**
  - When the Centre engages a self-employed individual to provide services, the provider is required to provide a **Certificate for Self Employed People**. This certificate ensures verification that the person employed is not banned by law from working with children. These certificates are issued through the **Office of the Children's Guardian**. Application form and instructions are available on [www.kids.nsw.gov.au](http://www.kids.nsw.gov.au)

#### **For further information**

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

Keep Them Safe [www.keepthemsafe.nsw.gov.au](http://www.keepthemsafe.nsw.gov.au)

Human Services Network [www.hsnet.nsw.gov.au](http://www.hsnet.nsw.gov.au)

Office of the Children's Guardians [www.kidsguardian.nsw.gov.au](http://www.kidsguardian.nsw.gov.au)

Community Services [www.community.nsw.gov.au](http://www.community.nsw.gov.au)

NSW Commission for Children and Young People [www.kids.nsw.gov.au](http://www.kids.nsw.gov.au)

Child Protection Helpline 13 36 27

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# Complaints Procedures

## POLICY STATEMENT

Annandale After School Centre believe that parents have an important role in the Centre and we value their comments. We aim to ensure that parents feel free to communicate any concerns they have in relation to the Centre, staff, management, programs or policies without fearing negative consequences. And that they are made fully aware of the procedures to do this. Our priority is to do everything possible to improve the quality of our service.

## CONSIDERATIONS

Community Services Complaints, Appeals and Monitoring Act, 1994

National Quality Standard Quality Area 7.3

Regulation 168(2)(o)

## PROCEDURE

- We will support parents' right to complain and will help them to make their complaints clear, and try to resolve them.
- A complaint can be informal or formal. It can be anything which a parent thinks is unfair or which makes them unhappy with the service.
- Every parent will be provided with clear written guidelines detailing the grievance procedure, in the parent handbook.
- The name and telephone number of the person to whom complaints are directed to, is displayed visibly when entering the service (r173) on the notice board above the sign in/out table.
- All confidential conversations with parents will take place in a quiet place away from children, other parents or staff not involved.
- If a parent has a complaint or comment about the service, they will be encouraged to talk to the Coordinator who will arrange a time to discuss their concern and come to a resolution to address the issue.
- If the complaint is not handled to the parent's satisfaction at this level they should discuss the issue with the President or liaison person of the Management, either in writing or verbally.
- The Management will discuss the issue with the Coordinator and develop a strategy for resolving the problem. This would be discussed further with the parent or if necessary a meeting will be organised with the Coordinator and parent to resolve the problem.
- The parent's complaint is to be recorded and dated indicating the issue of concern and how it was resolved.
- The Coordinator or Management will inform the parent of what has been decided regarding the issue. Staff will also be informed of any relevant issues that they need to address or be aware of.
- This could be done verbally or if the issue has been dealt with on a more formal basis then the Management or Coordinator will write personally to the parent.
- If any complaint cannot be resolved internally to the parent's satisfaction, external options will be offered such as an unbiased third party.
- All complaints that come about as a result of a serious incident or alleged serious incident occurring, will be notified to the Regulatory Authority within 24 hours as per regulations.

Policy endorsed 2<sup>nd</sup> November 2021

Evaluation and review due 2<sup>nd</sup> May 2023

# CONFIDENTIALITY

## POLICY STATEMENT

*Annandale After School Centre* will make every effort to protect the privacy and confidentiality of all individuals associated with the service by ensuring that all records and information about individual children, families, educators, staff and management are kept in a safe and secure place and is not divulged or communicated, directly or indirectly, to another person other than:

- To the extent necessary for the education and care of the child
- To the extent necessary for medical treatment of the child
- Family/Guardian of the child to whom the information relates
- The Regulatory Authority or an authorised officer as expressly authorised, permitted or required under the Education and Care Services National Law and Regulations
- With the written consent of the person who provided the information. (r181)

## PROCEDURES

### A. Collection of personal information

- Before collecting personal information, the service will inform individuals of the following:
  - The purpose for collecting the information;
  - What types of information will be disclosed to the public or other organisations;
  - When disclosure will happen;
  - Why disclosure needs to occur;
  - How information is stored;
  - The strategies used to keep information secure;
  - Who has access to the information;
  - The right of the individual to view their personal information
  - The length of time information needs to be retained; and
  - How information will be disposed of.
- All information regarding the children and their families attending the service is to be used solely for the purposes of providing childcare and meeting the administration requirements of operating the service.
- All information regarding any child/family enrolled in the service will only be accessible to authorised persons. The Approved Provider and the Nominated Supervisor will determine who is authorised to access records.

**B. Retention and Storage of Records**

- The Service will ensure that documents set out in the Education and Care Services National Regulations (Regulation 177) are kept in a safe and secure place for the length of time outlined in Regulation 183 (2).
- The service will develop a practice in relation to the retention and disposal of records.
- In the event that approval of the service is transferred, the requirements of Regulation 184 will be followed.

**C. Disclosure of Information**

- Personal information regarding the children and their families is not to be discussed with anyone outside the service, except in circumstances outlined in Regulation 181.
- Families may seek access to the personal information collected about them and their child by contacting the Nominated Supervisor at the service. Children may also seek access to personal information about themselves. However access may be denied where access would impact on the privacy of others; where access may result in a breach of the service's duty of care to the child; or where the child has provided information in confidence.
- Lists of children's or families names, emails and phone numbers are deemed confidential and are not for public viewing and will not be issued to any other person or organisation without written consent.
- No personal information regarding a staff member is to be given to anyone without his/her written permission.
- Within NSW, Chapter 16A of the Children and Young Persons (Care and Protection) Act 1998 (Care Act) provides the legislative basis for sharing information that relates to the safety, welfare or wellbeing of a child or young person. Chapter 16A allows for the flow of information between certain government agencies and non-government organisations to facilitate collaboration in the provision of services. The provision of information under Chapter 16A takes precedence over the protection of confidentiality or of an individual's privacy because the safety, welfare and wellbeing of children and young people is paramount

**D. Personal Conversations**

- Personal conversations with families about their children, or other matters that may impact on the child's enrolment, for example, fees, will take place in an area that affords them privacy. (r111)
- Personal conversations with educators and staff about matters relating to their performance will take place in an area that affords them privacy.

**E. Maintenance of Information**

- The Nominated Supervisor is responsible for maintaining all service records required under the Education and Care Services National Regulations (Regulation 168) and other relevant legislation, for example, Work, Health and Safety, Australian Taxation Office, Family Assistance Office, Department of Education, Employment and Workplace Relations (DEEWR) and for ensuring that information is updated regularly.
- The service takes all reasonable precautions to ensure personal information that is collected, used and disclosed is accurate, complete and up-to-date.
- Individuals will be required to advise the service of any changes that may affect the initial information provided.

**CONSIDERATIONS**

Education and Care Services National Law & Regulations	National Quality Standards & Elements	Links to other Service Policies	Other
S175 R111,145 – 152, 158-162, 168, 177, 181, 183, 184	Standards 4.2, 5.1, 7.1  Elements 7.1.2, 7.1.3	<ul style="list-style-type: none"> <li>• Governance and Management,</li> <li>• Medical Conditions and Administration of Medication,</li> <li>• Acceptance and Refusal of Authorisations,</li> <li>• Communication with Families,</li> <li>• Delivery and Collection of Children,</li> <li>• Enrolment and Orientation,</li> <li>• Management of Complaints policies</li> <li>• Child Protection</li> </ul>	<ul style="list-style-type: none"> <li>• My Time, Our Place.</li> <li>• Network <i>OSHC Code of Conduct</i>.</li> <li>• Work, Health and Safety Act (2011).</li> <li>• Privacy Act (1988).</li> <li>• Child Care Service Handbook (DEEWR).</li> <li>• Child Care Subsidy legislation.</li> <li>• Enrolment Form.</li> <li>• Parent Handbook.</li> </ul>

			<ul style="list-style-type: none"><li>• Staff Handbook.</li><li>• Personnel files.</li><li>• Care and protection act (1988)</li></ul>
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# COVID SAFE PLAN POLICY

## **POLICY STATEMENT:**

**Annandale After School Centre Inc.** will make every effort to protect the privacy and confidentiality of all individuals associated with the service by ensuring that all records and information about individual children, families, educators, staff and management are kept in a safe and secure place and is not divulged or communicated, directly or indirectly, to another person other than:

- To the extent necessary for the education and care of the child
- To the extent necessary for medical treatment of the child
- Family/Guardian of the child to whom the information relates
- The Regulatory Authority or an authorised officer as expressly authorised, permitted or required under the Education and Care Services National Law and Regulations
- With the written consent of the person who provided the information. (r181)

## **COVID-19 Safe Plan**

This plan has been created in response to, and focuses on the threat of COVID-19 as a pandemic.

## **Requirement to keep this Plan**

OOSH Services operating on Department of Education premises are now required to have COVID-19 Safety Plans in place. OOSH Services were not required to have a plan of this kind under the 30 June 2020 Public Health Order. Services that operate on non-government sites may want to use this plan to document their existing and guide their future COVID-19 Safe practices.

## **Frequent Review**

Services will continue to check with NSW and Federal Government agencies for contemporary advice on COVID-19 and COVID Safe practices.

### **Covid-19 Specific Information**

NSW Government

<https://www.nsw.gov.au/covid-19>

NSW Department of Health

<https://www.health.nsw.gov.au/Infectious/covid-19/>

NSW Department of Education

<https://education.nsw.gov.au/early-childhood-education/coronavirus>

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## **General Contacts**

NSW Health

[www.health.nsw.gov.au](http://www.health.nsw.gov.au)

National Coronavirus Health Information Line 1800 020 080

Call Service NSW 13 77 88

Department of Education

<https://education.nsw.gov.au/>

1300 679 332

Fair Work

<https://www.fairwork.gov.au/>

Phone 13 13 94

ACECQA

<https://www.acecqa.gov.au/>

Phone 1300 422 327

## **Background**

### **What is a Pandemic, and what is COVID-19?**

According to the World Health Organisation, a pandemic is the “worldwide spread of a new disease”. Coronaviruses are a group of viruses, some of which cause viruses in humans. COVID-19 is a new strain of Coronavirus that was declared a Pandemic by the WHO on 11 March 2020.<sup>1</sup> The outbreak of the new influenza virus COVID-19 has become a global threat, spreading internationally at a fast pace. There is currently no vaccine, and the disease spreads easily from person to person. For these reasons, this Service has chosen to adopt this Pandemic Plan to minimise our risks and document steps to manage COVID-19.

### **How is COVID-19 Spread?**

COVID-19 is spread from someone infected with the virus to another person by close contact. Primarily, the virus is spread by inhalation of airborne droplets released by the coughing and sneezing of an infected person, or by an infected person touching objects or people with unclean hands.

The virus can be spread by an infected person several days before they show symptoms. The time between when a person is exposed to the virus and when symptoms first appear is typically 5 to 6 days, although this can range from 2 to 14 days.<sup>2</sup>

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<sup>1</sup>World Health Organisation, Director General’s Speech 11/3/2020 [available at] <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>

<sup>2</sup> NSW Department of Health, Coronavirus FAQs

[available at] <https://www.health.nsw.gov.au/Infectious/alerts/Pages/coronavirus-faqs.aspx#8-1>

Policy endorsed 2<sup>nd</sup> November 2021

Evaluation and review due 2<sup>nd</sup> May 2023

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While a small number of cases of COVID-19 appear to have been contagious before symptoms developed, the virus is generally spread by those showing symptoms.

It may be the case that COVID-19 can be caught from infected surfaces. More information is documented below.

### **How long does a COVID-19 infection last?**

In the same way as other illnesses such as cold or flu can vary from person to person, the period that each person has symptoms of COVID-19 can differ. Symptoms may last anywhere from a few days to weeks depending on the preexisting health of the individual

## **OOSH COVID Safe Practices**

### **Diagnosis of COVID-19**

COVID-19 infection is diagnosed by testing (generally swab of the throat). If a person attending the childcare service is diagnosed with COVID-19, they need to self-isolate until cleared to return to the service by a medical practitioner.

Please refer to the 'Sick in care' and 'Sick at Work' sections below for more detail.

If any person who has attended the Service notifies a staff member that they have had a positive diagnosis of COVID-19, an appropriate person in Management or Control of the Service will contact:

- NSW Department of Education Early Childhood Education Directorate:  
1800 619 113
  
- ACECQA  
1800 619 113  
Or  
Via the National Quality Agenda IT System
  
- CCS Helpdesk (for Service Closures)  
1300 667 276
  
- National Coronavirus Helpline  
1800 020 080
  
- School Principal
- SafeWork NSW

Note: Annandale After School Centre Inc. is required to notify ACECQA within 24 hours of becoming aware of a serious incident.

AND

Policy endorsed 2<sup>nd</sup> November 2021

Evaluation and review due 2<sup>nd</sup> May 2023

## ANNANDALE AFTER SCHOOL CENTRE

Within 7 days of becoming aware of a circumstance arising at the service that poses a risk to the health, safety or wellbeing of a child.

### **Health and Hygiene Practices**

This Plan recognises our service's existing Health and Hygiene policies and procedures.

In addition to existing practices, this service will follow the current advice from NSW Health as at 26/8/2020. This is included below, with OOSH Specific notes as dot points.

#### ***"1. Wash your hands***

*Clean your hands for at least 20 seconds with soap and water, or use an alcohol-based sanitiser with at least 60% alcohol."*

- Children will wash their hands on arrival to the centre and again at 9am, 11am, 1pm, 3pm and at 5pm during Vacation Care.
- During term-time, hand washing will occur at 3pm and 5pm as well as before consumption of food and after toileting.
- Hand Sanitiser will be kept in a place that is not accessible to children, and dispensed by Educators;
- Hand-Washing will be increased, with Educators reminding children to wash their hands regularly throughout each session;
- Adults and children entering the service will be asked to sanitise their hands upon entry.
- Encouraging hand washing for children at regular intervals throughout the session of care.

#### ***"2. Cough etiquette***

*Cover your sneeze or cough with your elbow or with a tissue (and dispose of it immediately). Avoid close contact with people who are ill. Avoid touching your eyes, nose and mouth."*

- Children will be reminded of cough etiquette practices by Educators at the beginning of each session or when appropriate;
- Resources such as posters will be used within the service to promote cough etiquette
- Children will also be reminded about using tissues, and disposing of them promptly and properly.

#### ***"3. Stay home if you are sick***

*If your child is unwell with a respiratory illness they should remain at home until symptoms clear up."*

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- Educators will reflect on the Sick at Care or Work guidelines below when considering the appropriate response to illness (either of children or adults) in the childcare setting.

### **Programming and learning**

Annandale After School Centre Inc. will consider the COVID Safe practices outlined in this plan and other contemporary COVID-19 safety advice from NSW and Federal Government agencies when programming and facilitating activities.

Staff will:

- model good hygiene practices and discuss these regularly with children,
- Plan activities that can accommodate physical distancing or minimal touching of resources wherever possible,
- Stagger activities to prevent clustering of children wherever practicable,
- Promote outdoor play as a means of increasing physical distance between children.

### **Physical Distancing**

Annandale After School Centre Inc. recognises the Australian Federal Government's recommendations on physical distancing.<sup>3</sup>

While OOSH Services are exempt from mandatory physical distancing restrictions, wherever possible, our Service will practice social distancing.

Annandale After School Centre Inc. recognises that OOSH Services are not required to enforce physical distancing restrictions. However, we will do our best to support and facilitate physical distancing in our Service. We will:

- Encouraging children to spread within the Service, using all indoor/outdoor space for the whole session (within ratio requirements),
- Prioritise opportunities for physical distancing during activities where practicable,
- Engage children in discussions regarding activities that facilitate physical distancing,
- Ask staff to practice and model physical distancing both with adults and with children wherever practicable.

### Disinfecting Objects and Surfaces

According to the World Health Organization, it is not certain how long the virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses. Studies suggest that coronaviruses (including preliminary information on the COVID-19 virus) may persist on surfaces for a few hours or up to several days. This may vary under different conditions (e.g. type of surface, temperature or humidity of the environment).<sup>4</sup>

This pandemic plan follows the directions of the WHO regarding the disinfection of surfaces to minimise risk of COVID-19.

Annandale After School Centre Inc. will regularly wipe objects and surfaces with a child-safe disinfectant as per our existing hygiene and cleanliness policies and procedures.

Surfaces will be cleaned:

- During set-up, before children enter the Service
- After each activity
- After a child has coughed or sneezed on a surface or object
- At any other interval staff feel is appropriate

Where an object cannot be wiped with a disinfecting agent (for example, cushions) the Service will determine an appropriate alternative cleaning method, or remove the object from the care environment if it poses significant risk (for example, a child with a temperature sneeze on the object).

### Sick at Work or in Care Policy

The following table covers specific scenarios regarding children and families in care at our service.

Scenario	Snapshot	Course of Action	Leave (Permanent Staff Only)
Employee is presenting symptoms of COVID-19	Employee should seek medical advice.	<ul style="list-style-type: none"><li>- Employee must contact the appropriate person in management</li><li>- Employee should be directed to speak to a Healthcare Professional</li><li>- If an employee is required to be tested for COVID-19, they must receive clearance prior to attending work. Evidence</li></ul>	<ul style="list-style-type: none"><li>- If a person is a permanent staff member, personal/ carer's leave may be taken</li></ul>

<sup>4</sup>

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		<p>must be provided.</p> <ul style="list-style-type: none"> <li>- If an employee is advised by a medical practitioner that they do not require testing for COVID-19, normal workplace illness practices should be followed.</li> </ul>	
Employee has a confirmed case of COVID-19	Employee cannot come to work.	<ul style="list-style-type: none"> <li>- If an employee is confirmed to have COVID-19 they must self-isolate.</li> <li>- An employee must notify the appropriate person in management that they are ill</li> <li>- A person in management must report the case of COVID-19</li> </ul>	<ul style="list-style-type: none"> <li>- If a person is a permanent staff member, personal/ carer's leave may be taken</li> </ul>
Employee has come into close contact with a person with confirmed COVID-19	Employee should not come to work.	<ul style="list-style-type: none"> <li>- Even if the employee is showing no symptoms, they must self-isolate for 14 days from the time of last close contact</li> <li>- The staff member should consult a medical professional to see if a COVID19 test is recommended.</li> <li>- Can return to work after the 14-day period provided that they have no symptoms</li> <li>- A Staff member can return to work sooner provided they have clearance from a medical professional.</li> </ul>	<ul style="list-style-type: none"> <li>- Sick leave may not be taken unless an employee is ill. An employee may be entitled to take annual leave, or will otherwise need to take leave without pay. In some circumstances an employer may wish to allocate tasks to be completed 'from home'.</li> </ul>
Employee has come into contact second-hand with a person who is not infected, but has come into direct contact with a confirmed	Employee can continue working	<ul style="list-style-type: none"> <li>- Employee must monitor their symptoms for 14 days, and notify the appropriate person in management if there is a change to their health</li> <li>- If an employee begins showing symptoms of COVID-19 they should immediately self-isolate and seek medical</li> </ul>	<ul style="list-style-type: none"> <li>- If an employee becomes sick, they are entitled to take sick leave</li> </ul>

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case of COVID-19		advice	
International travel from a member of staff	Employee should not return to work for 14 days	<ul style="list-style-type: none"> <li>- Employees who have returned from international travel should self-isolate for 14 days.</li> <li>- Once 14 days have passed, they are able to return to work if they do not have any symptoms</li> </ul>	Sick leave may not be taken unless an employee is ill. An employee may be entitled to take annual leave, or will otherwise need to take leave without pay. In some circumstances an employer may wish to allocate tasks to be completed 'from home'.
An employee who is concerned about the risk of COVID-19	An Employee may ask for flexible work arrangements (e.g. work from home) or to stay home	<ul style="list-style-type: none"> <li>- The employer should consider the risk associated with work, and whether there is a reasonable argument for granting flexible work or leave</li> </ul>	<ul style="list-style-type: none"> <li>- A permanent employee may be entitled to take annual leave if available, or leave without pay</li> </ul>
Child is presenting symptoms of COVID-19		<ul style="list-style-type: none"> <li>-If a child or staff member becomes ill while they are at the service, they should be sent home as soon as possible.</li> <li>-While awaiting collection by their carer, ideally, the symptomatic child should be cared for in an area that is separate from other children.</li> </ul>	
Child has or had contact with someone with a confirmed case of COVID19	Family should seek medical advice. Family is excluded from the	<ul style="list-style-type: none"> <li>- Family must contact the appropriate person in management</li> <li>- Family should be directed to speak to a Healthcare Professional</li> <li>- If the child is required to be tested for COVID-19, they must receive clearance prior</li> </ul>	



## ANNANDALE AFTER SCHOOL CENTRE

		<p>to attending the Service. Evidence must be provided.</p> <ul style="list-style-type: none"> <li>- If the child does not have a COVID-19 test they may</li> </ul>
<p>Child has come into contact second-hand with a person who is not infected, but has come into direct contact with a confirmed case of COVID-19</p>	<p>Family should monitor symptoms</p>	<ul style="list-style-type: none"> <li>- Family must monitor the child's symptoms for 14 days, and notify the appropriate person in management if there is a change to their health</li> <li>- If the child begins showing symptoms of COVID-19 the family should immediately self-isolate and seek medical advice</li> </ul>
<p>International travel from a child or a family member in their household</p>	<p>Family should self-isolate for 14 days</p>	<ul style="list-style-type: none"> <li>- Children who have returned from international travel should be isolated for 14 days.</li> <li>- Once 14 days have passed, they are able to return to work if they do not have any symptoms</li> </ul>

### Taking temperatures

The current advice from the NSW Department of Health recommends that Services do not take the temperature of each child upon entry. However, if any symptoms of COVID19 (listed above) are displayed by a child or staff member, the Service will take and record temperatures. If it is determined that the temperature is elevated (above 37.5 degrees) then the family will be notified that the child is to be collected immediately.

### Wearing Masks

Annandale After School Centre Inc. will now follow the recommendations of the NSW Health Department/Department of Education regarding mask wearing for staff/parents and visitors.

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Masks will now be required to be worn by Educators while in indoor areas, and when staff are interacting with adults.

All parents/carers or visitor are required to wear a mask when on school premises.

### **Limits on Entry into the Service**

#### **SERVICE NSW QR CODE**

**As from 12<sup>th</sup> July, 2021 all staff, parents, carers and visitors to the service are required to sign in with the Service NSW QR code which is displayed on all access gates as well as near the sign in/out tablets. For people who are unable to sign in with the QR code we also provide a register for signing in manually.**

During periods of COVID-19 community transmission the Service at any time reserves the right to:

- limit entry of parents into the Service for the purpose of sign-in or sign-out;
- Ask Educators to sign children in or out of the Service when a child is collected, to prevent shared use of tablets, computers or pens.

The Service will take steps to:

- Limit entry into the Service for any person that is not essential for the operation of the Service or for the health and safety of children.
- Ensure any adult attending the School Site for the purpose of attending the OOSH has registered with the school if required by the school
- Where practical, remind parents to socially distance while dropping off or picking up children.

This may be done:

- verbally,
- via email, or
- if practical and permitted by the School Principal, through use of signage at the entrance to the school premises.

Where the Service chooses to or cannot enforce limited entry practices, the Service will communicate with families regarding conditions of entry to the Service. Conditions will include:

- that families self-declare that they are not exhibiting any symptoms of COVID-19;

## ANNANDALE AFTER SCHOOL CENTRE

- That families will sanitize their hands before entry.

### **Record Keeping**

Annandale After School Centre Inc. will continue to follow all record taking and storage requirements as per the National Quality Framework or other relevant legislation. The Service will maintain and store a copy of staff rosters, and sign in/out times for staff members.

Any visitors who are allowed (see Limits on Entry) to enter the site will be required to sign in and out with the OOSH Service. A record of each visitor's name, phone number or email address will be kept in accordance with existing Record Keeping policies at the Service.

Records of each individual will be kept confidential unless requested for contract tracing purposes by a relevant government authority. More information is available at:

<https://www.oaic.gov.au/privacy/privacy-for-organisations/small-business/>

We note that for the purposes of COVID Safe procedures that records are required to be kept for a minimum of 28 days.

### **Emergency Evacuation and Lockdown Procedures**

The Service will ensure steps are in place to adjust existing emergency procedures to:

- a) Promote physical distancing if possible and
- b) Ensure meeting points are still appropriate (note, some schools are increasing 'lock up' procedures to limit entry onto the school grounds. Please ensure your Emergency Evacuation Meeting points are still easily accessible, and allow for speedy exit from the school grounds if necessary).

### **Administrative Practices**

Annandale After School Centre Inc. will:

- take steps to wipe any shared electronic devices are with an appropriate disinfectant after use;

## ANNANDALE AFTER SCHOOL CENTRE

- Wherever possible, request that any deliveries be contactless, and occur at the boundary of the school (school gate);
- communicate regularly at staff meetings or via other staff communication methods regarding Covid Safe guidelines;
- Display appropriate signage regarding COVID Safe practices.

# COVID-19 Attendance and Enrolment Policy

Annandale After School Centre believes that the following policy is designed to assist our Service in understanding our responsibilities under the current Early Childhood Education and Care Relief Package as announced on 2 April 2020. The measure was announced to respond to both the demand from 'essential workers' during the COVID19 pandemic, and the growing viability concerns for OOSH Services. This policy reflects the needs of OOSH Services to practically respond to, and function under, this new subsidy.

## **'Old System' CCSS**

The Child Care Subsidy System has been put on hold for now, with all permanent bookings under the CCS system will be 'paused', or put on hold, until the CCS System is reinstated.

These bookings can only be cancelled by a family as per our existing booking and cancellation policies.

## **Outstanding Fees**

This Service reserves the right to enforce existing policies regarding Outstanding Fees. Where a family has not paid fees up until Friday 3 April (the last business day under the CCS System) this Service reserves the right to refuse care up until any outstanding fees are paid.

## **Payments in Advance**

Families who have paid fees in advance and will now not be paying for care under the 'New System' or ECECRP may be credited or refunded based on the existing policies of This Service.

## **Holding Bookings**

Parents who wish to recommence their bookings after the COVID19 period, but have recently cancelled their bookings should re-enrol to hold their place. This Service will attempt to honour old bookings at the time the old system recommences, but does not guarantee a place for families who have not booked/re-booked. Bookings under the CCS system will be considered under the existing policies and practices of this Service. Families will not be charged for their bookings while the ECECRP is in place.

## **'New System' Early Childhood Education and Care Relief Package**

The new system, ECECRP, or 'Free Childcare' measure commenced on 6 April 2020. Parents will not be charged for care during the period that this measure remains enacted. All measures listed below will be in place only for the duration of the ECECRP. Upon recommencement of the CCS system, all policies and procedures will revert to those existing prior to the COVID-19 pandemic.

Bookings will be accepted on a 'needs' basis, as assessed by this Service in reference to the Priority of Access guidelines below. Concerns or disputes regarding bookings can be made under any existing Complaints Handling policies and procedures.

**Priority of access:**

Priority will be assessed on a case-by-case basis in reference to the following priority guidelines:

- Essential Workers\*
- Vulnerable children or families at risk of abuse or neglect
- Disadvantaged children or families
- Families with difficult or exceptional circumstances
- Families enrolled at the Service with previous bookings
- Single parent families who meet the activities test
- Families with two parents who meet the activities test
- Single parent families who do not meet the activities test
- Families with one parent who meets the activities test
- New Families

\*Essential frontline workers will include;

Health Professionals and Emergency Workers

Hospital Staff including Contractors

Educators, and workers in the Child Care Industry

Aged Care Worker

Those employed in Transport, Telecommunications, Energy or Water Government Employees

**Physical Distancing**

This Service reserves the right to cap booking numbers in order to reflect current physical distancing recommendations

**Proof of Employment**

This Service reserves the right to seek proof of employment prior to accepting an enrolment/booking.

### **New Families**

Families new to the Service may be given bookings at the discretion of this Service. New families will be required to complete all relevant enrolment forms and documents, and may be asked to provide proof of immunisation, and/or pay fees attached to the enrolment process as required by any existing Policies and Procedures.

### **Fees**

New Families may be required to make payments to the Service with enrolment, such as an enrolment fee, in order to secure their enrolment at our Service. This will be done in accordance with our existing Policies and Procedures. No rebate or subsidy will be available on this payment.

This Service will not charge fees for care under the ECECRP system.

### **Health and Safety Reasons**

This Services has a responsibility to ensure the health and safety of its employees and children in care. All elements of this policy will be enacted with health and safety as a priority. This Service reserves the right to make amendments to this policy at any time in order to meet health and safety obligations.

### **Vaccinations**

Families may be asked to provide evidence that all of their children's required vaccinations are up to date. Care can be provided for children who have not been vaccinated according to the NSW Health recommended immunisation schedule.

### **Family Obligations**

All families attending this Service are obliged to consider the health and safety of others present 3 at this Service. We request that families follow isolation guidelines and government advice, in order to minimise the risk of infection at our Service. If your child is exhibiting cold or flu-like symptoms, we ask that you seek guidance from a doctor before bringing your child into the care environment. If a member of your family has contracted, or been in close contact with someone who has contracted COVID19, your child will not be able to attend this Service for a minimum of 14 days or as otherwise cleared by a doctor.

# Diversity and Anti-Bias

## POLICY STATEMENT

We will recognise the diversity of cultures in Australia and help foster an awareness and acceptance of other cultures within each child, through the thoughtful integration of a variety of cultural activities in the program.

All activities and behaviour in the Centre will be considerate of the cultural and linguistic diversity of the families within the community. Children will be encouraged to explore and share a range of cultural activities and experiences in an environment free from racial prejudice and harassment.

## CONSIDERATIONS

Anti-Discrimination Act

National Quality Standards Quality Area 4.1

National Quality Standards Quality Area 5.1

## PROCEDURE

- Staff will accept and value every parent and child regardless of race, cultural background religion, sex or ability or sexual preference of parents.
- Staff will make themselves aware of the specific cultures represented in the families and general community of the Centre.
- No discrimination will be made against any family or child due to their culture, race or sexual preference.
- Staff will not be judgmental towards the parents and respect any differences in childcare practices (with the exception of child protection concerns).
- Staff will ensure parents have confidence in the Centre's quality of care for their child by seeking information regarding their cultural issues.
- Staff will encourage feedback and input from parents in relation to the program, policies or other issues in the Centre, which are affected by the families' culture or race.
- Parents will be invited and encouraged to contribute knowledge of their own culture to enhance the overall program.
- Staff will undertake training and sharing of information regarding the various cultures and multicultural programming.
- Staff are encouraged to share knowledge of their own cultures with other staff, parents and children and to incorporate this into the program.
- Staff will make themselves aware of any issues or behaviour, which may be offensive to the various cultures and avoid possible offensive behaviour.
- Contact may be made with the SUPS team in the local area for support, assistance and ideas.
- All activities and behaviour in the Centre will be considerate of the cultural and linguistic diversity of the families within the community.
- Where possible parent information will be translated into other languages (if required).
- Children will be encouraged to explore and share a range of cultural activities and experiences in an environment free from racial prejudice and harassment.
- Staff shall research and gain ideas regarding appropriate activities to be incorporated in the program.



- Staff should be aware of and ensure that festivals and celebrations of many cultures are included in the program.
- The Centre aims to involve volunteers from diverse cultures and backgrounds to share their cultures, celebrations and skills with the children.
- Cultural awareness should be integrated throughout all activities in the program and reflect an attitude of respect and positive appreciation for the differences in our society.
- All activities in the Centre will be checked to ensure that negative and discriminating images of particular cultures or life-styles are avoided.
- Staff and volunteers will be made aware of the Centre's diversity and inclusion policy, outlining how interactions with children are to be respectful of diverse backgrounds, needs and abilities.
- The Centre's equipment, resources, activities and experiences will be set up to ensure the individual needs of all children are met.

# Daily Routines

## POLICY STATEMENT

We will provide daily routines that meet the needs of individual children in relation to each child's social, physical, intellectual, creative and emotional development.

As the Centre is the child's time for play and leisure, this will be reflected in the daily routines.

## CONSIDERATIONS

*My Time, Out Place Framework for school age care*

*Belonging, Being and Becoming: The Early Years Learning Framework*

## PROCEDURE

- A daily routine will be discussed and organised by the staff in consultation with children and families.
- The routine will reflect the Centre's philosophy of care and the service goals.
- The routine will be structured around regular events of the day such as arrival, departure, transition to and from school, breakfast, afternoon tea and pack-up time.
- The routine will provide a mixture of structured and unstructured activities in both indoor and outdoor environments.
- The routine will take into consideration all children's needs in relation to their emotional, social, physical, creative and developmental areas.
- Developing each child's own creative leisure skills will also be a consideration when planning the daily routine.
- The routine will be adapted to meet the varying and changing needs of the children and seasonal conditions.
- The routine will be recorded and displayed where staff, children and parents can clearly see.
- The routine will be flexible to meet the needs of the children and allow for spontaneity and enjoyment in the Centre.

# Dealing with Medical Conditions

## POLICY STATEMENT

Annandale After School Centre will work closely with children, families and where relevant schools and other health professionals to manage medical conditions of children attending the service. We will support children with medical conditions to participate fully in the day to day program in order to promote their sense of wellbeing, connectedness and belonging to the service (*"My Time, Our Place"* 1.2, 3.1 and *"Belonging, Being and Becoming"*). Our educators will be fully aware of the nature and management of any child's medical condition and will respect the child and the family's confidentiality (*"My Time, Our Place"* 1.4 and *"Belonging, Being and Becoming"*). Medications will only be administered to children in accordance with the National Law and Regulations.

## CONSIDERATIONS

- National Law Section 173
- National Regulations 90-91
- National Standard 6: Element 6.2.1 *"The expertise of families is recognised and they share in the decision making about their child's learning and wellbeing"*.
- National Standard 6: Element 6.3.1 *"Links with relevant community and support agencies are established and maintained"*
- National Standard 6 : Element 6.3.3. *" Access to inclusion and support assistance is facilitated"*.
- Disability Discrimination Act 1975
- NSW Anti-discrimination Act 1977
- Work Health and Safety Act 2011
- Individual Medical Management Plans and corresponding resources.
- Service policy on *"Administration of Medication"*.
- Service policy on *"Illness and Infectious Diseases"*
- Service policy on *"Confidentiality"*

## PROCEDURE

Families will be asked to inform the service of any medical conditions the child may have at the time of enrolment. This information will be recorded by the family on the child's enrolment form.

Upon notification of a child's medical condition the service will provide the family with a copy of this policy in accordance with regulation 91.

Specific or long term medical conditions will require the completion of a Medical management plan with the child's doctor and family.

It is a requirement of the service to meet its regulatory obligations that a risk minimisation plan and a communication plan be developed in consultation with the child's family. The Service Co-ordinator will meet with the family and relevant health professionals as soon as possible prior to the child's attendance to determine content of that plan to assist in a smooth and safe transition of the child into the service.

Content of the Planning will include:

- *Identification of any risks to the child or others by their attendance at the service.*
- *Identification of any practices or procedures that need adjustment at the service to minimise risk eg food preparation procedures*
- *Process and time line for Orientation or training requirements for staff*
- *Methods for communicating between parents and educators any changes to the child's medical management plan*

The medical management plan will be followed in the event of any incident relating to the child's specific health care need, allergy or relevant medical condition. All Educators including volunteers and administrative support will be informed of any special medical conditions affecting children and orientated to their management. In some cases specific training will be provided to Educators to ensure that they are able to implement effectively the medical management plan.

**The medical management plan of each child will be reviewed with the parents when required by the child's medical practitioner.**

Where a child has an allergy, the family will be asked to supply information from their doctor explaining the effects if the child is exposed to whatever they are allergic to and to explain ways the educators can help the child if they do become exposed.

Where possible the service will endeavour to not have that allergen accessible in the service.

All medical conditions including food allergies will be placed on a noticeboard near the kitchen area (out of sight of general visitors and children). It is deemed the responsibility of every educator at the service to regularly read and refer to the list.

All relief staff will be informed of the list on initial employment and provided orientation on what action to take in the event of a medical emergency involving that child.

Where a child has a life threatening food allergy and our service provides food, then our service will endeavour not to serve the particular food allergen in the service when the child is in attendance and families will be advised not to supply that allergen for their own children (ie. No nut policy communicated to parents).

Where it is necessary for other children to consume the particular food allergen (e.g. milk or other dairy foods) the child with a food allergy will be seated separately during meal times and all children will wash their hands before and after eating.

Where medication for treatment of long term conditions such as **Asthma** (for the detailed management of Asthma please refer to our Asthma Policy), **Diabetes** (for the detailed management of Diabetes please refer to the Management of Diabetes Policy), **Anaphylaxis** (for the detailed management of Anaphylaxis please refer to the Anaphylaxis Policy), **Epilepsy or ADHD** is required, the service will require an individual medical management plan from the child's medical practitioner or specialist detailing the medical condition of the child, correct dosage of any medication as prescribed and how the condition is to be managed in the service environment.

In the event of a child having permission to self-medicate this must be detailed in an individual medical management plan including recommended procedures for recording that the medication has been administered. The doctor must provide this plan. In one off circumstances the service will not make an exception to this rule and will require the families to complete the procedure for the educators to administer the medication.

## **ADMINISTRATION OF MEDICATION**

Prescription medication will only be administered to the child for whom it is prescribed, from the original container bearing the child's name and with a current use by date. Non-prescription medication will not be administered at the service unless authorised by a doctor.

Educators will only administer medication during services operating hours.

Permission for a child to self-medicate will be administered with the families written permission only, or with the verbal approval of a medical practitioner or parent in the case of an emergency.

In the event that a case of emergency requires verbal consent to approve the administration of medication, the service will provide written notice to the family as soon as practical after administration of the medication.

An authorisation is not required in the event of an asthma or anaphylaxis emergency however the authorisation must be sought as soon as possible after the time the parent and emergency services are notified.

Families who wish for medication to be administered to their child or have their child self-administer the medication at the service must complete a medication form providing the following information:

- Name of child
- Name of medication
- Details of the date, time and dosage to be administered. (General time, e.g. lunchtime will not be accepted.)
- Where required, indicate if the child is allowed to administer the medication themselves or have an educator do it.
- Signature of family member

Medication must be given directly to an educator and not left in the child's bag. Educators will store the medication in a designated secure place, clearly labelled and ensure that medication is kept out of reach of children at all times.

If anyone other than the parent is bringing the child to the service, a written permission note from the parent, including the above information, must accompany the medication. An exception to the procedure is applied for asthma medication for severe asthmatics in which case the child may carry their own medication on their person with parental permission. Where a child carries their own asthma medication, they should be encouraged to report to an educator their use of the puffer as soon as possible after administering and the service maintain a record of this medication administration including time, educator advised and if the symptoms were relieved. Before medication is given to a child, the educator (with current First Aid Certificate) who is administering the medication will verify

the correct dosage for the correct child with another educator who will also witness the administration of the medication.

After the medication is given, the educator will record the following details on the medication form: Name of medication, date, time, dosage, name and signature of person who administered and name and signature of person who verified and witnessed. Where a medical practitioner's approval is given, educators will complete the medication form and write the name of the medical practitioner for the authorisation

**Where the child is required to carry his or her own medication (Epi-pen and Ventolin) it will either be stored in the aftercare office or in the special lockers with their name clearly labelled.**

# Dealing with Infectious Diseases

## POLICY STATEMENT

*Annandale After School Centre* will provide a safe and hygienic environment that will promote the health and wellbeing of all children (*"My Time, Our Place"* Outcome 3). We will take all reasonable steps to prevent and manage the spread of infectious diseases through the implementation of procedures that are consistent with guidelines of State Health Authorities.

## PROCEDURE

### A. Prevention

- Universal precautions will be consistently applied across service practices to ensure prevention of the spread of infections is effective.
- A regularly updated copy of the Department of Health guidelines on infectious diseases will be kept at the service for reference by educators, management and families.
- If a child is showing symptoms of an infectious disease whilst at home, families are not permitted to bring the child to the service. Children who appear unwell when being signed in by their family will not be permitted to stay at the service.
- Hand washing will be practised by all educators and children upon entering the service, before preparing or eating food and after all dirty tasks such as toileting, cleaning up any items, wiping a nose, before and after administering first aid, playing outside or handling an animal. In addition, educators will wash their hands before leaving the service.
- The service will be cleaned daily and rosters maintained as evidence of the cleaning tasks being undertaken.
- All toilet facilities will have access to a basin or sink with running water, soap and drying facilities i.e.: paper towel, hand dryer for washing and drying hands.
- Women and girls will have access to proper feminine hygiene disposal.
- Soap and paper towel will also be available in the kitchen area.
- All toilets, hand basins and kitchen facilities used by the service will be cleaned and sanitised daily. General surfaces will be cleaned with detergent during the session if needed and at the end of each day and all contaminated surfaces will be disinfected.
- Toys will be washed, cleaned and disinfected on a regular basis with material items such as dress ups and cushion covers laundered as required but a minimum of quarterly.
- Educators will maintain and model appropriate hygiene practices and encourage the children to adopt effective hygiene practices. As part of children taking increasing responsibility for their own health and physical wellbeing, educators will acknowledge children who are modelling hygiene practices.
- Informal education in proper hygiene practices will be conducted on a regular basis, either individually or as a group through conversations, planned experiences, inclusion in service routines and reminders. Health and hygiene practices will be highlighted to

parents, and where appropriate information sheets or posters will be used by educators to support these practices.

- Educators will aim to provide a non-judgmental approach to differences in hygiene practices and standards between families in order to support children's developing sense of identity. Where practices differ to standards expected in the service, educators are to remind children that these are practices to be followed in the service but they may be different for them at home.
- All educators will be advised upon appointment to the position to maintain their immunity to common childhood diseases, tetanus and Hepatitis B through immunisation with their local health professional

#### **B. Management of Infectious Diseases**

- Children and educators with infectious diseases will be excluded from the service for the period recommended by the Department of Health.
- Where there is an outbreak of an infectious disease, each enrolled child's family/emergency contact will be notified within 24 hours via a notice, email or phone call under ordinary circumstances. The service will maintain confidentiality when issuing the notification and ensure it is not prejudicial or identify any children.
- In the event of an outbreak of vaccine-preventable disease at the service or school attended by children at service, parents of children not immunised will be required to stay at home for the duration of the outbreak for their own protection.
- If a child develops symptoms of a possible infectious disease whilst at the service, their family will be contacted to take the child home. Where they are not available, emergency contacts will be called to ensure the child is removed from the service promptly, then an Incident, injury, Illness and Trauma form will be completed.
- All educators dealing with open sores, cuts and bodily fluids shall wear disposable gloves and practice universal precautions.
- Educators with cuts, open wounds or skin diseases such as dermatitis should cover their wounds and wear disposable gloves.
- Disposable gloves will be properly and safely discarded and educators are to wash their hands after doing so.
- If a child has an open wound it will be covered with a waterproof dressing and securely attached.
- If bodily fluids or blood gets on the skin but there is no cut or puncture, wash away with hot soapy water.
- In the event of exposure through cuts or chapped skin, promptly wash away the fluid, encourage bleeding and wash in cold or tepid soapy water.
- In the event of exposure to the mouth, promptly spit it out and rinse mouth with water several times.
- In the event of exposure to the eyes, promptly rinse gently with cold or tepid tap water or saline solution.



- In the event of having to perform CPR, disposable sterile mouth masks are to be used if available.
- Any exposure should be reported to the Coordinator/Nominated Supervisor and management to ensure proper follow up procedures occur.
- When assisting children with toileting and nappy changing, educators will ensure that they wear gloves and wash their hands afterwards. They will also encourage the child to wash their hands.
- Educators will consider the resources they are using when assisting school age children with toileting to ensure they are age appropriate and ensure privacy for the child and ease of use.
- Any soiled clothing shall be handled using disposable gloves and be placed in a sealed plastic bag for the parents to take home for laundering. The service will never rinse soiled clothing.
- Any blood or bodily fluid spills will be cleaned up immediately, using gloves and fully disinfect the area. Cloths used in cleaning will be wrapped in plastic bags and properly disposed of according to current infection control guidelines.
- Payment of fees will be required for children during an outbreak of a vaccine-preventable disease, unless other arrangements discussed and agreed to by management have been made.
- The Coordinator/Nominated Supervisor will follow the recommendations as outlined in the Health Department document.
- The decision to exclude or re-admit a child or educator will be the responsibility of the Coordinator/Nominated Supervisor and will be based on the child's symptoms, medical advice and Department of Health guidelines for children who have an infectious disease or who have been exposed to an infectious disease.
- The service has the right to refuse access if there are valid concerns about the child's health.
- A doctor's clearance certificate will be required for all infectious diseases such as measles, mumps diphtheria, hepatitis A, polio, tuberculosis, typhoid and paratyphoid before returning to the service.

### **C. Reportable Diseases**

- The service will notify their local public health unit if any child or educator contracts a vaccine-preventable disease.

Under the NSW public health act 2010, the service must notify the following 9 vaccine preventable diseases to the local public health unit 1300 066 055

- Diphtheria
- Haemophilus influenzae type b (Hib)
- Measles
- Meningococcal C
- Mumps

- Pertussis (whooping cough)
- Poliomyelitis
- Rubella
- Tetanus.

Nominated supervisors will be encouraged to seek advice from their lock PHU when they suspect an infection disease outbreak is affecting their centre, such as outbreak of gastrointestinal or respiratory illness.

The Public Health Unit may need to review the centre's immunisation register to determine which children are at risk from the outbreak.

Following assessment of the situation, the public health officer may instruct the director to exclude certain children for a period, or provide advice regarding preventive measures.

In case of pandemic or epidemic outbreak the Nominated Supervisor will follow the guidelines as laid out by the Public Health Unit and other regulatory bodies.

([www.health.nsw.gov.au](http://www.health.nsw.gov.au)) Phone: 02 93919000.

For general information and enquiry – NSW Government 1800 619 113.

#### CONSIDERATIONS:

Education and Care Services National Law & Regulations	National Quality Standards& Elements	Links to other Service Policies	Other Documentation/ Evidence
S167 R77, 85, 86, 87, 88, 106, 109	Standards 2.1  Elements 2.1.2	<ul style="list-style-type: none"> <li>• Enrolment and Orientation,</li> <li>• Providing a Child Safe Environment,</li> <li>• Incident, Injury, Illness and Trauma</li> <li>• Confidentiality Policies</li> </ul>	<ul style="list-style-type: none"> <li>• Disability Discrimination Act 1975</li> <li>• NSW Anti-discrimination Act 1977</li> <li>• Work Health and Safety Act 2011</li> <li>• Staying Healthy in Child Care (5th Edition)</li> <li>• NSW Dept. of Health guidelines</li> <li>• Parent Handbook</li> <li>• Staff Handbook</li> </ul>

# Death of a Child or Staff Member

## POLICY STATEMENT

Staff in the centre must be prepared to handle all incidents in a professional and sensitive manner. In the event of such tragic circumstance as the death of a child or staff member, the staff will follow guidelines as set out below.

## CONSIDERATIONS

### NSW Department of Community Services Guidelines

#### Procedure

- The death of a child or staff member whilst in attendance at the service will result in the same procedures as for “serious injury” (see Accidents Policy)
- The following agencies must be contacted:
  - An ambulance service.
  - The police.
  - The Department of Community Services (if a child is involved).
  - The Management Committee.
- The centre will notify the parent/guardian/sponsoring organization/manager/next of kin that a serious incident has happened and advise them to contact the relevant medical agency.
- This information should be provided in an extremely sensitive manner.
- It is not the role of the centre to inform the parent/guardian/next of kin that their child has died.
- A detailed report should be given as soon as possible.
- In the event of death occurring out of center hours, a clear emergency procedure should be maintained for the other children at the centre.
- If a child is the deceased, the Co-ordinator should make contact with the child’s school to liaise with them regarding the school’s response to the event.
- The Co-ordinator should make contact with the Department of Community Services to seek advice on an appropriate response from the service. DET and DOCS should both be able to give recommendations on counseling services available.
- In general, procedures would involve liaison with a number of other agencies.
- In liaison with the school or other staff, all parents of the other children should be contacted and advised of the death of the child or staff member and provided with the option to collect their child from the centre and advise them, or allow staff to advise children whilst in attendance at the centre.
- It is recommended that children’s families are not advised until staff have formulated a plan of action and are in a position to answer all queries and put counselors in place, i.e. 24 hours – if the centre is closing to attend the funeral all families and schools need to be advised in writing beforehand.
- The responsible staff member should sit with children and calmly explain in simple terms that the person has died and the reason why they died.

- Time to express grief and to cry freely should be given and children should be encouraged to share the memories they have of the person.
- Counselling will be made available for all children and staff.

# Delivery and Collection of Children

## POLICY STATEMENT

Annandale After School Centre will ensure that children arrive at and leave the service in a manner that safeguards their health, safety and wellbeing. Educators will manage this by adhering to clear procedures regarding the delivery and collection of children, ensuring that families understand their requirements and responsibilities and accounting for the whereabouts of children at all times whilst in the service's care.

## CONSIDERATIONS

National Quality Standards 2.3, 7.3

National Regulations 99, 158-161, 168, 176

## PROCEDURES

### (a) Delivery of Children:

- Children are not to be left at the service unattended at any time prior to the opening hours of the service.
- The attendance register must record the child's time of arrival and have a signature documented.
- Educators will be aware of each child's arrival at the service and exchange information with the person delivering the child such as who will be collecting the child.
- If a child requires medication to be administered whilst at the service, the person delivering the child must document this in writing as per the services Administration of Medication procedures.

### (b) Collection of Children:

- Children must be collected by the closing time of the centre.
- Any person who is collecting a child from the service must be listed as an authorised nominee on the child's enrolment form with their contact details. The collection list must be kept current and updated on a regular basis.
- The authorised nominee who is collecting a child must sign the attendance register and record the time of collection and their signature.
- Written authorisation must be given in the child's enrolment form if children have permission to leave the service themselves. In this case, the Responsible Person would sign the child out of the service.
- Educators will be aware of each child's departure from the service to ensure children are only collected by an authorised nominee listed on their collection list.
- Educators should be notified as soon as possible if the authorised nominee will be later than expected and the child will be informed to avoid unnecessary anxiety.
- If a person who is not on the collection list arrives to collect a child, written authorisation will be sought from an authorised nominee before the child is able to leave the service. The Responsible Person will also request identification from the person collecting the child.

- In the case of an emergency where a child's authorised nominees cannot collect the child and someone not on the collection list will be collecting the child, the service must be notified by phone as soon as possible by an authorised nominee. Written authorisation should be gained where possible however verbal consent and an identification check will be sufficient in the case of an emergency.

**(c) Absent and Missing Children:**

- Families are required to notify educators as early as possible if children will be absent from the service. Educators will record the absences in an appropriate place where other educators will be aware of the information.
- Families will be informed of their notifying responsibilities upon enrolment and through the parent handbook.
- If a child only attends after school care the families must notify educators when a child has returned from an absence so they know to expect the child at the service.
- Should a child not arrive at the service or not be waiting in the designated area when expected, educators will:
  - Ask the other children of their knowledge of where the child might be.
  - Approach the school office and ask for information regarding the child's attendance at school.
  - If the child was absent from school, call the child's authorised nominees at a suitable time to remind them of their notifying responsibilities and find out when they should expect the child to return to the service.
  - If the child was present at school and the other children and school staff are unaware of their whereabouts, educators will ask the school staff for assistance in searching for the child in the school area. Ensure supervision is maintained for other children during this process.
  - If the child is still unable to be located, educators will return to the service and call the child's authorised nominees to gain further information. Continue to call the authorised nominees on the contact list until contact has been made. Maintain contact with the authorised nominees until the child has been located.
  - Continue to keep in contact with the school during this time.
  - Arrange for appropriate supervision of children at the service and send an educator back to the school area to continue looking for the child. Follow up on any leads regarding children going to a friend's home and check common places in the local area.
  - If the child remains missing, contact the police and keep the authorised nominees and school informed of the situation.
  - Educators will notify the Department of Education and Communities (DECS) within 24 hours of the incident occurring.

# Determining the Responsible Person

## POLICY STATEMENT:

*Annandale After School Centre Inc.* has a duty of care obligation under the National Law and Regulations to ensure that a Responsible Person is on the premises at all times to ensure the health, safety and well-being, learning and development of all children at the service. This is to ensure that all legislative requirements are met.

## PROCEDURES:

### Selecting a Responsible Person

- Service supervisor certificates will not be issued to a particular person. From 1 June 2014, regulatory authorities granted a *service supervisor certificate* for each approved education and care service.
- Instead they may apply to any person working at the service who has been identified by the approved provider within the service as: responsible for the day-to-day management of the service or exercising supervisory and leadership responsibilities for part of the service.
- This person can be an approved provider, a nominated supervisor or an Educator who is in charge of the daily running of the Centre.

### The Approved Provider will ensure:

- **The Responsible person must have completed accredited Child Protection training.**
- The Responsible person must accept the position in writing.
- The name of the Responsible Person must be displayed clearly at the Centre near the entrance to the Centre.
- The staff record has the name of the responsible person at the service for each time that children are being educated and cared for by the service.
- A record which includes the name of the responsible person at the service for each time that children are being educated and cared for by the service.
- Understand that a Certified Supervisor placed in day-to-day charge of the Service does not have the same responsibilities under the National Law as the Nominated Supervisor (i.e. Coordinator)
- 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
- **The Responsible Person must be a Fit and Proper Person.**
- The Responsible Person has a minimum of 3 years working as an Educator in

an Education and Care service (Recommended but not compulsory)

**CONSIDERATIONS:**

<b>Education and Care Services National Regulations</b>	<b>National Quality Standard</b>	<b>Other Service policies/documentation</b>	<b>Other</b>
R 150 R 168 R 173 R 177	QA 4.1 QA 4.1.1  QA 7.1.5 QA 7.3.1 QA 7.3.5	Staff Handbook <ul style="list-style-type: none"><li>• Providing a Child Safe Environment Policy.</li><li>• Interactions with Children Policy.</li><li>• Governance and Management Policy</li><li>• Confidentiality Policy.</li><li>• OSHC Code of Professional Standards.</li></ul>	<ul style="list-style-type: none"><li>• Australian Children's Education &amp; Care Quality Authority (2014)</li><li>• Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2015</li></ul>

**ENDORSEMENT BY THE SERVICE:**

Approval date: \_\_\_\_\_

Date for Review: \_\_\_\_\_



# Diabetes Management Policy

## Policy Statement:

Annandale After School Centre is committed to providing a safe and healthy environment that is inclusive for all children, staff, visitors and family members that are diagnosed with diabetes. The aim of this policy and procedure is to minimise the risk of a diabetic medical emergency whilst at our Service, also ensuring that staff members are able to support the management of the illness. This policy applies to children, families, staff, management and visitors of the Service.

## National Quality Standard and Relevant Legislation:

Education and Care Services National Regulation	National Quality Standard	Other Service policies/documentation	Other
90 90(1) (iv) 91 92 93 94 95 96 168	2.1 2.1.2 2.2 2.2.1	<ul style="list-style-type: none"> <li>- Parent Handbook</li> <li>- Staff Handbook</li> <li>- Administration of first aid</li> <li>- Incident, illness, Accident &amp; Trauma</li> <li>- Medical Conditions</li> <li>- Supervision</li> </ul>	<ul style="list-style-type: none"> <li>- Guide to the National Quality Standard.</li> <li>- Australian Children’s Education &amp; Care Quality Authority.</li> <li>- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations</li> <li>- ECA Code of Ethics.</li> <li>- Staying Healthy in Child Care. 5<sup>th</sup> Edition</li> <li>- Care of Young Children With Diabetes in the Child Care Setting: A Position Statement of the American Diabetes Association <a href="http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/ps-care-of-young-children-with-diabetes-in-child-care-setting.pdf">http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/ps-care-of-young-children-with-diabetes-in-child-care-setting.pdf</a></li> <li>- As 1 Diabetes - <a href="http://as1diabetes.com.au/">http://as1diabetes.com.au/</a></li> </ul>

## Implementation

### **Coordinator/Nominated Supervisor Will Ensure:**

- Parents/guardians of an enrolled child who is diagnosed with diabetes are **provided with a copy of the Diabetes Management Policy** and the Medical Conditions.

- All staff members, including volunteers, are provided with a copy of the Diabetes Management policy along with the Medical Conditions Policy that is reviewed annually.
- A copy of this policy is provided and reviewed during each new staff member's induction process.
- All staff members have completed first aid training approved by the Education and Care Services National Regulations at least every 3 years and is recorded, with each staff members' certificate held on the Service's premises.
- When a child diagnosed with diabetes is enrolled, all staff attend regular training on the management of diabetes and, where appropriate, emergency management of diabetes.
- At least one staff member who has completed accredited training in emergency first aid is present in the Service at all times whenever children with diabetes are being cared for in the Service.
- There is a staff member who is appropriately trained to perform finger-prick blood glucose or urinalysis monitoring and knows what action to take if these are abnormal.
- The family supplies all necessary glucose monitoring and management equipment.
- A Medical Conditions Risk Minimisation plan is completed for each child diagnosed, outlining procedures to minimise the risks involved. The plan will cover the child's known triggers and where relevant other common triggers which may lead to a Diabetic emergency.
- All staff members are trained to identify children displaying the symptoms of a diabetic emergency and location of the Diabetic Management Plan as well as the Emergency Management Plan.
- All staff, including casual and relief staff, are aware of children diagnosed with diabetes attending the Service, symptoms of low blood sugar levels, and the location of diabetes management plans and emergency management plans.
- Each child with type-1 diabetes has a current individual Diabetes Management Plan prepared by the individual child's diabetes medical specialist team, at or prior to enrolment.
- The child's Diabetes Management Plan is signed by a Registered Medical Practitioner and inserted into the enrolment record for each child. This will describe any prescribed medication for that child as well as the emergency management of the child's medical condition.
- Before the child's enrolment commences, the family will meet with the Service and Educators to begin the communication process for managing the child's medical condition in consultation with the registered medical practitioners instructions.
- A communication plan is developed for staff and parents/guardians encouraging ongoing communication between parents/guardians and staff regarding the management of the child's medical condition, the current status of the child's medical condition, this policy and its implementation within the Service prior to the child starting at the Service.
- Individual Diabetes Management and Emergency Medical Management Plans will be displayed in key locations throughout the Service.

- A staff member accompanying children outside the Service, including delivery to and collection from school, carries the appropriate monitoring equipment, any prescribed medication, a copy of the Diabetes Management and Emergency Medical Management Plan for children diagnosed with diabetes, attending excursions and other events.
- The programs delivered at the Service are inclusive of children diagnosed with diabetes and that children with diabetes can participate in all activities safely and to their full potential.
- All staff and volunteers at the Service are aware of the strategies to be implemented for the management of diabetes at the Service in conjunction with each child's Diabetes Management Plan.
- Updated information, resources and support is regularly given to families for managing childhood diabetes.
- That no child diagnosed with diabetes attends the Service without the appropriate monitoring equipment and any prescribed medications.
- Availability of meals, snacks and drinks that are appropriate for the child and are in accordance with the child's Diabetes Management plan at all times.
- **The medical management plan of each child will be reviewed with the parents when required by the child's medical practitioner.**

### **Educators Will:**

- Read and comply with this Diabetes Management Policy and the Medical Conditions Policy.
- Know which children are diagnosed with diabetes, and the location of their monitoring equipment, Diabetes Management and Emergency Plans and any prescribed medications.
- Ensure an appropriately trained staff member will perform finger-prick blood glucose or urinalysis monitoring and will take action 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.
- 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 Service.

- Follow the strategies developed for the management of diabetes at the Service.
- Follow the Risk Minimisation Plan for each enrolled child diagnosed with diabetes.
- Ensure a copy of the child's Diabetes Management Plan is visible and known to staff in a Service.
- Take all personal Diabetes Management Plans, monitoring equipment, medication records, Emergency Management Plans and any prescribed medication when delivering or collecting the child from school, as well as on excursions and other events outside the Service.
- Recognise the symptoms of a diabetic emergency, and treat appropriately by following the Diabetes Management Plan and the Emergency Management Plan.
- Ensure a suitably trained and qualified Educator will administer prescribed medication if needed according to the Emergency Medication Management Plan in accordance with the Service's Administration of Medication Policy.

- Identify and where possible minimise possible triggers as outlined in the child's Diabetes Management Plan and Risk Minimisation Plan.
- Ensure that children with diabetes can participate in all activities safely and to their full potential.
- Increase supervision of a child diagnosed with diabetes on special occasions such as excursions, incursions, parties and family days.
- Regularly check and record the expiry date of the prescribed medication relating to the medical condition.
- Provide information to the service community about resources and support for managing childhood diabetes.
- Ensure there are glucose foods or sweetened drinks readily available to treat hypoglycaemia at all times (low blood glucose), e.g. glucose tablets, glucose jellybeans, etc.

### **Families Will Ensure:**

- Details of the child's health problem, treatment, medications and allergies are provided including; their doctor's name, address and phone number, and a phone number for contact in case of an emergency.
- A Diabetes Care Plan and Emergency Medical Plan following enrolment and prior to the child starting at the Service which should include:
  - a) When, how and how often the child is to have finger-prick or urinalysis glucose or ketone monitoring
  - b) What meals and snacks are required including food content, amount and timing
  - c) What activities and exercise the child can or cannot do
  - d) Whether the child is able to go on excursions and what provisions are required.
  - e) What symptoms and signs to look for that might indicate hypoglycaemia (low blood glucose) or hyperglycaemia (high blood glucose)
  - f) What action to take including emergency contacts and what first aid to implement
  - g) An up to date photograph of the child
- Develop an individual Medical Conditions Risk Minimisation Plan in conjunction with Service staff.
- A copy of the child's Diabetes Management Plan and an Emergency Medication Management Plan developed and signed by a Registered Medical Practitioner for implementation within the Service.
- The appropriate monitoring equipment needed according to the Diabetes Management Plan.
- An adequate supply of emergency medication for the child at all times according to the Emergency Management Plan.
- Information and answering any questions regarding their child's medical condition.
- Any changes to their child's medical condition and provide a new Diabetes Management Plan in accordance with these changes.

- All relevant information and concerns to staff, for example, any matter relating to the health of the child.

## **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).
- 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 of the correct food, unaccustomed exercise or a missed meal.

In a medical emergency involving a child with diabetes, the Service staff should immediately dial 000 for an ambulance and notify the family in accordance with the Regulation and Guidelines on Emergency Procedures, and administer first aid or emergency medical aid according to the child's Diabetes Management or Emergency Plan.

# Emergency & Evacuation

## POLICY STATEMENT

*Annandale After School Centre* will provide an environment that ensures the safety and wellbeing of the children at all times (*"My Time, Our Place"* 1.1, 3.1). All children and educators will be aware of, and practised in emergency and evacuation procedures. In the event of an emergency, natural disaster or threats of violence these procedures will be immediately implemented. In implementing drills of emergency procedures with children, educators will encourage children to discuss possible scenarios where emergency procedures may be required and support children to come up with solutions and ideas for improving the procedures or discussing ways to avert emergency situations (*"My Time, Our Place"* 4.2).

Emergency, in relation to an education and care service, means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the education and care service;

Examples. Flood, Fire or A situation that requires the education and care service premises to be locked down.

## PROCEDURE

- A risk assessment will be conducted by educators and management annually to review and refine emergency procedures and to assess potential emergencies relevant to the service in accordance with National Regulations.
- Emergency evacuation procedures and floor plans will be clearly displayed in a prominent position near the main entrance and exit of each room used by the service.
- All educators, including relief staff, will be informed of the procedures and their specific duties identified in their orientation to the service. Educators will decide as to duties undertaken in the absence of other educators.
- Educators will discuss the emergency procedures with the children and the reasons for practising the drills prior to each emergency drill being undertaken. Following each drill, children should be reassured and their suggestions and comments welcomed for how the drill might be improved to provide them with a sense of control and understanding.
- Children and educators will practice the emergency procedures every 3 months in accordance with National Regulations.
- All emergency drills will be recorded with date, time and length of time it took to leave building. Additional comments or recommendations for improvements can also be included in the record. [https://networkofcommunityactivities.org.au/wp-content/uploads/2019/09/Emergency\\_Evacuation\\_Rehearsal\\_Record.pdf](https://networkofcommunityactivities.org.au/wp-content/uploads/2019/09/Emergency_Evacuation_Rehearsal_Record.pdf)
- Drills will be conducted more regularly when there are new children such as at the beginning of a new year and during vacation care.



- Families will be informed of the procedures and assembly points in the parent handbook.
- No child or educator is to go to their bags to collect personal items during an emergency evacuation. This would lead to confusion and delays.
- The service will maintain a fire blanket and smoke detectors and have them checked regularly as per the manufacturer instructions.
- Fire extinguishers will be installed and maintained in accordance with Australian Standard 2444. Educators will be instructed in their operation.
- Educators will only attempt to extinguish fires if the fire is small, there is no threat to their personal safety and they feel confident to operate the extinguisher and all the children have been evacuated from the room.
- Educators should be aware of bush fire danger and if relevant have appropriate training on the necessary procedures. **SERVICES IN BUSH FIRE PRONE AREAS MUST HAVE A PLAN.**  
[https://www.rfs.nsw.gov.au/\\_data/assets/pdf\\_file/0003/36597/GetReadyforABushFire.pdf](https://www.rfs.nsw.gov.au/_data/assets/pdf_file/0003/36597/GetReadyforABushFire.pdf)
- The Local Fire Authority should be contacted for advice and training on fire safety and this plan included in your procedures.
- Any serious incidents will be reported to the Regulatory Authority within 24 hours or as soon as possible.
- The service must ensure that they have access to a working telephone or other similar means of communication at all times.

**The evacuation plan will include:**

- Routes of leaving the building that are suitable for all ages and abilities. These should be clearly mapped out.
- Plan of where the fire extinguishers are located displayed in a public place.
- A safe assembly point away from access of emergency services.
- An alternative assembly area in case the first one becomes unsafe.
- List of items to be collected and by whom.
- List of current emergency numbers.
- Each educator's duties in the emergency.

**Educators will be nominated to:**

- Make the announcement to evacuate, identifying where and how.
- Collect children's attendance records and families contact numbers.
- Collect emergency services numbers and mobile phone.
- Make the phone call to 000 or other appropriate service, management and families as required.
- Collect the first aid kit.

- Check that the building and playground is empty and that all doors and windows are closed as far as possible, to reduce the spread of a fire.
- Supervise the children at the assembly area, and take a roll call of children, educators and any volunteers or visitors.
- When the emergency service arrives, the Responsible Person will inform the officer in charge of the nature and location of the emergency and if there is anyone missing.
- No one should re-enter the building until the officer in charge has said it is safe to do so.

## **HARASSMENT AND THREATS OF VIOLENCE**

If a person/s known or unknown to the service harasses or makes threats to children or educators at the service, or on an excursion, educators will:

- Calmly and politely ask them to leave the service or the vicinity of the children.
- Be firm and clear and remember your primary duty is to the children in your care.
- If they refuse to leave, explain that it may be necessary to call the police to remove them.
- If they still do not leave, call the police.
- If the Responsible Person is unable to make the call another educator should be directed to do so. Educators should liaise with team members in advance to determine a code phrase that will alert another team member to a threat situation arising and prompt them to contact police. This should be something that will not draw attention to the situation by the offender and something only the staff are aware of, for example 'please put the PlayStation on for the children' as only staff will know that the service does not actually have one.
- Where possible, educators must endeavour to calmly move the children away from the person and this may be achieved quickly with the use of another code phrase that will encourage word of mouth transmission between children to move quickly from the area and initiate lockdown procedure without causing them alarm (as an example, the reminder to a child that ice cream is being served today at a specified location for all children).
- No educator should attempt to physically remove the unwelcome person, but try to remain calm and keep the person calm as far as possible and wait for the police.
- Educators should be aware of any unfamiliar person on the premises and find out what they want as quickly as possible and try to contain them outside the service.

## **LOCKDOWN**

- If lockdown needs to be called, educators and children will remain in the building they are in, if safe to do so, or move to the closest useable building directed by the staff.
- Staff will lock doors and windows and move children away from window and visible points of the building.
- All lockdown areas will remain locked until the responsible person calls and all clear.
- A roll call is initiated to make sure all children are accounted for.

- Lockdowns may also be called for adverse weather if the responsible persons deem necessary.

## CONSIDERATIONS

Education and Care Services National Law & Regulations	National Quality Standards & Elements	Links to other Service Policies	Other Documentation/ Evidence
S167, 170, 171, 174  R85, 86, 87, 89, 97, 98, 99, 100, 175, 176	Standard 2.1, 2.2  Elements 2.1.2, 2.2.1, 2.2.2	<ul style="list-style-type: none"> <li>• Providing a Child Safe Environment Policy</li> <li>• Excursion Policy</li> <li>• Authorisations and Refusals Policy</li> <li>• Delivery and Collection of Children Policy</li> <li>• Administration of First Aid Policy</li> <li>• Risk Assessment Policy</li> </ul>	<ul style="list-style-type: none"> <li>• My Time, Our Place Framework</li> <li>• Work, Health and Safety Act (2011).</li> <li>• Parent Handbook</li> <li>• Staff Handbook</li> <li>• Emergency Evacuation Plans</li> <li>• Record of drills</li> <li>• Report of serious incidents to ACECQA</li> </ul>

# Emergency Procedures

## POLICY STATEMENT

We aim to provide an environment that provides for the safety and wellbeing of the children at all times. All children and staff will be aware of, and practiced in, emergency and evacuation procedures. In the event of an emergency, natural disaster or threats of violence these procedures will be immediately undertaken. Emergency, in relation to an education and care service means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at the education and care service. Examples, Flood, Fire or A situation that requires the education and care service premises to be locked down.

## CONSIDERATIONS

Regulations 97, 168(2)(e)  
National Quality Standard 2.3  
Occupational Health and Safety  
Australian Standards  
Network's 'Fire Safety Guidelines'

## PROCEDURE

- Emergency evacuation procedures will be clearly displayed near the main entrance and exit of each room used by the Centre.
- All staff, including relief staff, will be informed of the procedure and their specific duties identified in their orientation to the Centre. Staff will make arrangements as to duties undertaken in the absence of other staff.
- Children and staff will practice the emergency procedure at least once per term.
- Drills will be conducted more regularly when there are new children.
- No child or staff member is to go to their lockers or bags to collect personal items during an emergency evacuation. This would lead to confusion and delays.
- Fire extinguishers will be installed and maintained in accordance with Australian Standard 2444. Staff will be instructed in their operation.
- Staff will only attempt to extinguish fires if the fire is small, there is no threat to their personal safety and they feel confident to operate the extinguisher and all the children have been evacuated from the room.
- The Centre will install and maintain a fire blanket and smoke detectors.
- The NSW Fire Brigade Child Safety Unit should be contacted for advice and training on fire safety.
- A copy of Network's 'Fire Safety Guidelines' should be readily available and recommended procedures followed.
- The service must ensure that they have access to a working telephone or other similar means of communication at all times.
- The evacuation plan will include:
  - Routes of leaving the building suitable for all ages and abilities. These should be clearly mapped out.
  - Plan of where the fire extinguishers are located displayed in a public place.

- A safe assembly point away from access of emergency services.
- An alternative assembly area in case the first one becomes unsafe.
- List of items to be collected and by whom.
- List of current emergency numbers.
- Staff duties in the emergency.
- Staff members will be nominated to:
  - Make the announcement to evacuate, identifying where and how.
  - Collect children's attendance records and parents' contact numbers.
  - Collect emergency services numbers.
  - Make the phone call to 000 or other appropriate service, management and parents as required.
  - Collect the first aid kit.
  - Collect children's medications for asthma, anaphylaxis etc.
  - Check that the building and playground is empty and that all doors and windows are closed as far as possible, to reduce the spread of a fire.
  - Supervise the children at the assembly area, and take a roll call of children, staff and be aware of any visitors.
- When the emergency service arrives the Coordinator will inform the officer in charge of the nature and location of the emergency and if there is anyone missing.
- No one should re-enter the building until the officer in charge has said it is safe to do so.

# ENROLMENT AND ORIENTATION

## POLICY STATEMENT

Annandale After School Centre accepts enrolments to the service for preschool and primary school age children in accordance with funding priorities and guidelines. An orientation process is in place for children and their families. The purpose of this is to:

- Enable educators/staff to meet and greet children and their families
- Provide essential operational information
- Form the foundation for a successful and caring partnership between home and the service.
- To help children develop a sense of belonging, feel accepted, develop attachments and trust those who care for them (“My Time, Our Place”, Outcome 1).
- To develop an understanding of themselves as significant and respected, and feel a sense of belonging. (“Belonging, Being and Becoming: The Early Years Learning Framework”

## CONSIDERATIONS

National Quality Standard Quality Areas 6.1, 7.3

National Regulations 158, 159, 160, 161, 162, 168, 177, 183

Network *Record Keeping* Fact Sheet

Child Care Service Handbook (DEEWR)

A New Tax System (Family Assistance) Act 1999

Child Care Management System

## PROCEDURES

### (a) Eligibility

Access and eligibility will be subject to the Priority of Access Guidelines set down by the Department of Education, Employment and Workplace Relations (DEEWR), these are:

- Priority 1 – a child at risk of serious abuse or neglect
- Priority 2 – a child of a single parent who satisfies, or of parents who both satisfy, the work, training, study test under section 14 of the *A New Tax System (Family Assistance) Act 1999*
- Priority 3 – any other child

Within these main categories priority should also be given to the following children:

- Children in Aboriginal and Torres Strait Islander families
- Children in families which include a disabled person
- Children in families on low incomes
- Children in families from culturally and linguistically diverse backgrounds
- Children in socially isolated families
- Children of single parents.

As well as the above, the service policy is that children must be enrolled in the Preschool or Primary school in order to be eligible to attend the service.

### (b) Inclusion of children additional needs

Provision of places for children with additional needs will be made wherever possible, with a regular review period. Access to care will focus on the needs of the child and the

service's ability to meet these needs. Ongoing arrangements will be at the discretion of the Nominated Supervisor in consultation with parents and centre staff.

### **(c) Waiting list**

Where demand for care exceeds the service's number of approved places, families will be placed on the service's waiting list. When completing waiting list details families will be advised of the Priority of Access Guidelines.

Waiting lists will be refreshed annually by mail. A request for updating family details and contact numbers will be sent to each family on the waiting list. If the service does not receive an updated reply by mail and the form is not returned to the service, families will be removed from the list, as it is presumed the family is no longer requiring care.

### **(d) Enrolment**

#### **ENROLLING INTO THE SERVICE**

When a position is available the family will be contacted and an offer of care will be sent to the family.

#### **Before a child can attend care:**

1. An enrolment record must be completed for each child/ren.
2. The enrolment record must contain all details outlined in Regulations 160, 161 and 162 which includes but is not limited to personal, medical, and custodial details for each child, parent/guardian and emergency contacts along with any special requirements relating to that child.
3. All forms and documentation relating to the child's care for e.g., 'Risk Management Plans' must be completed.
4. Registration must be paid (Bond and Administration Fees).
5. The coordinator will go through the enrolment process with families prior to starting care to ensure all details are completed and understood. If an individual is having difficulties filling out the enrolment form an enrolment interview can be requested. If required, this can be organised in the families first language.

Enrolment details are to be updated annually and when there are changes to a family's circumstances. Families are advised that it is their responsibility to notify staff of any changes to current details on their enrolment form.

#### **CCS**

It is a requirement under Family Assistance Law for all children who attend child care to have an enrolment notice lodged with the Department regardless of their Child Care Subsidy eligibility status.

There are four steps to enrol a child into the Child Care Subsidy system

#### **1. The parent or guardian makes a claim for Child Care Subsidy with Centrelink**

Families need to create or access their Centrelink online account via [www.my.gov.au](http://www.my.gov.au) to lodge a Child Care Subsidy Claim for their child. Where possible parents or

guardians should start the claim process before enrolling their child into the service. Centrelink will check and confirm the eligibility of the individual and child for Child Care Subsidy.

## **2. The provider Annandale After School Centre and individual (family) agree on arrangement for care of a child**

The only type of arrangement that can enable families to receive Child Care Subsidy is called a 'Complying Written Arrangement'. A Complying Written Arrangement is an agreement to provide care in return for fees. An agreement of the sessions and fees that your child is booked into care must be signed by a parent/guardian and recorded, in either hardcopy (paper) or electronic form and kept by Annandale After School Centre.

## **3. The provider Annandale After School Centre submits an enrolment notice**

Once the provider Annandale After School Centre has arranged with an individual (family), a new enrolment notice is created with the Department

## **4. The individual (family) confirms the enrolment**

After the provider Annandale After School Centre submits an enrolment notice for a child, the individual (family) will be notified and asked to review and check the enrolment notice details. This will occur through their Centrelink online account (or Express Plus mobile app), accessed via myGov at [www.my.gov.au](http://www.my.gov.au). Where an individual cannot access myGov, they can confirm their enrolment over the phone with Centrelink, or by visiting a Centrelink office. Annandale After School Centre will be notified through our software when the enrolment has been confirmed.

### **Shared care / Separated families**

If a child's parents are separated, and either individual (or their new partners) are liable for part of the cost of the child's child care fees, each individual will need to enrol their child into the centre and make their own claim for Child Care Subsidy to Centrelink.

Each parent will;

- need to agree to their own 'Complying Written Arrangement' with Annandale After School Centre.
- be assessed separately for their entitlement to Child Care Subsidy, based on their income and activity levels, and
- be billed and invoiced individually for their share of care.

In all circumstances, including shared care arrangements, the allocation of 42 absences per financial year in which Child Care Subsidy can be paid relates to each child, not to each individual claimant.

Where families have separated after commencement of the Complying Written Arrangement, the parent who is the Child Care Subsidy claimant must notify Centrelink of this change in their circumstances.

Where the other parent who was not the Child Care Subsidy claimant wishes to receive Child Care Subsidy payments, they will be required to make their own claim, based on their individual income and activity levels.

If parents separate while care is being provided for their child under a single arrangement, they should advise Annandale After School Centre, (as well as



Centrelink) of the separation as soon as possible. Annandale After School Centre will create a new enrolment notice for the parent who was not previously the Child Care Subsidy claimant for the child, if that parent is taking on liability for the cost of some of the child care fees. Once parents have separated and have been separately assessed for Child Care Subsidy by Centrelink, entitlements will be calculated individually.

It is the responsibility of Annandale After School Centre to ensure that each child's attendances are submitted under the enrolment for the parent with whom they have an arrangement and who is liable for paying the fees for those sessions of care.

If parents do not inform Annandale After School Centre of their changed circumstances, then it is the parents' responsibility to resolve any disputes they may have regarding Child Care Subsidy payments and fees.

#### **(e) Attendance and enrolment records**

Accurate attendance records will be kept, which:

- Records the full name of each child attending the service
- Records the date and time each child arrives and departs
- Is signed on the child's arrival and departure by either:
  - the person who delivers or collects the child
  - the Nominated Supervisor or an educator (Regulation 158); and
- Meets the requirements of the Child Care Management System (CCMS)

An enrolment record for each child will be kept at the service which includes all details outlined in Regulations 160, 161 and 162.

#### **(f) Child's attendance once enrolled**

The service's responsibility for the child begins when placed in the staff's care by parent or guardian, or when they arrive from school for the afternoon session. If a child is to be absent on a day they are normally booked, the family must notify the service as soon as possible. The rules for Allowable Absences under CCS will be followed in relation to all absences.

If a child who is enrolled with the service, but is not on the Roll for a particular day, arrives at the service, the Nominated Supervisor, or other relevant staff member will be contacted immediately to see if the child has been booked in for the day.

If a child has not been enrolled, they must not be taken into care under any circumstances. In this case, please contact the school and/or child's parents (if possible) immediately.

#### **(g) Cancellation of enrolment**

The family may terminate care with notice of 2 weeks, if care is no longer required however notice must be provided via email or written notification. CCS guidelines will be followed once an enrolment is cancelled.

Cancellation of an enrolment may be initiated in two different situations:

- A parent/guardian advises the service that no further care needs to be provided
- The service identifies that care is no longer required or being provided. (*CCS Ending Enrolments*)

**(h) Confidentiality and storage of records**

Enrolment information will be kept in strict confidence according to the services Confidentiality Policy. All enrolment records will be kept in a safe and secure place and kept for the period of time specified in the Regulations (Regulations 158, 159, 160, 183).

**(i) Orientation**

Families who are enrolling their child for the first time will be advised of the Parent Handbook and the key policies for families prior to the child's first day at the service. If it is flagged that your child has a medical condition, then additional medical conditions policy will be provided to the family. (r91). Families should read this handbook so that their child is prepared for their first day at the service and to give them time to complete all relevant forms.

Parents should advise staff when they are greeted that it is their child's first day at the service and the staff member will introduce themselves and guide them through the sign-in/out process, check that all relevant forms and authorities have been signed and show them around the Centre. The parent will then meet with the Nominated Supervisor, who will answer any questions the parent may have. The staff member will introduce the child to the other children and engage them in an activity. The staff member will remain with the child until they are settled and comfortable in the new environment.

# Excursions

## POLICY STATEMENT:

Annandale After School Centre will plan excursions to extend the educational programming at the centre. Excursions are designed to allow children to explore their physical and social environment, including their local community, away from the Centre's premises. Parental permission will be sought for all excursions and each excursion will be carefully planned and the potential risks assessed. When planning excursions, educators will take into consideration experiences that encourage children to investigate ideas, solve problems and use complex concepts and thinking, reasoning, and hypothesising and to transfer and adapt what they have learned from one context to another.

## CONSIDERATIONS:

National Quality Standard Quality Area 2.3

National Regulations 100 – 102; 168

My Time, Our Place

Belonging, Being and Becoming: The Early Years Learning Framework

Health and Safety Policies

Transport Policy

## PROCEDURES:

Planned excursions will take into account:

- Children's ages, abilities and interests
- Ways to maximise the children's developmental experiences and opportunities to practice new skills
- Suitability of the venue
- Clothing and equipment required
- Travel arrangements

## RISK MANAGEMENT

A Risk Management Plan (RMP) must be prepared for each excursion. RMPs will include:

- The proposed route and destination for the excursion;
- Any water hazards;
- The transport to and from the proposed destination for the excursion;
- The number of adults and children involved in the excursion;
- The number of educators or other responsible adults required to ensure appropriate supervision. This number will be determined by taking into consideration the risks posed by the excursion and whether any adults with specialized skills are required;
- The proposed activities;
- The likely length of time of the excursion;
- The items that should be taken on the excursion, for example, first aid kit, mobile phone and a list of emergency contact numbers;

- Verbal instructions to children on appropriate behaviour expected whilst on excursions.

A sample Excursion Risk Management Plan can be downloaded from the ACECQA website:

<http://acecqa.gov.au/storage/Excursion%20risk%20management%20plan.pdf>

## POLICIES

The service's Health and Safety policies will be taken into consideration and implemented on excursions when necessary.

## PERMISSIONS

- Parents' permission must be obtained before any child is taken outside of the centre and specific permission is required for swimming. By signing the excursion permission form, the parent is authorising their child to attend the activities stated.
- Excursions to locations visited on a regular basis such as local parks may be undertaken without prior notice if parents of children in the group have given excursion permission. If an excursion is a regular outing, the authorisation is only required to be obtained once in a 12-month period. Once an initial risk assessment has been carried out for regular outings, risk assessments are not required for subsequent outings to the same place, unless there is a change to the place or venue.

## SUPERVISION

- Adequate numbers of educators to effectively supervise the children must be rostered on for excursions. Numbers of educators must take into consideration the ages and developmental stage of the children attending the excursion and be based on a risk assessment of the excursion.
- Head counts must be conducted regularly throughout the duration of the excursion.
- Children will carry identification on excursions that clearly states the name of the service and the contact phone number.
- An educator must inspect all public toilets before children use them. An educator and at least one other child must accompany any child when using a public toilet.
- When walking the children, one educator must lead the group, another to follow at the back, and the remaining educators spaced along the group, walking on the road side of the footpath.
- When crossing a road, a pedestrian crossing must be used if possible. If there is no pedestrian crossing, the safest way to cross the road must be determined. One educator must step out onto the road, and if necessary, stop traffic from both directions. The remaining educators then lead children across the road.

## INFORMATION AND EQUIPMENT

Information and equipment to be taken on excursions will include:

- A list of all children with relevant personal details and parent contact phone numbers.
- A list of emergency procedures and contact numbers.
- A first aid kit, including SPF 30+ broad-spectrum water resistant sunscreen.
- Any medication for children attending the excursion.
- A fully charged mobile phone.
- Other information/equipment noted on the Risk Management Plan.

## LOST CHILD

In the event that a child is lost during an excursion the well-being and safety of the other children in the group will be considered and at least one educator will remain with the group.

- Inform other educators in your group.
- Ask the children if they have seen the missing child recently.
- Reassure any child who may be upset.
- Search the premises.
- Check the meeting points.
- Ask the venue staff to begin a search and make an announcement over a loudspeaker if possible.
- Once initial checks have been undertaken and if the lost child has not been found, the Nominated Supervisor or another educator with a Supervisor Certificate will call the Police and the parents.

## TRANSPORTING CHILDREN TO/FROM EXCURSION

- Children are only permitted to travel to an excursion on any form of transport with written permission from a parent.
- If using public transport (such as bus, ferry, taxi, train, etc.) children must be effectively supervised at all times and never left unattended.
- In some circumstances where the site of the excursion is close to the centre, it will be appropriate for children and the staff to walk to the site.
- The decision to walk should be preceded by a risk assessment and the route should be determined consistent with the objective of ensuring the safety of educators and children.
- Public transport should be used for centre excursions, wherever appropriate.
- When using public or private transport it is important that each journey is risk assessed, for example, when travelling by bus:
  - o Ensure all bus operators hold appropriate licenses and insurance
  - o Ensure they provide correct facilities i.e. wheelchair access if applicable
  - o Ensure adequate adult supervision
  - o Ensure children display appropriate behaviour

## WATER SAFETY

The service recognises the risks posed by bodies of water. The service will ensure that every precaution is taken so that children are able to enjoy water-based activities safely. Risk assessments will be carried out for programmed water-based activities.

The Regulations do not specify a specific educator to child ratio for activities where water is a feature. The number of educators present is to be determined by a risk assessment of the proposed activity. It must also be noted that in sections 165, 167 and 169 of the National Law there are clear statements about adequate supervision. A range of factors shall determine the adequacy of supervision, including:

- Numbers, ages and abilities of the children
- Number and positioning of educators
- Each child's current activity
- Areas where children are playing, in particular the visibility and accessibility of these areas
- Risks in the environment and experiences provided to children
- Educators' knowledge of each child and each group of children, the experience, knowledge and skill of each educator.

## DEFINITION OF A BODY OF WATER

The service recognises the following locations are bodies of water:

- Swimming pools and /or water fun parks
- Wading pools
- Lakes
- Ponds
- The sea / ocean
- Creeks
- Dams
- Rivers
- Equipment used by the service that could contain 5cm or more of water and would allow a child to submerge both nose and mouth at the same time.

# Facilities, Equipment & Providing a Child Safe Environment

## POLICY STATEMENT

Annandale After School Centre provides an environment that ensures the safety, health and wellbeing of children at all times. The welfare and protection of all children is of paramount importance. Educators will maintain the premises and equipment, adhere to procedures regarding safe practices and operate in line with legislative requirements relating to child protective practices and the Education and Care Services National Regulations and Law. Educators and management are aware of their legal responsibility as Mandatory Reporters to take action to protect and support children they suspect may be at significant risk of harm. Educators will ensure that children are adequately supervised at all times and that every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury or trauma (National Quality Standards 2.3.1 & 2.3.2).

## CONSIDERATIONS

Regulations 82, 84, 85, 86, 87, 89, 103, 105, 107, 108, 109, 110, 114, 115, 155, 170, 176, 168.

National Quality Standard Quality Areas 2, 3, 4, 5, 7

NSW Children and Young Person's (Care and Protection) Act 1998

Commission for Children and Young People Act 1998

Child Protection (Prohibited Employment) Act 1998

Ombudsman Act 1974 (with relevant Child Protection Amendments)

NSW Department of Community Services Mandatory Reporting Guidelines

NSW Child Protection Interagency Guidelines (2006)

Legislation Amendment (Wood Inquiry Recommendations) Act 2009 No 13

Keep Them Safe – Information session/ overview participants manual 2009/ 2010

My Time, Our Place

Belonging, Being and Becoming: The Early Years Learning Framework

## PROCEDURES

### (a) Managing the Facility

- Security:
  - Only approved educators and management members will be given a key to access the building and equipment areas.
  - A key register will be maintained that indicates the person's receipt of the key, date received, and date returned on completion of employment or completion of term as member of Management. If the service is situated on a school site, service will adhere to key registry requirements of the school.
  - Extra keys will only be cut after agreement by the management and a record made of where they are.

- All monies and important documents will be kept in a lockable place and access will only be permitted by approved staff and management members.
  - Educators will ensure that the building is left in a secure manner before leaving and all windows, cupboards, safe, and other relevant areas are locked. All heating and lighting is off and all doors properly secured.
  - Educators will inform the police and the committee as soon as possible if there has been a break in to the service of any kind.
  - Educators will remain at the service until the police arrive or inform them of what to do.
- Buildings, Equipment and Maintenance:
    - Equipment will be chosen to meet the children's developmental needs and interests. There will be sufficient access to furniture, materials and developmentally appropriate equipment suitable for the education and care for each child.
    - Service premises and all equipment and furniture will be maintained in a safe, clean condition and in good repair at all times.
    - Children will be provided with adequate, developmentally and age-appropriate toilet, washing and drying facilities. These will enable safe use and convenient access by children.
    - There must be no damaged plugs, sockets, power cords or extension cords.
    - All plug sockets shall be maintained as child safe.
    - Electrical appliances shall be in good working order.
    - Electrical circuit breakers will be installed and be maintained.
    - Provision will be made in the budget for regular maintenance and repair work and for deferred costs of major capital repairs.
    - Management will develop a list of fully licensed and insured trades persons, which is made available to educators. This list will be reviewed on an annual basis.
    - All contractors should have their own public liability insurance.
    - The service and equipment will be regularly checked to ensure that they are in a good and safe condition, comply with relevant Australian Standards and have appropriate soft-fall surfacing maintained.
    - Equipment will be regularly washed and cleaned.
    - Recycled craft materials should be checked for potential hazards.
    - Educators should ensure safe handling of all tools if used as part of any activity.
    - Families will be encouraged to notify educators of any safety issues they observe.
    - Anything that requires maintenance is to be reported to the Nominated Supervisor as soon as possible.
    - Faulty equipment should be removed or protection placed around any dangerous building sites.
    - A maintenance book will be kept that records any maintenance that needs to be addressed.
    - The maintenance book will record;
      - Type of problem
      - Date that it was observed
      - Who notified the Nominated Supervisor and when?



- What was done to rectify the problem?
    - Date repaired
    - Tradesperson employed to repair the problem
  - For urgent repairs the Nominated Supervisor will organise a contractor to attend to the problem. The contractor will be chosen from a list that has been previously approved by the committee.
  - Non-urgent repairs will be recorded in the maintenance book. The Nominated Supervisor will note this in their report and bring it to the attention of management at the next meeting. Management and the Nominated Supervisor will organise to rectify the problem.
  - For major repairs a minimum of three quotes will be sought and reviewed by management who will make a decision on a further course of action. The Nominated Supervisor or someone with management control may obtain the quotes.
  - Maintenance reviews should be done as part of the Nominated Supervisor's report at each meeting.
  - The Nominated Supervisor will also give a review of works completed by any tradesman employed, for future reference.
  - It is the responsibility of management, once a problem has been raised, to ensure that it is rectified in the most efficient manner and that the service is safe for educators and clientele.
  - Should the service be considered unsafe or as being a health risk, then the service will be closed, after notice has been given to all relevant parties, until the problem has been rectified.
  - The service will have an appropriate number of first aid kits that are suitable to the ages and needs of the children attending. The first aid kit will be well stocked and be easily recognised and accessible at all times.
- Storage:
    - A storage system should be devised that ensures easy access and uncluttered storage of all equipment.
    - Storage areas will be cleaned and tidied at least twice a year or when seen as necessary.
    - Play equipment and toys should be easily accessible to all children during the operating hours of the centre.
    - Children will show respect for the equipment and be expected to pack equipment away that they have used to avoid trip hazards.
    - All equipment is to be neatly packed away at the end of each session.
    - Craft equipment will be stored in a separate area, children should ask permission before removing any craft equipment, such as paints and glues etc. which has not been set up by the staff.
    - All craft equipment is to be properly washed and cleaned before storage.
    - Where room permits, a separate storage area will be available for sporting and large outdoor equipment to prevent clutter.
    - All items such as cleaning materials, disinfectants, flammable, poisonous and other dangerous substances, tools, toiletries, first aid equipment, and medications should be stored in the designated secured area which is inaccessible to the children. Educators are

responsible to ensure that these areas remain secure and that they do not inadvertently provide access to these items.

- Kitchen and other refuse areas will be provided with lidded facilities that are cleaned and emptied daily.
  - Educators and management will ensure that all family records are kept in a nominated secure place, ensuring that records are kept confidential and not left accessible to others during the course of the daily operations.
- Ventilation, temperature and natural light:
    - All heating and cooling systems will be of good quality and checked regularly to ensure safety and reliability.
    - All heating and cooling systems and power cords will be kept in a safe area and away from children.
    - Educators will take individual needs and specific activities into account when ensuring that heating, ventilation levels are comfortable.
    - Should educators, children or families complain about the temperature in the service not being at a comfortable level, this matter will be drawn to the attention of management and steps will be made to address the problem.
    - Adequate ventilation will be provided at all times. Windows will be properly maintained to ensure easy opening and protection from bugs and insects.
    - Where activities involve toxic materials such as paints and glues, staff are to ensure there is adequate ventilation before undertaking the activity.
    - Windows are to be opened during operation of the service unless closed to protect from extreme weather conditions.
    - Natural light is considered to be most desirable. Provision of natural light areas will be enhanced as much as possible.
    - In areas made available for children's homework or other fine detail, natural light will be made available where possible and good overhead lighting provided.
    - Adequate light will be maintained both indoors and outdoors. A security light will be placed at the entrance to the service that clearly provides unobstructed view of the door and surrounding areas.
    - Outdoor lighting will be suitable so that parents, staff and children can enter and exit the building without any unsafe dark areas.
  - Pest Control:
    - Equipment and especially food items will be properly stored so as not to attract pests and vermin.
    - Refuse bins and disposal areas will be emptied and cleaned daily.
    - Kitchen, food preparation areas and storage will be cleaned and maintained daily.
    - All areas will be checked daily for any signs of pests or vermin.
    - Should any pests or vermin be identified then action should be taken to rid the centre of the problem by:

- Initially using non-chemical methods such as physical removal, maintaining a clean environment, and use of any non-chemical products.
- Low irritant, environmentally friendly sprays to be used minimally and only with adequate ventilation and preferably not in the presence of the children.
- Other methods such as the employment of a pest control company if deemed necessary by management where the above methods have failed.
- If urgent, the Nominated Supervisor may obtain a contractor from management list to address the problem.
- If non urgent, the Nominated Supervisor will bring the problem to the attention of management in their report and management will decide on the appropriate course of action.
- All parents will be notified of any use of chemicals.
- Any use of chemical products should only be conducted outside the hours of the children and educators' presence in the building.
- All action will be taken to remove the children, educators, families and visitors from the environment for as long as is safe and viable.

**(b) Managing the indoor and Outdoor Environment:**

- Indoor Environment:
  - The services indoor environment will be smoke free and no smoking notices will be prominently displayed.
  - The Nominated Supervisor will only enrol the number of children in the service, which can comfortably fit into the building space and in accordance with the National Regulations.
  - Where children are indoors for long periods due to weather conditions, special activities will be planned and other areas sought to disperse the group such as school halls and verandas.
  - Separate areas in the indoor environment will be provided for:
    - Signing children in/out of the centre.
    - Collection of fees, answering phones, and maintaining daily records.
    - Educators and parents to talk in confidence.
    - Children to store their bags and belongings.
    - Storage of equipment, food, dangerous materials, and family records.
    - Preparation of food and drinks.
    - Kitchen and other refuse.
    - Cleaning of equipment.
    - Male and female toilet, hand basins and hand drying facilities.
    - Creative and other activities.
    - Large and small group activities.
    - Display of children's activities and work.
    - Quiet space for children to retreat to, or do homework or lie down if unwell.
  - The indoor area is to be set up to allow children to participate in a variety of activities with easy access to equipment. Drawing paper and other materials will be made available to the children at all times.

- Easy access to areas should be maintained by making clear easily definable passageways and walkways through the building.
  - Staff will ensure that children properly store their bags and that bags and other items are not thrown into walkways or play areas.
  - All items obstructing areas are to be removed and placed in the correct storage areas.
  - Areas must be set up to ensure that proper supervision can be maintained at all times.
  - Access to the outdoor environment should be clear and easily accessible by the children and staff.
- **Outdoor Environment:**
    - The outdoor environment provides each child with at least 7 square metres of unencumbered outdoor space in compliance with National Regulation 108.
    - The outdoor environment will be smoke free and where possible, no smoking notices will be prominently displayed.
    - The outdoor space will be inspected daily for any obstacles or dangerous items and the hazard check will be recorded.
    - Any hazardous items will be disposed of in a safe and careful manner prior to the children playing in the area.
    - The outdoor space will be set up in a variety of ways to encourage participation.
    - Areas will be made available where children can play in large or small groups or by themselves.
    - Supervision should be properly maintained. Children are only to play in areas that are clearly visible to educators, and where child/educator ratios are maintained.
    - Clear boundaries shall be set and enforced.
    - When it is necessary to go outside the boundaries or line of supervision, an educator must accompany children.
    - Adequate shade via trees and coverings will be maintained.
    - As far as possible, activities will be set up in shaded areas.
    - Use of other outdoor venues will be considered where access to the area is safe, adequate supervision can be maintained, the area is considered of value to the children's physical development and personal comfort, and where adequate staff/educator ratios can be maintained.

**(c) Child Protective Practices**

- **MANDATORY REPORTING:**
  - A Mandatory Reporter is anybody who delivers services to children as part of their paid or professional work.
  - In OSHC services mandatory reporters are:
    - Educators that deliver services to children
    - Management, either paid or voluntary, whose duties include direct responsibility or direct supervision for the provision of these services.

- Educators are mandated to report to Community Services if they have current concerns about the safety or welfare of a child relating to section 23 of the NSW Children and Young Persons (Care and Protection) Act 1998
- Section 23 (1):
  - a-b) Child is at significant risk of harm – Neglect
    - a) Basic physical or psychological needs not being met or are at risk of not being met.
    - b) Families unwilling or unable to provide necessary medical care
    - b1) Families unwilling or unable to arrange for the child or young person to receive an education
  - c) Child is at significant risk of harm – Physical / Sexual abuse
  - d) Child is at significant risk of harm – Domestic violence
  - e) Child is at significant risk of harm – Serious Psychological harm
  - Child is at significant risk of harm – Prenatal report
- Educators will undergo training in relation to child protection and reporting as part of the training budget.
- Reports should be treated with strict confidentiality in adherence to the service's Confidentiality Policy and Procedures.
- Any educator who forms a belief based on reasonable grounds that a child is at risk of harm should discuss their concerns with the Nominated Supervisor and/or the Responsible Person in charge of daily operation as they may have information the educator is not aware of. The incident/s that lead the educator to form the belief should be recorded concisely, include as much detail as possible and be kept in a secure place to ensure confidentiality.
- The Nominated Supervisor/Responsible Person will then assist staff in completing the online Mandatory Reporters Guide (MRG) to determine whether the report meets the threshold for **significant** risk of harm (see point below for further information regarding the MRG).
- If directed by the MRG to report to Community Services, should report their concerns to the Child Protection Helpline:
  - Mandatory Reporters phone 132 111
- When reporting to the Child Protection Helpline, it is important to have as much information as possible available regarding the child/children involved and any specific incident details. This might include child's information, family information, reporter details and outcomes of the MRG.
- If the Nominated Supervisor has been advised to but has not reported to Community Services you are legally responsible to do so.
- Once a report is made to the Child Protection Helpline no further report needs to be made unless new information comes to hand.

- MANDATORY REPORTING GUIDE (MRG):
  - The MRG has been developed to help frontline mandatory reporters, including OSHC educators, determine whether the risk to a child or young person meets the new statutory threshold of 'risk of significant harm'. The MRG will guide the reporter on what action should be taken. The MRG is an interactive tool and is available online at <https://reporter.childstory.nsw.gov.au/s/mrg>.
  - If still in doubt the Community Services Helpline will provide feedback about whether or not the report meets the new threshold for statutory intervention.
  - If new information presents concerning the child or young person run the MRG tool again.
  - Where concerns do not meet the significant harm threshold, the MRG tool may guide you to 'Document and continue the relationship'. This requires the service to continue to support, provide services, and coordinate assistance and referral for the child and their family.
  - Regardless of the outcome of using the MRG, the family and child will require support and referral where possible.
  - The report page from the MRG should be printed and placed in the child/family file for future reference regardless of whether or not further action is recommended.
  
- INFORMATION EXCHANGE:
  - In order to provide effective support and referral it may be necessary to exchange information with other prescribed bodies including government agencies or non-government organisations and services.
  - The NSW Children and Young Persons (Care and Protection) Act 1998 has been amended (2009) to include chapter 16A Information Exchange
  - Chapter 16A requires prescribed bodies to take reasonable steps to coordinate decision making and the delivery of services regarding children and young people
  - Under Chapter 16 A NSW Children and Young Persons (Care and Protection) Act 1998, educators will exchange information that relates to a child or young person's safety, welfare or wellbeing, whether or not the child or young person is known to Community Services and whether or not the child or young person consents to the information exchange.
  - The information requested or provided **must** relate to the safety, welfare or wellbeing of the child. Information includes:

- A child or young person's history or circumstances
  - A parent or other family member, significant or relevant relationship
  - The agency's work now and in the past
  - Where information is provided in good faith and according to legal provisions, under section 29 & section 245G NSW Children and Young Persons (Care and Protection) Act 1998; reporters cannot be seen as breaching professional etiquette or ethics or as a breach of professional standards. There can be no liability for court action.
- WHERE A COMPLAINT IS MADE ABOUT AN EDUCATOR OR SOMEONE IN THE SERVICE:
    - Should an incident occur that involves a child being put at risk of harm from an educator, volunteer, trainee or person visiting the service, this is regarded as '**reportable conduct**' and necessitates such conduct being reported to the **Office of the Children's Guardian within 7 business day.**
    - Where the allegation is made to an educator or member of management the facts as stated will be recorded in writing, using an Incident Report template that includes dates, times, names of person/s involved, name of person making allegation and the person making the report. This report should be kept on record and treated as strictly confidential.
    - If the Nominated Supervisor or responsible person in charge is suspected then the service's management should be informed.
    - The relevant forms together with information and assistance are available on line at [www.kidsguardian.nsw.gov.au](http://www.kidsguardian.nsw.gov.au).
    - The person making the report should follow the advice of the Office of the Children's Guardian. Management will also follow this advice.
    - The matter will be treated with strict confidentiality.
    - For the protection of both the children and the educator involved, the educator should be encouraged to take special leave or be removed from duties involving direct care and contact with children, until the situation is resolved.
    - Support should be provided to all involved. This support can be given in the form of counseling or referral to an appropriate agency.
  - RECRUITMENT AND ORIENTATION OF STAFF:
    - All educators employed by the service including management, full time/part time and casual educators, volunteers and students will be subject to a Working with Children Check carried out by the NSW Commission for Children and Young People. Written approval from the prospective employee will be sought prior to this check being carried out. All employees and management will also complete a Prohibited Employment Form that will be kept on file.

- When the service engages a self-employed individual to provide services, the provider is required to provide a **Certificate for Self-Employed People**. This certificate ensures verification that the person employed is not banned by law from working with children.
- All staff will be informed of their responsibilities as a Mandatory Reporter as part of their orientation and induction process. This will involve discussion regarding their current understanding, use of this policy and resources and access to Child Protection training. Information related to sexual grooming will also be provided upon orientation and induction to ensure that staff are fully aware of the signs and limits related to appropriately interacting with children.



# Family Participation

## POLICY STATEMENT

We value the role of families in the children's lives, and value the diversity of forms and cultures they are made up of. Families are encouraged to take part in activities at the Centre, and to share their knowledge and culture for the benefit of the children

## CONSIDERATIONS

National Quality Standard Quality Area 6.1

## PROCEDURE

- Upon enrolment families will be asked if they have any skills or knowledge they would like to share with the children
- Families will be encouraged to share information with the children about their culture, career or any other suitable area of interest
- In consultation with the Co-coordinator, family members have the opportunity to deliver a talk, workshop or be involved in other ways that will be of benefit to the children
- Family members will be encouraged to be involved in programmed activities as part of significant days or special celebrations
- Family members with special knowledge, experience or insight of celebrations or special days will be encouraged to share information with staff and children as part of the program
- Apart from participation in the committee, families will have the opportunity to volunteer their time in other ways, such as helping with minor repairs or at sausage sizzles and other events

# FEES

## POLICY STATEMENT

Annandale After School Centre sets fees in accordance with its annual budget in order to meet the income required to develop and maintain a quality service for children and families. We strive to ensure that our service is affordable and accessible to families in our community. The Approved Provider ratifies the budget annually, or as necessary, and monitors it carefully throughout the year.

## CONSIDERATIONS

Child Care Management System  
Confidentiality and maintenance of records  
National Quality Standard Quality Area 7.3  
National Regulation 168  
National Regulation 172  
National Regulation 173

## PROCEDURES:

### (a) Bond

Upon being offered a place at the service, the family is required to pay \$50 as a security bond and two weeks in advance payment.

The bond secures a child's placement at the service, and is refundable at the termination of the child's place, provided that two weeks' notice in writing is given. The bond may be used to cover and/or settle your final account.

Where the Nominated Supervisor believes the bond may create hardship or unreasonable barrier to a family enrolling in the service, he/she may reduce or waive the bond.

### (b) Membership

The service is an Incorporated Association and as such, families enrolling their child in the service are bound by the rules of the Association for the period of the child's enrolment.

As a member of the Incorporated Association, one representative of the child's family is entitled to voting rights at any General Meeting held by the service and may be nominated (with consent) for a position on the Management Committee at the Annual General Meeting.

A non-refundable membership fee of \$15 per child is payable on an annual basis.

(c) Child Care Benefit

Most Australian families are eligible to receive Child Care Benefit. Families who are eligible for the Federal Government's Child Care Assistance subsidy will only be required to pay the daily gap fee applicable to their financial circumstances. To have CCB applied to their account, families must first register with the Family Assistance Office. In addition, the government provides an additional 50% tax rebate to families for out of pocket child care expenses via the Child Care Rebate (CCR). CCR is paid fortnightly either to the family or the service. The service encourages families to authorise the CCR to be paid directly to the service.

The service will provide families with information relating to Special Child Care Benefit, Jobs Education and Training, and Grandparents Child Care Benefit.

(d) Bookings and cancellations

Each family is expected to make bookings in advance, for the care sessions required. Bookings will only be accepted when families have completed the service's Enrolment Form in full.

Families wishing to cancel their child's place at the service are required to provide two (2) weeks written notice to the Nominated Supervisor, or they are liable to pay the equivalent of two weeks child care fees to the service.

(e) Absences

Fees are payable for family holidays and sick days if those days fall on a day that a child is booked into the service.

The service will provide families with information about approved and allowable absences and will adhere to the Child Care Management System (CCMS) in relation to absences.

(f) Service closure

No fee is charged while the service is closed over the Christmas/New Year period.

(g) Payment of Fees

Fees for permanent bookings must be paid once Invoiced, within the stated due date. Families will be provided with a statement of fees charged by the service will be provided to all families (Regulation 168).

Casual bookings must pay on the day of attendance.

Failure to pay unpaid fees may result in debt recovery action being taken and discontinuation of care for the child unless the family has initiated a repayment

schedule for the unpaid fees with the Nominated Supervisor.

(h) Debt recovery

The Approved Provider reserves the right to take action to recover debts owing to the service. This can include the engagement of debt collectors to recover the monies owed.

Where a family owes any overdue fees to the service, the child's place may be suspended, until all outstanding monies are paid, or both parties agree to a payment plan. Fees not paid by the due date will be followed up as below:

1. An initial letter or email stating fees are overdue will be sent 7 days after the fees due date, giving 10 working days for payment. A late fee of 10% of the overdue amount will be added to the invoice.
2. If payment is not received, families will be invited, by telephone, to attend a meeting with the Nominated Supervisor and Treasurer within 7 days to discuss a payment plan
3. Failure to attend the meeting and continued non-payment for a period of 5 working days will result in a second and final letter or email notifying the family that unless payment is made within 5 working days, or a payment plan entered into, the child will be unable to attend the service.
4. If a signed payment plan is not adhered to, a follow-up process will commence at point 2.
5. The Approved Provider will reserve the right to employ the services of a debt collector and the family will be responsible for all fees associated with recovering the debt.

(i) Late collection fee

The service operates till 6:00 pm during term time and school holidays. The Staff are unable to accept children in the service outside of these hours. Should children be present after the closing time, a late fee of \$1 per minute, per child will apply, with a minimum of \$10.

The hours and days of operation of the service will be displayed prominently within the service (Regulation 173).

In circumstances that are beyond the control of families, for example, weather and traffic accidents, which may result in them arriving late to collect their child, the Nominated Supervisor will have discretion to decide if families will be charged the late fee.

Families who are continually late collecting their children, without a valid reason, may jeopardise their child's place at the service. Should this be the case, the Nominated Supervisor will meet with the family to discuss this.

(j) Methods of Payment

Fees can be paid by:

- Direct Debit

- Cheque
- Cash

Families will be given a minimum of fourteen days' notice of any changes to the way in which fees are collected (Regulation 172).

(k) Confidentiality

All information in relation to fees will be kept in strict confidence. Members of staff, management or the Approved Provider will not discuss individual names and details openly. Information will only be available to the nominated persons required to take action, for example, to initiate debt recovery.

Families may access their own account records at any time, or particulars of fees will be available in writing to families, upon request.

(l) Increase of fees

The fees are set by the Approved Provider in order to meet the budget for each financial year. There will be ongoing monitoring of the budget and, should it be necessary to amend fees, families will be given a minimum of fourteen days' notice of any fee increase (Regulation 172).

(m) Acknowledgement of responsibility to pay fees

Families are required to read and sign the Enrolment Form to acknowledge that they agree to abide by the Centre's policies and are liable for the associated fees and charges.

## **Annandale After School Centre Inc. Fire Evacuation Procedure**

**Fire Evacuation Alarm is 3 whistle blows to alert staff and children to Evacuate from the building and head to assembly point**

**The Co-ordinator will ring 000 and calmly give:**

**Nature of emergency e.g. Fire, Intruder**

**Name of centre: Annandale After School Centre**

**Address: 25 Johnston Street Annandale**

**INDOOR SUPERVISOR COLLECT THE ROLL and EMERGENCY FIRE AND EVACUATION PACK and MOBILE TELEPHONE and I-PAD**

**All staff assist children to the evacuation assembly point:**

**Basketball court**

**(Alternative – Astro turf near the preschool)**

**Check that all staff and children are present.**

**Check the toilets. Check all rooms. Check kitchen.**

**Check all the cupboards.**

**The Co-ordinator will notify parents when children are settled and out of danger.**

**Staff and children may not enter the building until it is cleared and safe to do so.**

# Food and Nutrition

## POLICY STATEMENT

We aim to provide nutritious and varied food of good quality in the Centre. Children will be encouraged to develop good eating habits through good examples and education. Parents will be encouraged to share family and multicultural values and ideas to enrich the variety and enjoyment of food by the children. High standards of hygiene will be maintained throughout all food preparation.

## CONSIDERATIONS

National Regulation 168(2)(a)

National Regulation 78(1)(a)

Public Health Act

NRG@OOSH (Network of Community Activities)

## PROCEDURE

- Food and drink will be provided for afternoon tea, with small nutritious snacks available as necessary.
- Fresh drinking water will be available at all times for the children and staff.
- One staff member will ensure that this is available and topped up throughout the operation of the Centre.
- Children will be encouraged to get the water themselves when required, using separate drinking containers.
- All food provided at the Centre will be nutritious and varied.
- Where possible, local fresh produce will be used.
- A menu will be developed using the principles set out in the Australian Dietary Guidelines for Children and Adolescents.
- The menu will be displayed for families and children.
- Snack times are seen as a social event where children and staff can relax, talk about their day and experience a variety of foods. Staff will demonstrate good healthy and hygienic eating habits while with the children.
- Children should be seated while eating.
- Children and parents are encouraged to contribute to the menu ideas.
- Parents will be encouraged to share family and multicultural values, ideas and recipes.
- All family and multicultural practices will be acknowledged and addressed in the provision of food.
- All children's individual needs such as allergies etc. will be addressed (wherever practical) in the menus.
- Staff will keep a list of all children's allergies or food restrictions near the food preparation area to ensure all staff follow these.
- Education of healthy eating habits will be developed through ongoing example, specific activities, notices, posters and information sheets to parents.
- The denial of food will never be used as a punishment.

- Containers are to be cleaned and stored appropriately.
- Children's cooking activities will be encouraged to develop life skills. At all times safe and hygienic practices will be followed.
- Staff are encouraged to attend professional development on nutrition and food safety.
- To avoid potential problems with food allergies, food containing nut products are not served.
- The majority of food will be from the five food groups (grains, cereals, fruit and vegetables) with sweets and treats available only occasionally.

## **FOOD AND HYGIENE**

- All food will be prepared and stored in a hygienic manner.
- Where children are involved in food preparation, this should always be supervised and hygienic conditions will be maintained.
- Food will be stored in tightly sealed containers, away from any chemicals.
- Food requiring refrigeration will be stored in the refrigerator.
- Kitchen equipment is to be cleaned and stored appropriately.
- Staff and children wash hands thoroughly before preparing or serving food.
- Surfaces are cleaned before and after food preparation.
- All perishable foods are stored in the refrigerator.
- The Centre will regularly review and evaluate food handling and procedures.
- The Centre may arrange an external expert audits of food handling practices and make changes to practices as a result (if required).
- The outcome of such audits should be reported to the Management Committee and reported to parents to demonstrate the Centre's commitment to high standards of food handling and hygiene.
- The Centre prepares fresh food daily that is served to the children.
- Any food that has not been consumed is disposed of immediately in the school compost.
- The fridge and the pantry are checked weekly to make sure that any food that has expired is disposed of immediately any food that is nearing expiring will be rotated to the front to be used next.



# Gender Equity

## POLICY STATEMENT

We aim to help the children develop their full potential regardless of their gender. All children will be treated in the same manner and provided with the same access to all materials and equipment.

## CONSIDERATIONS

National Quality Standard Quality Area 4.2

National Quality Standard Quality Area 5.1

## PROCEDURE

- Staff shall accept and value every parent and child regardless of gender or ability.
- Staff are to be aware of the way in which they treat individual children in regards to language, attitudes, assumption and expectation, and will treat all children in the same manner, regardless of gender.
- Staff are to be aware of the way in which they treat individual parents and each other in regards to language, attitudes, assumption and expectation, and will treat all people in the same manner regardless of gender or lifestyle.
- The program will present positive experiences for the children, which are not based on gender role stereotypes.
- All children will be encouraged to try a variety of activities regardless of gender.
- Resource materials used in the Centre will as far as possible be non-stereotyped.
- Staff will provide a range of equipment, which is non-sexist and meets the needs of the children.
- Staff should act as positive role models encouraging children to be involved in activities commonly stereotyped for the opposite gender.
- Staff will be actively involved in a variety of activities regardless of gender.
- Every effort will be made to employ both male and female staff, relief staff and volunteers.

# GOVERNANCE AND MANAGEMENT

## POLICY STATEMENT:

Annandale After School Centre aims to provide a quality education and care service and will operate according to all legal requirements and recognised best practice in service management. We will ensure there are appropriate governance arrangements in place at all times (as per Quality Area 7.1.1). There will be ongoing process of review and evaluation and all relevant information will be readily available to stakeholders.

The governing document of the organisation will be the constitution that deals with the key legal requirements for running the organisation. A copy of the constitution will be readily available to all committee members to consult. New members will be given a copy of the constitution as part of their orientation.

For the purpose of Regulations the Management Committee is the Approved Provider.

The Management Committee as the Approved Provider will ensure that all aspects of governance and management are clearly articulated and complement the service Philosophy.

The Management Committee as Approved Provider will ensure that copies of the current policies and procedures required under Regulation 168 is available for inspection at the service at all times (as per Regulation 171).

## CONSIDERATIONS:

National Regulations 103, 168, 171, 172, 173, 177, 183 to 185  
National Quality Standard Quality Area 7.3

## RESPONSIBILITIES:

The responsibilities of the Approved Provider that cannot be delegated to any other person or body include:

- Compliance monitoring – ensuring compliance with the objects, purposes and values of the service, and with its constitution
- Organisational governance – setting or approving policies, plans and budgets to achieve those objectives, and monitoring performance against them
- Strategic planning – reviewing and approving strategic direction and initiatives
- Regulatory monitoring – ensuring that the service complies with all relevant laws, regulations and regulatory requirements
- Financial monitoring – establishing and maintaining systems of financial control, internal control, and performance reporting; reviewing the service's budget; monitoring management and financial performance to ensure the solvency, financial strength and good performance of the service

- Financial reporting – considering and approving annual financial statements and required reports to government;
- Organisational structure – setting and maintaining a framework of delegation and internal control
- Staff selection and monitoring – selecting, evaluating the performance of, rewarding and, if necessary, dismissing the staff. Delegate the functions of sub-committees, the Nominated Supervisor, and other staff.
- Risk management – reviewing and monitoring the effectiveness of risk management and compliance in the service; agreeing or ratifying all policies and decisions on matters which might create significant risk to the service, financial or otherwise
- Dispute management – dealing with and managing conflicts that may arise within the organisation, including conflicts arising between committee members, staff, members, or volunteers

The **Nominated Supervisor** is responsible for the day-to-day management of the service and to address key management and operational issues under the direction of, and the policies laid down by the Approved Provider, including:

- Developing and implementing organisational strategies and making recommendations to the Approved Provider on significant strategic initiatives;
- Making recommendations for the appointment of staff, determining terms of appointment, evaluating performance, and developing and maintaining succession plans for staff;
- Having input into the annual budget and managing day-to-day operations within the budget;
- Maintaining an effective risk management framework;
- Keeping the Approved Provider and Regulators informed about any developments that may impact on the organisation's performance

## PROCEDURES:

This policy will encompass the following:

- Philosophy and policies
- Financial management
- Facilities and environment
- Equipment and maintenance
- Review and evaluation of service
- Records management
- Work, Health and Safety

### (a) **Philosophy and policies**

- The development and review of the Philosophy and policies will be an ongoing process.
- The philosophy and associated statement of purpose will underpin all other documentation and the practices of the service and will reflect the principles of the approved National Framework for School aged Care “My Time, Our Place”

and the “Belonging, Being and Becoming: The Early Years Learning Framework”. There will be a collaborative and consultative process to support the development of the philosophy that will include children, parents and Educators. The statement of Philosophy will be included in the Quality Improvement Plan for the service. The statement of purpose will define how the statement of philosophy will be implemented in the service.

- Policies and procedures will provide clear documentation that will define agreed and consistent ways of doing things to achieve the stated outcomes.
- The Management Committee as Approved Provider will ratify the Philosophy and the policies. Policies can only be altered by the Approved Provider and the changes minuted as a record.
- All documents will be dated and include nominated review dates.
- There will be a comprehensive index for the service policies as it is likely that some policies may address several aspects of operational practice.
- The service philosophy and policies will be available for all stakeholders and there will be reference to this in parent and staff handbooks and general service information.

#### **(b) Financial management**

- The Approved Provider will be responsible for developing and overseeing the budget of the service and for ensuring that the service operates within a responsible, sustainable financial framework.
- In line with this responsibility the Management Committee will conduct a budget planning meeting each year as part of its annual business planning. The details of budgeting and fee setting are set out under the Fee Policy.
- Financial reporting including an income and expenditure statement and balance sheet will be presented to the Management Committee on a regular basis and the opportunity provided to ask questions or seek further advice from any Management Committee member.

#### **(c) Facilities and environment**

- The Management Committee will ensure regulations 103–115 relating to the physical environment required for an OSHC service are maintained at all times.
- In the event of the relocation of the site the Management Committee will ensure that the requirements of the regulations are considered if and when site re-arrangements are proposed.
- Work, Health and Safety implications will be considered by the Management committee in relation to educators locking up and leaving the service at the end of the day and risk assessments of the practices will be undertaken.

#### **(d) Equipment and maintenance**

- Appropriate equipment and furniture, to meet the needs of the children and educators, will be well maintained and safe.
- Processes will be in place for routine cleaning of toys and equipment.

#### **(e) Review and evaluation of the service**

- Ongoing review and evaluation will underpin the continuing development of

the service. The Management Committee will ensure that the evaluation involves all stakeholders, especially families, children and educators/staff.

- The development of a Quality Improvement Plan (QIP) will form part of the review process. Reflection on what works well and what aspects of the service need further development will be included in the QIP and discussed at meetings of the Management Committee.

#### **(f) Confidentiality**

All members of the Management Committee will maintain confidentiality. This is addressed in the Confidentiality Policy.

#### **(g) Maintenance of records**

- Regulation 177 outlines requirements and includes references to records that services must keep. Regulations 183–184 detail storage of records.
- The service has a duty to keep adequate records about staff, families and children in order to operate responsibly and legally. The service will protect the interests of the children and their families and the staff, using procedures to ensure appropriate privacy and confidentiality.
- The Approved Provider assists in determining the process, storage place and time line for storage of records.
- The service's orientation and induction processes will include the provision of relevant information to staff, children and families.
- Clear guidelines on who will have access to which particular records will be given to committee members, educators and families. These will be available at all times at the service.
- The Approved Provider will need to ensure that the record retention process meets the requirements of the following government departments:
  - Australian Tax Office (ATO)
  - Family Assistance Office (FAO)
  - Department for Education, Employment and Workplace Relations (DEEWR)
- In the event of ceasing to operate, the service Management Committee will identify where the records will be kept and seek professional advice on the winding up of the service
- A list of nominated contacts for Child Care Management System, Australian Taxation office and Superannuation funds, as well as any other accounts, will be maintained and available to all members of the Management Committee. These contacts will be reviewed annually and updated as contacts change to ensure currency in communication for effective governance.

#### **(h) Work, Health and Safety**

- Policies and procedures will be in place to address the legal requirements relating to safety in the workplace and this information should underpin any service specific requirements, including grievance/complaints procedures.
- The nominated supervisor will report back to the Management Committee on any Work, Health and Safety issues as they arise.
- All committee members will be provided with information to assist them in meeting their obligations under the legislation

# Hazardous Materials

## POLICY STATEMENT

We aim to provide an environment that is safe with no risk to the health and wellbeing of the children, staff or parents. We will ensure that all activities undertaken while the service is in operation will not be potentially hazardous and that all hazardous materials will be stored appropriately.

## CONSIDERATIONS

National Standards Section 2.9.5 (Building cleanliness, maintenance and repairs)

Occupational Health and Safety Act

National Quality Standard Quality Area 2.1

## PROCEDURE

- Hazardous machinery, chemicals and activities which are likely to cause potential danger to children, staff or others in the Centre will not be used or undertaken while the service is in operation.
- Should any pests or vermin be identified then action should be taken to rid the Centre of the problem by initially using non-chemical methods such as physical removal, maintaining a clean environment, and use of any non-chemical products.
- Low irritant, environmentally friendly sprays to be used minimally and only with adequate ventilation, and preferably not in the presence of the children.
- Aerosol cans such as spray paints etc. used for specific activities will only be used outside in a well-ventilated area.
- All staff will be made aware on initial orientation in the Centre, of any potentially dangerous products, which may pose a danger to the children and where these are stored.
- All relief staff will also be made aware of the products and where they are stored.
- All potentially dangerous products such as cleaning materials, disinfectants, flammable, poisonous and other dangerous substances, tools, toiletries, first aid equipment, and medications will be stored in the appropriate containers, clearly labeled and stored in the designated secured area which is inaccessible to the children.
- Safety Data Sheets (SDS) will be accessible for all cleaning and hazardous chemicals stored on the premises
- SDS should be obtained whenever a new cleaning and hazardous product is purchased by contacting the manufacturer (or agent) or accessing the website of the manufacturer and downloading the SDS
- Staff are responsible to ensure that these areas remain secure and not to inadvertently provide access to these items by the children.
- Cleaning and hazardous products should not be stored close to foodstuffs or where storage of these food products might contaminate foodstuffs.
- Staff should always read the label before use of any cleaning material, sprays or chemicals and be aware of appropriate first aid measures.
- Education about dangerous products and their storage can be used to enhance both children's and parents' awareness of the topic. Activities, posters or newsletters can be undertaken to highlight the issue.

# HIV/AIDS/Hepatitis B and C

## POLICY STATEMENT

We respect the right for all children to be loved and cared for and aim to provide a safe and secure environment for all children in the Centre. We will not discriminate against any child or family's right to achieve that care as outlined in the law. We believe that HIV/AIDS and Hepatitis B and C are best dealt with by preventative measures and will ensure that clear guidelines are given to eliminate the risk of spreading the diseases and ensure the safety of all staff and children. Proper confidentiality will also apply.

## CONSIDERATIONS

National Quality Standards Quality Area 2.1

Federal Disability Discrimination Act

Equal Opportunity Act

Occupational Health and Safety Act

## PROCEDURE

- Under the Federal Disability Act and the Equal Opportunity Act, no discrimination will take place based on a child's/parent's/staff member's HIV status.
- Discrimination in regard to access to the Centre is unlawful. A child with HIV or Hepatitis B or C has the right to obtain a position in the Centre should a position become available and a staff member the right to equal opportunity of employment.
- A child with AIDS shall be treated as any other child, as HIV is not transmitted through casual contact. The child shall have the same level of physical contact with staff as other children in the Centre.
- Where staff are informed of a child, parent or other staff member who has HIV/AIDS or Hep B or C, this information will remain confidential at all times. A breach of this confidentiality will be considered a breach of discipline.
- Staff will ensure that no discussion is made other than insuring proper care of all children is maintained.
- No conversation is to be undertaken in hearing of any unauthorised adults, or around the children.
- Proper safe and hygienic practices will be followed at all times. (See Hygiene policy for details.)
- No one will ever be denied the right to first aid.
- All children and adults at the Centre will be considered as infectious, and these procedures are to be consistently applied across the Centre.
- All staff dealing with open sores, cuts and bodily fluids with any child or adult shall wear disposable gloves.
- Staff with cuts, open wounds or skin disease such as dermatitis should cover their wounds and wear disposable gloves.
- Disposable gloves will be properly and safely discarded and staff are to wash their hands after doing so.
- If a child has an open wound it will be covered with a waterproof dressing and securely attached.

- If bodily fluids or blood gets on the skin but there is no cut or puncture, wash away with hot soapy water.
- In the event of exposure through cuts or chapped skin, promptly wash away the fluid, encourage bleeding and wash in cold or tepid soapy water.
- In the event of exposure to the mouth, promptly spit it out and rinse mouth with water several times.
- In the event of exposure to the eyes, promptly rinse gently with cold or tepid tap water or saline solution.
- In the event of having to perform CPR, disposable sterile mouth masks are to be used, or if unavailable a piece of cloth. The staff person in charge of the first aid kit will ensure that a mask is available at all times.
- Any exposure should be reported to the Coordinator and Management to ensure proper follow up procedures occur.

**Note:** Hot water may coagulate the blood and protect the virus from the soap or disinfectant. It is best to use cold or tepid water temperatures in all cleaning processes.

- Any soiled clothing shall be handled using disposable gloves, soaked in disinfectant or hot soapy water. Clothing will be placed and sealed in a plastic bag for the parents to take home.
- Any blood or bodily fluid spills will be cleaned up immediately, using gloves and the area fully disinfected.
- Cloths used in cleaning will be wrapped in plastic bags and properly disposed of.
- Staff and parents will be encouraged to participate in AIDS and Hepatitis education.
- Education can take the form of staff training, educational seminars, brochures, etc.



# Hours of Operation

## POLICY STATEMENT

We aim to meet the needs of the parents in our local community who either, work, study or have other commitments, by operating for days and hours that allow them to reasonably get to and from work or place of study.

## CONSIDERATIONS

OOSH License Agreement

National Quality Standard Quality Area 6.1

## PROCEDURE

- The Centre will operate during government school terms Monday to Friday, between the hours of:
  - 7.30 to 9am, before school, and
  - 3 to 6pm, after school, or as agreed by the management committee.
  
- The Centre will operate during government school holidays Monday to Friday, between the hours of:
  - 7:30 to 6pm,. The Centre will also open from 7:30 to 6pm on designated government school pupil free days, DET strike days (half or full day) or as agreed by the management committee.
  
- The Centre will be closed on designated public holidays and weekends. All parents will be notified of days of closure.
- Hours of operation will be provided to parents in our information booklet on the child's initial enrolment.
- No children will be left unattended at the Centre outside these hours.
- Detailed dropping off and collection and late collection policies have been developed.

# Hygiene

## POLICY STATEMENT

We aim to provide a healthy and hygienic environment that will promote the health of the children, staff and parents. All people in the Centre will follow preventative measures in infection control. Staff will ensure that they maintain and model appropriate hygiene practices.

## CONSIDERATIONS

National Regulation 106

National Regulation 109

National Quality Standard 2.1.3

## PROCEDURE

- All toilet facilities will have access to a basin or sink with running water.
- All toilet facilities will have soap for washing hands.
- Women and girls will have access to proper feminine hygiene disposal.
- Soap and paper towel will also be available in the kitchen area.
- One staff member will be responsible for monitoring the availability of soap and paper towel to ensure they do not run out.
- Toilets, hand basins and kitchen facilities will be cleaned and disinfected daily.
- Hand washing should be practiced by staff and children on arrival, before preparing or eating food and after all dirty tasks such as toileting, cleaning up any items, wiping a nose, before and after administering first aid, playing outside or handling an animal.
- Staff should maintain and model appropriate behaviour and encourage the children to adopt hygiene practices.
- Staff and children to practice respiratory hygiene (i.e. cough into elbow, sneeze into tissue and discard etc.)
- Education in proper practices should be conducted on a regular basis, either individually or as a group. Health and hygiene practices can be highlighted to parents, and also through information sheets or posters.
- All staff must wear disposable gloves when in contact with blood, open sores or other bodily substance, clothes contaminated with bodily fluids or cleaning up a contaminated area. Staff must wash hands with soap and water after removing the gloves.
- Staff with cuts, open wounds or skin disease such as dermatitis should cover their wounds and wear disposable gloves. Used gloves should be disposed of safely.
- All surfaces will be cleaned with detergent after each activity and at the end of the day.
- All contaminated surfaces will be disinfected.
- All toys should be washed, cleaned and disinfected on a regular basis.

- All material items such as towels, dress ups and cushion covers will be laundered regularly.
- Any soiled Children's clothing will be sealed inside plastic bags and sent home with the child for washing.
- Children will be reminded not to share food, drinks, utensils or use items that have been dropped on the floor.
- All cups, plates and utensils will be washed in hot, soapy water/dishwasher.
- All rubbish or leftover food is to be disposed of immediately.
- Lids must remain on the bins at all times and bins should be emptied daily.
- Bins will be wiped down with disinfectant daily.

# Illness and Infectious Diseases

## POLICY STATEMENT

We aim to provide a safe and hygienic environment that will promote the health of the children. As the care needs of a sick child cannot be met without dramatically reducing the general level of supervision of the other children, or risking other children's health, parents will be asked not to bring sick children to the Centre and to collect children who are unwell.

All care and consideration will be given to the child who becomes ill while at the Centre. Children with infectious diseases will be excluded from the Centre for the period recommended by the Department of Health.

**The Centre will follow the directions of the Department of Health**

## CONSIDERATIONS

National Regulation 12 "Meaning of *serious incident*"

National Regulation 88 "Infectious diseases"

National Regulation 168(2)(c)

National Quality Standard Quality Area 2.1

Department of Health guidelines

Department of Education guidelines

## PROCEDURE

- A child or adult will be considered sick if he/she:
  - Sleeps at unusual times, is lethargic.
  - Has a fever over 38°.
  - Is crying constantly from discomfort.
  - Vomits or has diarrhea.
  - Is in need of constant one to one care.
  - Has an infectious disease.
- If a child is unwell at home parents will be asked not to bring the child to the Centre.
- If a staff member is unwell they should not report for work. Staff should contact the Centre as soon as possible to inform them that they are unable to attend work.
- If a child becomes ill or develops symptoms at the Centre the parents will be contacted to take the child home.
- If a staff member becomes ill or develops symptoms at the Centre they can return home if able or organise for someone to take them home.
- The Coordinator will organise a suitable replacement as soon as possible.
- The child who is ill will be comforted, cared for and placed in a quiet isolated area with adult supervision until the child's parent or other authorised adult takes them home.
- If the child has a fever the parents will be informed and asked for permission to give paracetamol. Paracetamol will not be given without permission.

- During a fever other methods will be employed to bring the child's temperature down until the parents arrive or help is sought. Such methods include: clothes removed as required, clear fluids given, tepid sponges administered.
- If a child's temperature is very high, cannot be brought down and parents cannot be contacted, if the situation becomes serious the doctor or an ambulance will be called.
- If necessary, the Centre will inform the Authority within 24 hours if the illness constitutes a serious incident as defined under Regulation 12.

## **Infectious Diseases**

- Children and staff will be excluded from the Centre if they are ill with any contagious illness. This includes diarrhea and conjunctivitis.
- The period of exclusion will be based on the recommendations outlined by the Department of Health. More information can be found at:  
[http://www.health.nsw.gov.au/infectious/control\\_guideline/pages/default.aspx](http://www.health.nsw.gov.au/infectious/control_guideline/pages/default.aspx)
- The decision to exclude or re-admit a child or staff member will be the responsibility of the Coordinator based on the child's symptoms, medical opinion and Department of Health guidelines for children who have an infectious disease or who have been exposed to an infectious disease.
- The Coordinator or staff members have the right to refuse access if concerned about the child's health.
- Children with diarrhea will be excluded for 24 hours after the symptoms have disappeared or after a normal stool.
- A doctor's clearance certificate will be required for all infectious diseases such as measles, mumps diphtheria, hepatitis A, polio, tuberculosis, typhoid and paratyphoid before returning to the Centre.
- Parents will be informed about the illness and infectious diseases policy on enrolment.
- A regularly updated copy of the Department of Health guidelines on infectious diseases (obtained by mail or downloading from Dept. of Health website) will be kept attached to the illness and infectious disease policy for reference by staff, management and made available to parents on request.
- The Coordinator will follow the recommendations as outlined in the Health Department document.
- Parents will be informed about any occurrence of an infectious disease in the Centre ensuring that the individual rights of staff or children are not infringed upon.
- All staff will ensure proper hygiene practices are carried out as outlined in the Hygiene policy.

# Immunisation

## POLICY STATEMENT

We respect the right of individual parents whether to immunise or not to immunise their children. However children who are not immunised will be excluded for the period of an outbreak that is a vaccine-preventable disease. Proof of immunisation will be sought at the enrolment stage and recorded in the enrolment form.

## CONSIDERATIONS

Public Health Amendment (Vaccination of Children Attending Childcare Facilities) Act 2013

National Quality Standard Quality Area 6.2

Department of Health Recommendations

## PROCEDURE

- Upon enrolment families will be required to inform the Centre of their child's immunisation status.
- The immunisation status record must be stored in a secure location for three years, unless the child transfers to another child care Centre.
- In the event of an outbreak of vaccine-preventable disease at the Centre or school attended by children at the Centre, children not immunised will be required to stay at home for the duration of the outbreak, for their own protection.
- Payment of fees will be required for children excluded during an outbreak of a vaccine-preventable disease, unless other arrangements, discussed and agreed to by the management committee, have been made.
- All staff should also maintain through immunisation, their immunity to common childhood diseases.
- It is also recommended that all staff receive a booster dose of tetanus and diphtheria vaccine every 10 years.

# Interactions with Children

## POLICY STATEMENT:

Annandale After School Centre will provide an environment that reflects the principles in “My Time, Our Place and “Belonging, Being and Becoming” where the development of secure, respectful and reciprocal relationships with children are fostered and encouraged and genuine respect for diversity and a commitment to equity is reflected in all our interactions with children.

We will endeavor through our interactions with children to nurture their optimism, happiness and sense of fun and we will aim to recognise and respond to barriers which may impact on children achieving a positive sense of self identity.

Educators will utilise opportunities in their interactions with children to develop an understanding of each others expectations leading to a deeper understanding of each other and the negotiation of clear boundaries regarding safety, respect for others and procedures for creating a caring environment.

## CONSIDERATIONS:

My Time, Our Place learning framework

Belonging, Being and Becoming: The Early Years Learning Framework

National Regulations 73, 74, 76, 155, 156, 168

National Quality Standard Quality Area 1

National Quality Standard Quality Area 5

National Quality Standard Quality Area 6

## PROCEDURES:

### (a) The educators will:

- Maintain a positive attitude in all interactions with children.
- Listen carefully to children’s experiences and perspectives and show interest in their ideas and perspectives.
- Respect children as individuals and encourage each child to voice their opinions, concerns and ideas in a supportive forum that is free from stigmatism.
- Support children in feeling confident in the environment by never using strategies such as shouting, threats of corporal punishment or the refusal of food or other basic needs. Educators will always treat children with respect, courtesy and understanding.
- Treat children equally regardless of race, cultural background, religion, sex or ability and ensure interactions between children and educators exhibit this.
- Sensitively manage children who are having difficulty conveying their message or managing their emotions.
- Ensure children understand what is being communicated to them during interactions and allow them time to question or respond.
- Speak to children at their level and use voice intonations, facial expressions and body language to assist in conveying messages.
- Engage in one on one conversations with all children and develop an understanding of their likes, dislikes and interests.

- Collaborate with children regarding the daily routines and practices within the service including programming of experiences in order to meet their individual needs, interests and abilities.
- Organise environments and spaces that promote small and large group interactions and meaningful play and leisure.
- Collaborate with children to develop a set of rules or boundaries to guide their behaviour in the service and discuss clear expectations and consequences of inappropriate behaviours.
- Keep rules simple and only have a small number of concise rules that children understand, focusing on appreciating and caring for each other and the environment. All staff, families and children will be made aware of the rules and the expected consequences. The rules will be clearly displayed.
- Ensure that all educators enforce the rules and consequences consistently at all times. Consequences will be relevant to the situation and never demeaning.
- Follow up all issues that arise by discussing the situation with the child and strategising for better solutions in future issues.
- Collaborate with family members and schools regarding appropriate behaviour management practices to ensure there is a consistent approach.
- Access professional development and resources related to positive behaviour management and include this in professional development planning.
- Act as a positive role model for appropriate and expected behaviours in the service being mindful of respectful language and tone.
- Encourage and reward acceptable behaviour by giving praise and positive feedback to children as often as possible.
- Focus on the behaviours being displayed and not the child displaying them.
- Assist children in developing self-discipline skills and regulating their own behaviours by using simple conflict resolution skills, building self-reliance and self-esteem, role modelling and positive direction.
- Provide children with opportunities to interact and develop respectful and positive relationships with each other, educators and visitors to the service.
- Ensure that appropriate physical contact is maintained in regards to comforting children, application of first aid, safety provisions such as holding hands and maintaining respectful bodily space.
- Identify when interactions with a child are not appropriate and refer to the services 'Providing a Child Safe Environment' policy to address these concerns.
- Maintain defined boundaries in regards to appropriate behaviour with children and engagement with their families.
- When assisting children with toileting, two staff members must be present at all times.

**(b) The children will:**

- Be treated with respect, courtesy and understanding regardless of race, cultural background, religion, sex or ability.
- Be encouraged to listen to others respect, courtesy and understanding regardless of race, cultural background, religion, sex or ability.
- Be encouraged to share humour and express themselves in a variety of ways.
- Practice strategies for problem solving, debating, negotiating and interacting with others in an appropriate way with the guidance of educators.
- Have opportunities to use and share their home language with other children and educators



- Collaborate with staff in developing service routines and procedures including rules and boundaries and the consequences they should expect if these are not followed.
- Encourage their peers to adhere to the rules and expectations.
- Participate in experiences that will build relationships and promote interactions between each other, educators and visitors to the service.
- Assist educators in developing programs and routines for the service that reflect their individual needs, interests and abilities.
- Have their need for solitude or quiet time supported and respected by educators and children
- Develop an understanding of the choices they make and the responsibility they have to manage their own behaviours in conjunction with educators.

**(c) Dealing with consistently inappropriate behaviours**

Where a child demonstrates unacceptable behaviour consistently, educators will:

- Ensure the child is aware of the limits and what is appropriate behaviour.
- Ensure the expectations are appropriate for the child's level of development and understanding.
- Look for and assess possible causes for the behaviour such as environmental factors.
- Discuss the issue with the child and their family members.
- Record all incidents that occur in relation to inappropriate behaviours, making note of the events leading up to the incident, the date and time, who was involved and how the incident was handled.
- Develop an action plan for the management of the specific behaviours and include a plan for regular discussions with all educators, children's families, school professionals etc. to review the action plans effectiveness and progression.

**Where a child demonstrates behaviours that are physically harmful, educators will:**

- Remove the child from the situation as quickly as possible.
- Ensure any children or educators involved have not been hurt and apply first aid where required.
- Record the details of the incident including date, time, people involved, people injured and the action taken.
- Ensure that the family members of all children involved in the incident are notified.

**(d) Exclusion for unacceptable behaviours**

- Should unacceptable behaviour continue and the above strategies have not worked effectively, the educators will inform management and discuss the issue.
- Where, in the interest of the child and other children at the centre, exclusion is seen as a necessary step, this will be decided by management and will only be considered after:
  - Adequate support and counselling has been provided.
  - Family members have been notified and given the opportunity to discuss the child's behaviour and strategies for creating change.
  - Referrals to other agencies have been suggested where necessary.
  - Educators and management have given careful consideration to the issue.

- Clear procedures have been established for accepting the child back into the centre.

# Intruder, Harassment and Lock Down

## POLICY STATEMENT

We aim to ensure all students, staff, parents and visitors remain in a safe and secure location in the event of a possible threat or critical incident and that exposure to danger and possible risk of harm are minimised.

A lock down occurs when there is a severe natural disaster, storm or threatening individual at the premises. All the children and staff congregate indoors in a secure place and remain there until the incident is resolved. Specific guidelines have been developed for any unwelcome and unauthorized visitors to the Centre.

## PROCEDURE

### UNWELCOME VISITORS

- Staff should be aware of any unfamiliar person on the premises and find out what they want as quickly as possible and try to contain them outside the Centre.
- Any unwelcome visitor will be calmly asked to leave the Centre. If they refuse the Coordinator or staff member directed by the Coordinator will call the police for removal.
- No staff member is to try to physically remove the unwelcome person but try to remain calm and keep the person calm as far as possible and wait for the police.
- If a person/s known or unknown to the service harasses or makes threats to children or staff at the Centre, or on an excursion, staff will:
  - Calmly and politely ask them to leave the Centre or the vicinity of the children.
  - Be firm and clear and remember your primary duty is to the children in your care.
  - If they refuse to leave, explain it may be necessary to call the police to remove them.
  - If they still do not leave, call the police.
  - If the Coordinator is unable to make the call another staff member should do so.
  - Where possible staff will calmly move the children away from the person.

### HARASSMENT AND THREATS OF VIOLENCE

- In the event of a critical incident requiring 'Lock Down', the Coordinator will determine the need for a 'Lock Down' and sound the appropriate alarm.
- The Coordinator will sound an air alarm and announce through a loud speaker that all children and staff should gather inside the Centre immediately.
- All doors and windows will be locked, curtains drawn, and all children and staff moved as far away from windows and doors as possible. Lights should be turned off.
- A staff member will call the appropriate emergency services, if necessary.
- A check of sign-in sheets will be made to ensure all children and staff are accounted for.
- Staff will begin activities with all children to keep them calm. If necessary, children will be instructed to remain silent.
- The Coordinator will determine when the incident is past and it is safe and appropriate to resume normal play.
- A report of the incident must be prepared by the Coordinator.
- All staff, including relief staff, will be informed of the procedure and their specific duties identified in their orientation to the Centre. Staff will make arrangements as to duties undertaken in the absence of other staff.
- Children and staff will practice the emergency procedure at least once per term.

- Drills will be conducted more regularly when there are new children.

## **LOCKDOWN**

- If lockdown needs to be called, educators and children will remain in the building they are in, if safe to do so, or move to the closest useable building directed by the staff.
- Staff will lock doors and windows and move children away from window and visible points of the building.
- All lockdown areas will remain locked until the responsible person calls and all clear.
- A roll call is initiated to make sure all children are accounted for.
- Lockdowns may also be called for adverse weather if the responsible person deem necessary.



# Maintenance of Records

## POLICY STATEMENT

We aim to ensure that all appropriate and required records are kept for the specified period of time. We will protect the privacy and confidentiality of all clients, staff and management of the Centre, by ensuring that records and information are kept in a secure place and only disclosed to people who have a legal right to know.

## CONSIDERATIONS

National Standards, Section 5.3 (Maintenance of records/confidentiality)

Funding Agreement

Child Care Benefit

Accident records, Insurance requirements

Child Care and Protection Act

National Quality Standard Quality Area 7.3

National Regulation 168 (2) (l)

## PROCEDURE

- Staff and management will ensure that all required information is recorded, properly maintained, updated and kept in the nominated secure place.
- All records are to be kept confidential and only made available to authorised persons.
- All documents (including electronic records) relating to children and parents will only be made available to the parent/guardian or approved persons enrolling the child, staff and authorised members of the management committee who require relevant information, or Commonwealth or State Government officers when requested.
- All documents relating to staff will only be made available to the individual staff member, the Co-ordinator, and an authorised member of the Management or police if required.
- All documents relating to fee payment and CCB will only be made available to the parent/guardian or approved persons enrolling the child, staff and authorised members of the Management or Commonwealth Government officers.
- No member of staff may give information on matters relating to children, to anyone, other than to the parents or guardian enrolling the child when this information has been obtained in the course of employment in the Centre.
- Exceptions are made:
  - For normal information exchange among staff and management, for the daily operation of the Centre and wellbeing of the staff and children.
  - When required to do so in a court of law when subpoenaed.
  - When the welfare of the child is at risk the appropriate government agencies may be contacted.
- No member of staff may give information on matters relating to staff or management, to anyone except in normal information exchange among staff and management for the daily operation of the Centre and wellbeing of the staff and children, or when required to do so in a court of law.
- Electronic records are protected by password, and only authorised persons will have access.

## RECORDS TO BE KEPT WILL BE:

### In relation to daily operations:

- **Full enrolment forms**, containing information as required under section 5.3.1 of the National Standards, to be kept in alphabetical order.
- **Child records**, in electronic form.
- **Waiting list**, indicating priority of access status, date placed on list, care required and if a sibling of a child already in care.
- **Daily records of attendance**, including a roll taken by the staff and the sign in/out sheet recording the time of arrival and departure.
- **Staff book**, recording specific information that the staff need to be aware of, to fully cater for the children in their care, including phone messages that affect the children.
- **Parent Book**, to record bookings, cancellations, changes to pick-up arrangements, holidays, planned absences, etc.
- **Accident/illness record**, containing nature of accident or illness, who attended the child and what course of action was taken. Note - Accident and illness records will be kept until the child turns 24.
- **Medication record**, containing parent's requirements and signature, medication used, the date, time and dosage of administration, the person who administered it, and the person who witnessed the administration.
- **Excursion approval file**, containing written permission forms from the parents, and kept in the child's personal records.
- **Written program**, indicating daily activities in the Centre.
- **Information folder**, containing updated relevant information such as infectious diseases leaflet, OOSH updates etc.

#### **In relation to fees**

- **Cash book**, containing payment of fees, type of fee and dates paid, for by whom, date, amount, type of payment (cash, cheque, credit card, etc). A printed receipt is also provided from the computer management system. Cash receipt books will be kept for a period of 5 years.
- **Child Care Benefit records** will be kept for a period of 3 years.
- **Amount owing records**, indicating fees due, and any outstanding fees, along with procedures undertaken to retrieve outstanding fees.
- **Accounting documents**. All records relating to fees accounting and bank statements are to be kept for a period of 7 years.

#### **In relation to staff**

- **Staff employment details**, indicating personal details, date of employment, hours of work, position title and job description, resume and references, date for review, and any discipline or grievance procedures.
- **Staff wages**, holiday and sick leave entitlements.
- **Time and wage records** are to be kept for a period of 5 years.
- **Union and Superannuation details**.
- **Occupational Health and Safety details**.

#### **In relation to management**

- **Management structure**, including position titles and duties and current persons holding the positions.
- **Minutes** of meetings and AGMs.
- **Policy booklet**, including Centre details, philosophy and policies.
- **Insurance and financial details**. Insurance documents will be kept for 7 years.

- **Funding and other relevant agreements**, such as school/hall usage etc.
- All records relating to funding will be kept for a period of 7 years.
- All records are to be kept neat and tidy, updated as required and appropriate information passed on to any new staff or management member.
- All records, which require to be kept for an extended period of time, will be stored securely in the designated place and shall not be removed without the knowledge of the management and only to those who are legally required to obtain the information.



# Management of Basic First Aid

## POLICY STATEMENT

Annandale After School Centre believes that in order to ensure the highest level of care is maintained for children attending the service; all educators should be suitably qualified in emergency first aid management. The service will ensure that first aid equipment and support is available to all children, educators and visitors to the service and whilst on excursions. All educators are encouraged to undertake senior first aid, asthma management and anaphylaxis management training to ensure full and proper care of all is maintained (My Time: Our Place and Belonging, Being and Becoming. Outcome 3).

## CONSIDERATIONS

- National regulation 89; First Aid Kits.
- National Standard 2: Element 2.1.4 *“Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines”*
- National Regulation 12
- National Regulation 87
- National Law Section 174
- The Centre “Management of Incident, Injury and trauma Policy”
- The Centre “Hygiene Policy”
- ACECQA “Frequently Asked Questions” [www.acecqa.gov.au](http://www.acecqa.gov.au)

## PROCEDURE

The nominated supervisor is responsible for ensuring that a minimum of one Educator must be present at the service at all times who is currently qualified in senior first aid, asthma management and anaphylaxis management.

The service will endeavour to have all educators with current first aid qualifications.

A current first aid certificate or willingness to undergo training will be advertised for all new positions.

An appropriate number of stocked and updated first aid kit, in regard to the number of children bearing educated and cared for, will be kept in the designated and secured place in the service. Educators are to ensure that this is easily accessible and recognisable to all educators and volunteers and kept inaccessible to the children (r89).

A separate travelling first aid kit will be also maintained and taken on all excursions and to outdoor activities.

The first aid kit will contain the minimum equipment suggested by the Red Cross or St John's Ambulance and a first aid manual will be kept at the centre.

A cold pack will be kept in the freezer for treatment of bruises and strains.

An inventory of the kits will be maintained and checked on a minimum monthly basis and signed off by the Nominated Supervisor. The Nominated Supervisor may be required to produce these checklists in the event of a request from management or from the NSW regulatory authority.

Each school term, one educator will be designated the duty of maintaining the kits to ensure that they are fully stocked, and that all items are within the use by date.

At orientation educators and volunteers will be made aware of the first aid kit, where it is kept and their responsibilities in relation to it.

Qualified first aiders will only administer first aid in minor accidents or to stabilise the victim until expert assistance arrives in more serious accidents.

Telephone numbers of emergency contacts, local doctor and poisons centre will be located next to the phone.

In the event of an emergency the educator administering the first aid must not leave the patient until emergency services or the parent arrives. All emergency calls should be made by a second educator.

**In the case of a minor accident, the first aid attendant will:**

1. Reassure the child
2. Assess the injury
3. Attend to the injured person and apply first aid as required.
4. Ensure that disposable gloves are used with any contact with blood or bodily fluids.
5. Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner as per the Infectious Diseases Policy.
6. Ensure that anyone who has come in contact with any blood or fluids washes their hands thoroughly in warm soapy water.
7. Record the incident and treatment given in the IIIT book (incident, injury, illness, and trauma) recording the following details:
  - Name and age of child

- Date, time, and location of incident
  - Description of injury and circumstances of how it occurred, including witnesses.
  - Treatment given and name and signature of first aid attendant
  - Details of any medical personnel contacted.
  - Name and details of any parent or emergency contact notified or attempted to notify.
  - Time and date of report and name and signature of a person making report
  - Name and signature of nominated supervisor
8. Notify the parents either by phone after the incident if seen fit or on their arrival to collect the child.
  9. Parental signature confirming knowledge of the accident report form will be gained at the soonest possible convenience.
- Where the service has had to administer first aid and the incident is deemed serious as per Regulation 12, the Nominated Supervisor will ensure that the steps outlined in the “Management of Incident, Injury, Illness and Trauma” policy are followed and the Regulatory Authority is notified within 24 hours of either the incident or them becoming aware of the incident.

# Management of Incident, Injury, Illness & Trauma

## **POLICY STATEMENT**

*Annandale After School Centre* aims to ensure the safety and well-being of educators, children and visitors, within the service and on excursions, through proper care and attention in the event of an incident, injury, illness or trauma.

The service will endeavour to prevent the event of any incident, injury, illness and trauma occurring through best practice, implementation of all service policies and procedures, adhering to State and National Laws and risk assessment.

Should any of these occur despite prevention methods, the service will make every attempt to ensure sound management of the event to prevent any worsening of the situation and complete reports on each event that will be signed by the family of the child involved.

Family members or emergency contacts will be informed immediately where the incident, injury, illness or trauma is deemed serious, and the incident reported to the NSW Regulatory Authority as per the National Law and Regulations.

## **PROCEDURE**

### **Enrolment Information**

- Families are required to provide written consent for educators to seek medical attention for their child as part of the enrolment process. This consent will be recorded in the enrolment information. Families are also required to ensure the service has accurate and detailed information regarding anything that may impact on their health, safety and well-being while attending the service.
- Families will be required to supply details of their preferred doctor, dentist, health fund and Medicare details.
- Families will be required to supply two contact numbers in case of an emergency or accident.

### **Incident, injury or trauma to a child while in the service**

- If a child, educator or visitor becomes ill or injured while at the service, an educator who holds a first-aid certificate will attend them too immediately.
- Anyone injured will be kept under adult supervision until they recover, or an authorised person takes charge of them.

- In the case of a major incident, injury, illness or trauma at the service requiring **more than basic first aid**, the first aid attendant will:
  - 1) Assess the injury, and decide whether the injured person needs to be attended to by a doctor or an ambulance called. The educator in charge or nominated supervisor will be advised of their decision.
  - 2) Attend to the injured person and apply first aid as required.
  - 3) Educators will ensure that disposable gloves are used with any contact with blood or bodily fluids as per the infectious disease policy.
  - 4) Educators will stay with the child until suitable help arrives.
  - 5) The educators will try to make the child comfortable and reassure them and advise them that their families have been called.
  - 6) If an ambulance is required and the child is taken to hospital, an educator will accompany the child and take the child's medical records with them.
  - 7) Complete a service incident report and provide to families to read and sign and a serious incident report for the regulatory authority within 24 hours or as soon as possible.

Another educator will:

- 1) If the injury is serious, the priority is to get immediate medical attention. Families or emergency contacts should be notified straight away where possible. If not possible, there should be no delay in organising proper medical treatment.
- 2) Notify family or emergency contact person as soon as possible regarding what happened and the action that is being taken including clear directions of where the child is being taken (e.g. hospital). Every effort must be made not to cause panic and to provide sensitive detail regarding the extent of the injuries
- 3) Ensure that all blood or bodily fluids are cleaned up safely.
- 4) Ensure that anyone who has come in contact with any blood or fluids washes their hands in warm soapy water.
- 5) Try to reassure the other children and keep them calm, keeping them informed about what is happening, and away from the child.

- Accidents which result in a serious incident, injury, illness and trauma to a child must be reported to:

The Family/guardian or emergency contact person

Regulatory Authority

- Other life-threatening, traumatic injuries or the death of a child will also need to be reported to the;

✓ The ambulance services

✓ The police

- The centre will notify the family/Guardian or emergency contact person that a serious incident has happened and advise them to contact the relevant medical agency. Only a qualified medical practitioner can declare a person is deceased, therefore educators should ensure the parents are only advised that the injury is serious and refer them to the medical agency (i.e. hospital) where the child has been taken.
- This information should be provided in a calm and extremely sensitive manner.
- The site of the accident should not be cleared or any blood or fluids cleaned up until after approval from the Police.
- All other children should be removed away from the scene and if necessary parents contacted for early collection of children. The children should be reassured and notified only that a serious incident has occurred.

### **Death or Serious Injury to a child or educator out of hours**

- Educators in the service must be prepared to handle all incidents professionally and sensitively. In the event of tragic circumstances such as the death of a child or educator, the educators will follow guidelines as set out below to minimise trauma to the remaining educators and children in the service.
- In the event of the death occurring out of service hours, a clear emergency procedure will be maintained for the other children at the service.
- If a child is deceased, the Coordinator/Nominated Supervisor should contact the child's school to liaise with them regarding the school's response to the event.
- Confidentiality will be maintained at all times.

### **Reporting of Serious Incident, Injury and Trauma**

- All serious incidents, injury, illness or trauma will be recorded within 24 hours of the event occurring. The child's family or emergency contact must be notified of any accident or injury that has occurred to the child as soon as possible and no later than 24 hours after the event.
- The Nominated Supervisor is responsible for ensuring that, in the event of a serious incident, the Regulatory authority is advised as well as the Approved Provider (e.g. Management Committee) and the School Principal.
- It may not be until sometime after the incident that it becomes apparent that an incident was serious. If that occurs, the Nominated Supervisor must notify the regulatory authority within 24 hours of becoming aware that the incident was serious.

## How to decide if an injury, trauma or illness is a 'serious incident'?

- An incident, injury, trauma or illness will be regarded by the service as a 'serious incident' if more than basic first aid was needed to manage the incident, injury, trauma or illness and medical attention sought for the child including attendance at hospital or medical facility for further treatment.

### Illness

- Families are advised upon enrolment and in regular reminders not to bring sick children to the service and to arrange prompt collection of unwell children. The care needs of a sick child are difficult to meet without dramatically reducing the general level of supervision of the other children, or risking another child's health.
- Where a child becomes ill at the service, all care and consideration will be given to comfort the child and minimise the risk of cross-infection until the family/emergency contact collects the child.
- A child or an adult is considered "sick" if he/she:
  - Sleeps at unusual times or is lethargic.
  - Has a fever over 38 degrees.
  - Is constantly crying from discomfort.
  - Vomits or has diarrhoea.
  - Requires constant one to one care.
  - Has symptoms of an infectious disease.
- If a child is unwell at home, the family is not permitted to bring the child to the service. Children who appear unwell when being signed in by their parent/ guardian will not be permitted to remain at the service.
- If a child becomes ill while at the service, the guardians will be contacted to take the child home. Where the family is unavailable, emergency contacts will be called to ensure the child is collected from the service promptly.
- The child who is ill will be comforted, cared for and placed in a quiet, isolated area with adult supervision until the child's family or other authorised adult takes them home.
- During a fever, natural methods will be employed to bring the child's temperature down until the family or medical attention arrives. Such methods include removing clothing as required, clear fluids are given or tepid sponges administered.
- If a child's temperature is very high, cannot be brought down and their family cannot be contacted. If the situation becomes serious, the child will be taken to the doctor or an ambulance called.
- If a staff member becomes ill or develops symptoms at the centre, they can return home if able or the Coordinator will organise for someone to take them home.

- The Coordinator will organise a suitable staff replacement as soon as possible.

### **Infectious Diseases**

- Children and staff will be excluded from the Centre if they are ill with any contagious illness. This includes diarrhea and conjunctivitis.
- The period of exclusion will be based on the recommendations outlined by the Department of Health. More information can be found at:  
[http://www.health.nsw.gov.au/infectious/control\\_guideline/pages/default.aspx](http://www.health.nsw.gov.au/infectious/control_guideline/pages/default.aspx)
- The decision to exclude or re-admit a child or staff member will be the responsibility of the Coordinator based on the child's symptoms, medical opinion and Department of Health guidelines for children who have an infectious disease or who have been exposed to an infectious disease.
- The Coordinator or staff members have the right to refuse access if concerned about the child's health.
- Children with diarrhea will be excluded for 24 hours after the symptoms have disappeared or after a normal stool.
- A doctor's clearance certificate will be required for all infectious diseases such as measles, mumps diphtheria, hepatitis A, polio, tuberculosis, typhoid and paratyphoid before returning to the Centre.
- Parents will be informed about the illness and infectious diseases policy on enrolment.
- A regularly updated copy of the Department of Health guidelines on infectious diseases (obtained by mail or downloading from Department of Health website) will be kept attached to the illness and infectious disease policy for reference by staff, management and made available to parents on request.
- The Coordinator will follow the recommendations as outlined in the Health Department document.
- Parents will be informed about any occurrence of an infectious disease in the Centre ensuring that the individual rights of staff or children are not infringed upon.
- All staff will ensure proper hygiene practices are carried out as outlined in the Hygiene policy.



## CONSIDERATIONS

Education and Care Services National Law & Regulations	National Quality Standards & Elements	Other Service policies/documentation	Other
S167, 174  R12, 77, 81, 85, 86, 87, 88, 89, 90, 91, 97, 98, 99, 109, 161, 162, 175, 176, 177	Standards 2.1, 2.2, 3.1, 7.1  Elements 2.1.1, 2.1.2, 2.2.1, 2.2.2, 2.2.3, 3.1.2, 7.1.2	<ul style="list-style-type: none"> <li>- Acceptance and Refusal of Authorisations Policy</li> <li>- Enrolment and Orientation Policy</li> <li>- Medical Conditions and Administration of Medication Policy</li> <li>- Providing a Child Safe Environment Policy</li> <li>- Administration of First Aid Policy</li> <li>- Risk Assessment Policy</li> <li>- Governance and Management Policy</li> <li>- Child Protection Policy</li> <li>- Dealing with Infectious Diseases Policy</li> <li>- Emergency and Evacuation Policy</li> </ul>	<ul style="list-style-type: none"> <li>- Work, Health and Safety Act 2011</li> <li>- ACECQA “Frequently Asked Questions”</li> <li>- NSW Department of Health guidelines</li> <li>- Disability Discrimination Act 1975</li> <li>- NSW Anti-discrimination Act 1977</li> <li>- Staying Healthy in Child Care (5<sup>th</sup>Edition)</li> <li>- Parent Handbook</li> <li>- Staff Handbook</li> <li>- Enrolment records</li> <li>- Emergency procedures</li> <li>- Incident Report forms</li> <li>- Medication Records</li> <li>- Risk Assessments</li> <li>- Supervision Plans</li> <li>- Safety Checklists</li> </ul>

## ENDORSEMENT BY THE SERVICE

Approval date: \_\_\_\_\_

Date for Review: \_\_\_\_\_



# Medications

## POLICY STATEMENT

We aim to ensure the proper care and attention to all children through following specific guidelines regarding all medications given to the children.

To ensure the interests of staff, children and parents are not compromised medication will only be administered with the explicit permission of the parents or in the case of an emergency with the permission of a medical practitioner.

Specific consideration will also be given to children who are carrying medication in their school bags.

## CONSIDERATIONS

National Quality Standard Quality Area 2.1

'Guidelines for Administering Medication' Network of Community Activities

National Regulation 90; *Medical conditions policy*

National Regulation 92; *Medication record*

National Regulation 93; *Administration of medication*

National Regulation 95; *Procedure for administration of medication*

National Regulation 96; *Self-administration of medication*

## PROCEDURE

- Parents who wish medication to be administered to their child at the Centre will complete the medication form providing the following information;
  - Name of the child
  - Name of medication
  - Time and date medication was last administered
  - Time and date, or circumstances under which, the medication should be next administered (dates and times are to be exact, rough times i.e. lunchtime will not be accepted. Circumstances are to be described specifically and with instruction from the child's doctor)
  - Dosage to be administered
  - Signature
- Medication must be given directly to an authorised staff member and not left in the child's bag.
- Parents and staff are to ensure the details on the form are clear and clarify any questions.
- Staff will store the medication in the designated secure place, clearly labeled.
- Staff will ensure that medication is kept out of reach of the children at all times.
- Medication will only be administered from its original container, bearing its original label and expiry or use by date.
- Prescription medication will be administered only to the child for whom it is prescribed, from the original container bearing the child's name and with a current use by date.
- Non-prescription medication will not be administered at the Centre unless authorised by a parent or doctor.
- Medication will be administered with the parent's written permission only, or with the approval of a medical practitioner in the case of an emergency.
- Authorisation from anyone other than the parents cannot be accepted.

- If anyone other than the parent is bringing the child to the Centre, a written permission note from the parent, including the above information, must accompany the medication.
- Before medication is given to a child the authorised staff member (usually the staff member with First Aid Certificate) who is administering the medication will verify the correct dosage with another staff member.
- A second staff member is to witness the administration of the medication.
- After the medication is given the authorised staff member will record the details on the medication form including;
  - name of medication
  - date
  - time
  - dosage
  - manner in which the medication was administered (tablet, nasal spray etc)
  - name of person who administered
  - name of person who verified and witnessed
- Where a medical practitioner's approval is given staff will complete the medication form and write the name of the medical practitioner for the authorization.
- Where medication for treatment of long term conditions such as asthma, epilepsy, or ADHD is required, the Centre will require a letter from the child's medical practitioner or specialist detailing the medical condition of the child, correct dosage as prescribed and how the condition is to be managed.
- If children are receiving medication at home or school but not at the Centre parents should inform the Centre of the nature of the medication and its purpose and of any side effects it may have for the child so that staff can properly care for the child.
- Where children have medication in their school bags, children will be asked to place the medication in a secure place in the Centre. Parents are to ensure that the medication is taken home each afternoon.

### **Self-administration of medication**

- Older children may self-administer their own medication only if this is recommended by the child's doctor, specialist or appropriate health professional.
- If the child is to self-administer the medication, clear authorisation must be recorded on the child's medical record, as well as clear instructions and information for staff, including information prescribed under Regulation 92.
- Medication will only be self-administered under the direct supervision of a staff member, in the office, with no other children present.
- The supervising staff member will record the details required under Regulation 92(h) immediately after the medication is administered.

# Participation and Access

## POLICY STATEMENT

We believe that participation by parents/guardians/approved persons in issues relating to their children is important. We aim to provide a caring and supportive environment where everyone feels welcomed and valued. Involvement of parents in activities will be actively sought and open communication constantly maintained. Parents are encouraged to be involved in issues that relate to them and their children, through participation and discussion about all issues relevant to the running of the Centre.

## CONSIDERATIONS

Family Law Act

National Quality Standard Quality Area 6.1

National Quality Standard Quality Area 6.2

## PROCEDURE

- Staff will greet and farewell parents on arrival and departure and communicate with parents in a positive and supportive manner, making the parents feel welcome and valued.
- Staff will establish a pattern of exchange of information, communicating to parents about their child or what they did on that day that may be of interest to them.
- Staff will accept individual differences in the way parents bring up their children.
- Parents will be informed of all relevant issues in the Centre through direct contact, notice boards, letters home or newsletters.
- Parents are welcome in the Centre at all times and staff will happily explain activities or answer any questions about the Centre to them.
- Parents need to be aware however of the staff's requirement to supervise the children during the activity sessions. If parents wish to discuss or exchange detailed information about their child or the Centre with the Coordinator or another staff member, an appointed time suitable to both will be organised.
- Parents are encouraged to become involved in the Centre's activities.
- We will actively seek this involvement by:
  - Keeping them informed and updated on current issues in the Centre.
  - Asking for their assistance and participation in particular events such as assisting in the program or excursions, working bees and other special events.
  - Informing them of our participation policy through the parent information booklet.
  - Inform them of the management structure and how they can be involved.
  - Invite them to attend or to read a report of the AGM meeting displayed on the notice board.
  - Inform them of relevant management decisions.
  - Encouraging feedback and input from parents in relation to the program, policies or other issues relating to the Centre.
  - Encouraging parents to offer skills and knowledge in a variety of ways and to contribute to the diversity of experiences for the children attending the Centre.
  - Advertise times and dates for monthly parent/management meetings, and encourage attendance at meetings by providing childcare, consulting parents on the most suitable meeting time, etc.

### ACCESS BY NON-CUSTODIAL PARENT

- If a child is subject to an access order or agreement, the Centre must have a copy on record plus any subsequent alteration registered by the court.
- Evidence of court orders or agreements will be considered part of the enrolment in order to minimise the likelihood of distressing situations occurring in the future.
- When a non-custodial parent attempts to collect a child from the Centre the staff will:
  - Be polite, firm and clear and remember your primary duty is to the children in your care.
  - Clarify the legal position with the non-custodial parent. For example, staff may say, *'I'm sorry but I'm not legally able to allow the child to leave with you without the permission of the custodial parent.'*
  - Ask the person politely to leave.
  - If they refuse to leave, call the police.
- In all cases, staff should be immediately aware of any unfamiliar person on the premises (including outside play areas) and find out what they want as quickly as possible.
- Unauthorised people should be asked to leave the premises immediately. Action should be taken if these people do not leave the premises. This may include notifying the school principal (in the case of students), and if necessary, the police.

# Policy Development and Review

## POLICY STATEMENT

We aim to provide effective management and a quality service through the ongoing development and review of policies, which are required to run the service efficiently. Management will ensure that all individuals are aware of relevant policies and have free access to the policy booklet.

## CONSIDERATIONS

National Quality Standard Quality Area 6.1

National Quality Standard Quality Area 7.2

National Quality Standard Quality Area 7.3

## PROCEDURE

- Management will ensure the development of all required policies under the National Standards and the OSHCQA system of accreditation.
- Other policies are to be developed as deemed necessary by the management.
- This will be based on the following criteria:
  - An issue or problem arises that is not addressed in a current policy.
  - A current policy is not meeting the current need.
  - Daily operations of the Centre are unclear to staff, parents or management.
  - Staff, parents or management are unsure what to do in a certain situation.
  - There have been changes due to outside influences.
- All policies must reflect the current philosophy of the Centre.
- Policies will be recorded in a loose-leaf policy file along with the Centre's philosophy, date of endorsement and date of review. This file is to be kept in the specified place and made available to those who wish to see it.
- Management will ensure that any new management members, staff and families entering the service are made aware of the policy file and any specific policies relevant to them.
- Any persons involved in the Centre are to feel welcome to make suggestions and discuss any concerns they may have regarding current policies.
- Staff and parents and any other relevant persons will be encouraged to have input into the development, review or changes to any policies and where appropriate be involved in the development of these policies.
- Parents and staff will be informed of this policy at enrolment/employment and through the Centre's information booklet.
- All new policies, or changes to existing policies will be reviewed in the timeframe of 6 operating weeks.
- All other existing policies will be reviewed within an 18 month period or more frequently if the need arises or there are any changes to legislation or recognised best practice.
- The review of policies will be based on the following criteria.
  - Is the policy operating effectively?
  - Does it include appropriate responses to individual incidents?
  - Does it meet the needs of all involved in the Centre?
  - Does it meet the aims and objectives as outlined?

Policy endorsed 2<sup>nd</sup> November 2021

Evaluation and review 2<sup>nd</sup> May 2023

- Is it consistent with current philosophy?
- Is it consistent with current legislation, acts and standards?
  
- Any changes to existing policies will be circulated to all involved in the service through individual notes, notice boards, personal contact and if felt necessary through a group meeting.
- The date the changes will become effective will be noted.
- All changes are to be recorded in the policy file with the date of endorsement and review.
- As an ongoing practice specific policies may be mentioned again through notice boards, letters or personal contact to highlight any relevant issues. This may be required if there is a recurrent problem arising or to highlight any specific current issues in the running of the Centre.



# Programs

## POLICY STATEMENT

We aim to develop and implement a balanced program that is stimulating, interesting and exciting which allows opportunities for children to play, explore and develop new skills and is appropriate to the developmental and leisure needs of all children. Our Centre's program will reflect the cultural diversity of today's society. Children and parents are encouraged to be actively involved in the planning and implementation and evaluation of the program.

## CONSIDERATIONS

*My Time, Our Place Framework for school age care*

*Belonging, Being and Becoming: The Early Years Learning Framework*

## PROCEDURE

- The Coordinator and staff members will be responsible for the development of a child-centered program, which reflects the philosophy of the Centre and meets the social, physical, recreational, intellectual, creative and emotional developmental needs of the children attending.
- Programs will be developed for all aspects of the Centre, indoor and outdoor activities, art and craft, menus, themes and special occasions.
- The written program will be prepared each week and be displayed for children and parents to see.
- Staff will be allocated time each week to program according to children's interest and staff abilities.
- Training in children's programming and activities will constitute part of staff development and be included as an item in the Centre's training plan.
- Children and parents are encouraged to incorporate their views, ideas and specific interests into the program.
- Staff will encourage feedback and input from children and parents in relation to the program.
- Staff will regularly talk to parents concerning their child's latest interests and activities and respond to parents' suggestions, requirements and expectations.
- Children will be encouraged to be actively involved in the planning, implementation and evaluation of the program, through discussions, conversation, group meetings and planning.
- All children's opinions will be considered. The program will be recorded and filed appropriately and made available for all staff, parents and children to see.
- The program will be flexible to meet the needs of the children and allow for spontaneity and enjoyment in the Centre.
- Staff will interact with children and where appropriate participate in activities and encourage children to try new activities.
- The program will be evaluated on an ongoing basis to ensure it is meeting the needs of individual children and the families in the Centre.

- In order to assist in building self-esteem, confidence and friendships, children will be encouraged to take initiative and develop leadership skills. They should be consulted about ways in which they can work in partnership with staff in running programs and taking leadership role.
- Individual children may be given responsibility for daily routines and in planning and organizing activities for their peers. At all times, this should be age appropriate, and fully supervised and supported by staff.
- Special group activities for older children may be organised as part of the program according to need. They should be implemented where there are suitable numbers of older children and adequate staffing levels can be maintained.
- Excursions may also be organised as part of the program.
- A daily evaluation of each program activity will be recorded noting levels of engagement and participation, and feedback on the level of enjoyment and interest. The sources of this feedback should be recorded. The evaluation will record issues to be taken into account in future programming.
- An evaluation report file will be maintained and reviewed regularly during the development of Centre programs.
- The program is to:
  - Be informed by the My Time, Our Place Framework for School Age care and The Early Years Learning Framework: Belonging, Being and Becoming
  - Promote the importance of play in the child's life
  - Reflect the cultural and language diversity of the local and wider community.
  - Consider all developmental areas.
  - Consider the age range of children.
  - Consider individual and group interests, needs, skills, talents and abilities.
  - Be balanced providing a range of indoor/outdoor activities, quiet/active times and areas, structured/unstructured activities.
  - Provide a variety and choice of activities for the children.
  - Be stimulating, interesting and exciting, to allow for opportunities to explore and develop new skills.
  - Provide a variety of toys and equipment available to all children regardless of age or sex.
  - Foster children's independence and self-help skills.
  - Foster friendships and encourage co-operative and responsible behaviour among children.
  - Provide children with opportunities for self-expression and self-direction.
  - Provide an environment, which will foster the child's self esteem.
  - Help children develop self-discipline skills through positive example and direction.
  - Help children to appreciate and care for each other and their surroundings.
  - Make the children feel welcomed and valued in the Centre.

# Policy on Removal and Assumption of Care of a child from the service by the Department of Communities and Justice

## Objective:

The purpose of this procedure is to provide guidance for children's services when responding to the **Department of Communities and Justice** request for removing a child or young person at immediate risk of significant harm, with or without a search warrant or Children's Court order.

## Overview:

**Department of Communities and Justice** and **NSW Police** have the legal authority to remove children from their parents' or usual carer's responsibility where:

- there are reasonable grounds to believe that the child or young person is at risk of significant harm AND
- the risk is immediate, and less intrusive actions insufficiently reduce the risk of harm.

**Department of Communities and Justice** also has authority to assume the care of a child while they are in attendance at a children's service (that is, where it is not in the best interests of the child to be removed from the premises where they are currently living/located), if the child is assessed as being in need of care and protection on returning to the care of parents or carers.

Section 34 of the *Children and Young Persons (Care and Protection) Act 1998* (the Act) authorises the **Department of Communities and Justice** to take whatever action is necessary to safeguard or promote the safety, welfare and well-being of a child or young person who is in need of care or protection.

The **Department of Communities and Justice** must ensure that the child's parents/carers are kept informed of the whereabouts of the child:

- by disclosing the whereabouts of the child where the disclosure would not prejudice the child's safety, welfare, wellbeing or interests, or
- by not disclosing high level identification information (including name and address of the carer; information that may identify the placement; or contact information) where the disclosure would prejudice the child's safety, welfare, wellbeing or interests

Section 234 (1) of the Act requires *the person conducting the removal* to provide the following information to the child (where over 10 years old):

- the person's name and authority to conduct the removal
- the reasons why the child or young person is being removed
- that the law authorises the person to conduct the removal
- what is likely to happen to the child or young person after they have been removed

This information may be provided verbally at the time, however must be provided in writing as soon as practicable in a language and manner the child or young person can understand.

The child (10+ years) must be informed they may contact any person and be assisted to contact that person.

**Department of Communities and Justice** is responsible for arranging a placement for the child, where required.

**Department of Communities and Justice** will not ordinarily return the child(ren) to their parents or carers until it assesses that it is safe to do so or the Children's Court orders it.

**Procedure:**

If the **Department of Communities and Justice** representatives arrive at the service to remove or assume the care responsibility of a child, please ensure this procedure is followed:

1. **Department of Communities and Justice** will contact the service to seek approval from the Coordinator/Authorised Supervisor or the most senior staff member on shift to collect the child, and advise about the need to remove or assume the child from the service, including the names of the representatives and the proposed arrival time (**Department of Communities and Justice** may be assisted by Police).
2. In preparation for the attendance of the **Department of Communities and Justice**, centre staff should sit with the child in a comfortable area, e.g. foyer, office or staff room (this will reduce distress to other children). Ensure that the other children at the centre will still be adequately supervised.
3. Do not contact the child's parent/s to advise them about the impending removal of the child.
4. Contact any supervisor or employer immediately to advise that your service will have a child removed from care by the **Department of Communities and Justice** representatives and the approximate time.

5. If there has not been a prior call from the **Department of Communities and Justice** or the representatives do not advise their names upon arrival the Coordinator/Authorised Supervisor should:
  - confirm the identification of the representatives (formal ID)
  - record the names and contact details of the representatives and the names of any Police in attendance
  - request that they sign the visitor in/out book
  
6. If there is any doubt about the identity of the **Department of Communities and Justice** representatives the Coordinator/Authorised Supervisor should contact the relevant **Department of Communities and Justice** Centre for verification or, if the removal is taking place outside office hours, contact the Child Protection Helpline on 133627 (the mandatory reporting number).
  
7. Where there is a Children's Court Order or a search warrant, **Department of Communities and Justice** representatives will serve an Order on the person at the service who appears to have the care and protection of the child and provide them with an information booklet about the removal (a child or young person may be removed with or without a search warrant or Children's Court Order depending on the circumstances).
  
8. Ensure a representative sign the child out and that parents have been informed. An official must remain at the service until it is confirmed that the parent has been informed of the child's removal from the centre.

#### **Staff Safety:**

If the parent or carer contacts and/or arrives at the service for information they should be directed to contact the **Department of Communities and Justice**, or to call the Child Protection Helpline on 132 111. Where possible a **Department of Communities and Justice** caseworker should remain at the centre to inform the parent.

#### **Complaints:**

Service staff or parents can also contact the **Department of Communities and Justice** Complaints Unit on 1800 000 164 if they have a complaint in relation to the removal.

# Roles of Management

## POLICY STATEMENT

We will operate a quality Centre and will ensure that we adhere to the legal requirements of a managing body. The Management will ensure that decisions are made in a proper way, according to the Centre's constitution and in the best interests of the service.

## CONSIDERATIONS

Management structure

Department of Family and Community Services, operational agreements

NSW Department of Community Services

Incorporation requirements

National Quality Standard Quality Area 7.3

Regulation 168(2)(l)

## PROCEDURE

- The management will ensure that the Centre is managed according to the funding bodies' requirements and that all relevant guidelines, acts, regulations and the constitution are adhered to.
- The management structure will be recorded with the duties clearly described.
- Members of the committee will consist of, parent users and interested community members.
- Office bearers will be elected each year at the Annual General Meeting.
- All committee members will know the requirements regarding:
  - Management structure, roles and duties.
  - Constitution.
  - Centre's philosophy and goals.
  - Policies and procedures.
  - Funding and operational agreements.
  - National Standards.
  - Meetings.
  - Financial requirements.
  - Employment responsibilities.
- A handbook for Management will be developed, updated and given to all the Management. Existing members are encouraged to give support to new incoming members.
- Membership of the management committee will be open to all parents using the service.
- Parents will be actively encouraged to participate.
- Decisions about the overall operation of the Centre will be made at the management committee level. Parents and staff will be kept informed about the committee's membership, meetings and decisions and have opportunities to have input into the management of the service.
- The Coordinator will attend meetings of management and present a written progress report regarding the running of the Centre and will provide information to the committee to assist in making decisions.

- A staff member may attend a meeting to raise issues on behalf of the staff and to provide feedback to other staff on the committee's decisions.

### ***ROLE OF THE COMMITTEE***

- The committee is responsible for the ongoing management of the Centre. Primarily this involves legal, financial and employment responsibilities.
- The responsibility for the day-to-day operations of the Centre however is delegated to the Coordinator.
- The committee meets in accordance with the constitution.
- General ongoing tasks of the committee include:
  - Ensuring the needs of the parents, children and staff are met.
  - Ensuring the smooth daily operation of the Centre.
  - Communication of relevant issues.
  - Publicity and public relations.
  - Development and review of policies.
  - Planning.
  - Financial management and administration.
  - Liaison and compliance with funding and licensing bodies.
  - Employment, supervision and direction of staff, ensuring appropriate industrial awards are adhered to.
  - Continued maintenance and repair of the building and equipment.
  - Addressing ongoing issues as they arise.
- Nominated management members may gain access to the services records, etc but only in accordance with confidentiality guidelines and when necessary to fulfill their management responsibilities. Confidentiality will be maintained at all levels at all times.

### ***SPECIFIC ROLES OF THE OFFICERS***

#### **President**

- Facilitate the smooth running of the management committee.
- Set the meeting agenda, which will cover all necessary business.
- See that the meeting is properly convened in accordance with the rules of the organization.
- Determine if a quorum is present at meetings.
- Chair the meeting, helping to make the meeting enjoyable, efficient and quick.
- Ensure the agenda is adhered to and that all members have a chance to contribute to the discussion.
- Help the meeting come to agreement.
- When decisions are made, clearly state what the decisions were, who will implement these and ensure this is recorded in the minutes.
- Summarise at the end of every meeting so that individuals have a clear understanding of tasks to be performed and decisions made.
- Close the meeting only after the business at hand has been properly conducted.
- Act as a spokesperson for the committee when necessary.

#### **Vice Chairperson**

- Perform the above duties in the chairperson's absence and to assist the chairperson in performing their tasks.

### **Secretary**

- Keep records of all business to do with the committee, including membership records, correspondence and minutes.
- Call meetings giving notice as required under the constitution.
- Read and table for the meeting all relevant incoming and outgoing correspondence.
- Deal with this correspondence as decided by the committee.
- Ensure that all correspondence relevant to the staff is forwarded to them as soon as possible.
- Before each meeting, organise the venue and type and distribute the agenda.
- Take the minutes for the meeting.
- After each meeting, copy and distribute the minutes to the members of the committee.
- Ensure the minute file is kept and updated and signed by the Chair at the next meeting.

### **Treasurer**

- Is responsible to oversee the following tasks which may be delegated as appropriate.
- Oversee the financial management of the Centre.
- Ensure that true and proper financial records are kept.
- Plan a budget for financial expenditure.
- Pay accounts promptly.
- Keep records of receipts and payments.
- Arrange for the banking of monies as soon as possible.
- Calculate staff wages, pay staff and maintain wage records.
- Deduct income tax and submitting to the Taxation Department.
- Allocation of petty cash and equipment allowance to the Centre.
- Present a written report and Income and Expenditure Statement to the Committee meetings.
- Ensure an annual audit is carried out.
- Ensure that all government and funding agreement requirements are carried out.

Some other roles may include:

### **Assistant Secretary**

- Take on some of the responsibility of the Secretary's role such as dealing with the correspondence. Perform the Secretary's duties in their absence.

### **Assistant Treasurer**

- Take on some of the Treasurer's responsibilities, such as staff payments and petty cash as decided by the Treasurer. Perform the Treasurer's duties in their absence.

### **Financial sub committee**

- Assist in all the above duties and to ensure that the financial aspects of the committee are properly maintained and in order.



### **Communications/Publicity Officer**

- Encourage interaction between parents and the committee.
- Act as the liaison person between the parents, the school, the community and the committee.
- Ensure that parent communication is effective and up-to-date (information handbooks, newsletters, etc.).
- Make statements to the press on behalf of the organisation.
- Publicise the activities of the organisation.
- Arrange for promotion material such as posters, pamphlets, newsletters etc.

### **Staff Liaison Officer**

- Act as the liaison person between the staff, and the committee
- Be a contact person on the committee, for staff if required, e.g. if need to inform them of their absence, issues or problems that they wish to seek the committees advice on.
- Encourage interaction between staff and the committee.
- Be on the sub-committee to employ staff for the Centre.
- Ensure new staff are oriented to their job.
- Encourage staff to participate in staff training.
- Be involved in staff evaluation and review.
- Ensure that staff communication is effective and up-to-date. Ensure that staff handbooks are updated and available.
- Ensure that staff records are updated.
- Ensure that staff receive their entitlements due under awards, legislation and other requirements (superannuation, taxation, pay and conditions, OH&S, etc.)
- Participate in the grievance procedure where necessary (for staff).
- Liaise with the Coordinator on the suitability and use of volunteers, work experience or practicum placements.

### **Fund raising Officer**

- Co-ordinate applications for grants and other forms of assistance, including ensuring that any conditions attached to that funding (e.g. acquittal reporting) are complied with.
- Arrange fund-raising activities, either directly or by delegation.
- Co-ordinate and oversee fund raising efforts.
- Be responsible for ensuring that fund raising money is collected and given to the Treasurer for banking.

### **Public Officer**

- The Committee should appoint a Public Officer to be responsible for submitting the Annual Returns.

# Service Access

## POLICY STATEMENT

We aim to provide places for Preschool and School aged children needing care during their time out of school hours. We will not discriminate against any families needing care however, priority of access will be determined by the Government guidelines and placement on the waiting list.

## CONSIDERATIONS

National Quality Standards Quality Area 6.1  
'Priority of access' guidelines from Funding Bodies

## PROCEDURE

- Our Centre will be available for children who currently attend preschool and primary school.
- No one will be discriminated against on the basis of his or her cultural background, religion, sex, disability, marital status or income.
- The Centre will try to meet any specific needs of the families in the local community
- The Centre will ensure that access to children and families with special needs is catered for.
- The Centre will follow the Commonwealth Government Priority of access guidelines for allocating a place at the Centre where a waiting list exists.
- A waiting list will be developed (if required) and updated regularly which identifies, priority of access eligibility, date placed on list and required days of care.
- Placement from the waiting list is determined by priority of access guidelines, siblings of children already in care, and date of placement on the waiting list.
- Parents are able to access their status on the waiting list on request.

# Sleep and Rest

## POLICY STATEMENT:

*Annandale After School Centre* believes that effective rest and, where necessary, sleep strategies are important factors in ensuring a child feels safe, secure and comfortable in the service environment. The service defines 'rest' as a period of inactivity, solitude, calmness or tranquility and is considered different to a child being in a state of sleep in regards to the school age care of children. Whilst the majority of children who access our service may never need to sleep or rest during their time at the service, it is important that educators can accommodate the rest needs of all children regardless of their age if it is needed. Examples of when this may be necessary are when children are feeling unwell, if they are tired from an excursion or if they have additional needs and their rest requirements are greater than their peers.

(National Quality Standards 2.1 and 2.2, Elements 2.1.1 and 2.2.1)

## CONSIDERATIONS:

### **Education and Care Services National Law & Regulations**

S165, 167

R81 (Sleep and rest)

R

### **National Quality Standards & Elements**

Standards 2.1 and 2.2

Elements 2.1.1 and 2.2.1

### **Links to other service policies**

Incident, Illness, Injury and Trauma, Providing a Child Safe Environment, Risk Assessment and staffing policies.

### **Other documentation/evidence**

- My Time, Our Place.
- Safety checks
- Risk assessments
- Evidence-base
- practice –
- [www.acecqa.gov.au/](http://www.acecqa.gov.au/resources/information)
- resources/information
- sheets/safe-sleep-and-rest-practices

## PROCEDURES:

### (a) **Safe Sleep Practices for all Children**

In accordance with the Education and Care Services National Law and Regulations, the service will ensure that the needs for sleep and rest of children in the service are met, having regard to the ages, developmental stages and individual needs of the children.

The service's Sleep and Rest Policy is based on recommendations from the evidence-based practice detailed on the ACECQA website.

The service consults with families about their child's individual needs and to be aware of the different values and parenting beliefs, cultural or otherwise that are associated with rest.

If a family's beliefs and practices are in conflict with the evidence-based practice recommendations, then the service will not endorse an alternative practice, unless the service is provided with written advice from a medical practitioner.

The service has a duty of care to ensure that all children are provided with a high level of safety when resting or sleeping while in care. Always – we monitor all resting children closely.

In meeting the service's duty of care, it is a requirement that management and educators implement and adhere to the service's Sleep and Rest Policy.

All children will rest with their face uncovered.

Children's rest environments are free from cigarette or tobacco smoke.

The rest environment, equipment and materials will be safe and free from hazards.

Educators monitor resting children at regular intervals and supervise the rest environment.

#### (a) **Rest for School Age Children**

If a school age child requests a rest then there is a designated area for the child to be inactive and calm, away from the main group of children. Also office can be used.

The designated rest area may be a cushion, mat or seat in a quiet section of the care enviro quiet, solitary play experiences are available for those school age children who request the need for a rest or time away from their peers.

Safe resting practices are relevant to school age children because, if they are resting or sleeping they should be monitored at regular intervals and a school aged child's face should be uncovered when they are sleeping as described above.

Light bedding is the preferred option if requested by the child.

Educators will show awareness of children's comfort and avoiding overcrowding when children are in need of rest or sleep. Other children will need to be moved away and reminded to show respect and lower their voices.

Our service will provide a range of both active and restful experiences throughout the program and support children's preferences for participation.

#### (a) **Safe Resting Practices for a Child who is Unwell**

Refer to the service's Incident, Illness, Injury and Trauma policy for additional information.

Child will be encouraged to rest in a quiet, comfortable and safe place.

Child will be encouraged to lie down & make themselves comfortable when displaying signs of being unwell.

Children will be allowed to find their own sleeping position.

All children will rest with their face uncovered. Yes – only a light sheet or blanket.

Children who are unwell (and waiting collection from a parent /guardian) will be given the

highest supervision priority and monitored constantly especially if the child has a high temperature, vomited or received minor trauma to their head. For example, a child who has received a blow to the head while playing sport.

Parents will be contacted immediately to make arrangements to collect the child as soon as possible.

**(a) The Rest/Sleep Environment and Equipment**

The service will ensure a rest or sleep space is available or can be made available to children at all times. This could include a quiet area with cushions, a book corner with beanbags, a lounge or armchair etc.

The area and equipment will be checked regularly as part of the services safety check and hazard identification practices.

Hygiene standards will be maintained when children use the rest/sleep area and equipment such as regularly washing pillow cases and blankets, particularly when a child is unwell.

There may be occasions where children with additional needs will need to sleep or rest in their wheelchairs or other equipment such as a modified stroller. It is important that children are not left alone whilst sleeping in these and that the restraints are sufficiently fastened. N/A at this point.

The service will ensure the room temperature, airflow, noise and lighting is conducive to sleep and rest when necessary. We will need to modify the environment where necessary.

Children's clothing items should be checked prior to them sleeping to ensure it doesn't present any hazards to them whilst asleep.

# Staffing

## **POLICY STATEMENT:**

*Annandale After School Centre* believes that educators are the most valuable asset to the quality of care provided and that employing and keeping high quality educators is imperative. We aim to employ the best possible educators and ensure they are fit and proper for employment in children's services. A flexible, harmonious working environment is maintained, which ensures the rights of employees are met at all times with educators employed under the appropriate awards and conditions. An orientation process is conducted for all employees to ensure they are aware of the values and practices of the service. Educators receive clear guidelines regarding the expectations for their conduct and are encouraged and supported to further their skills via professional development opportunities. Grievances are addressed quickly and effectively with the highest standards of confidentiality practiced at all times. All educators, volunteers, students and visitors will be informed of their expectations and requirements related to safety and the proper care of children. All practices will be in accordance with the OSHC Code of Professional Standards. We will encourage positive and open communication between all parties involved. (National Quality Standards 4.2, 7.1, 7.2 & 7.3)

## **PROCEDURES:**

### **(a) Staff Selection**

- QUALIFICATIONS:

- **Coordinator**

- ✓ Desirable, minimum 3 years' experience in a relevant field and demonstrated ability to work with children and staff.
- ✓ Holds a current first aid certificate or willing to undergo training to obtain this.
- ✓ A person of good character, who can be entrusted with providing adequate care for the welfare of the children.
- ✓ Awareness of child protection responsibilities.
- ✓ Has an interest and desire to work with children.
- ✓ Has an ability to communicate with adults, children and management.
- ✓ An ability to supervise and support educators.
- ✓ The Coordinator will be a minimum of 21 years of age.

- **Assistant Coordinator**

- ✓ Relevant training as above and/or relevant experience to successfully fulfill the position.
- ✓ Holds a current first aid certificate or are willing to undergo training to obtain this.

- ✓ A person of good character, who can be entrusted with providing adequate care for the welfare of the children.
  - ✓ Awareness of child protection responsibilities.
  - ✓ Has an interest and desire to work with children.
  - ✓ Has an ability to communicate with adults and children.
  - ✓ The assistant shall be a minimum of 18 years.
- RECRUITMENT: SELECTION PANEL
    - When a position becomes available, management will appoint a panel to conduct the selection process.
    - Three people will be on the panel, two members of management and the Coordinator if selecting an assistant. A convener of the panel will be nominated.
    - Where the position is for the outgoing Coordinator, a staff representative will be placed on the panel
    - The panel will:
      - ✓ Approve the job description and select criteria for the position.
      - ✓ Determine the method and placement of advertising and place the advertisement including notification of the Working With Children Check (WWCC).
      - ✓ Ask applicants to consent to screening.
      - ✓ Short-list the applicants.
      - ✓ Arrange interview questions, date and time.
      - ✓ Contact the applicants for interview.
      - ✓ Conduct the interviews.
      - ✓ Arrange for the WWCC to be conducted on the preferred applicant.
      - ✓ Ensure that approval for selected educator has been approved under WWCC.
      - ✓ Make a decision on a suitable applicant, which is put before management for final approval.
      - ✓ Offer the position to the successful applicant and contact the unsuccessful applicants after the position has been accepted.
      - ✓ Set date for the commencement of employment and orientation of the new person.
      - ✓ Prepare letter of employment and contract.
- RECRUITMENT: ADVERTISEMENTS
    - Advertisements shall be placed at least in the local and regional papers. The Sydney Morning Herald will also be considered.
    - Advertisements are to include:
      - ✓ Job title.

- ✓ Specific employment information, including hours of work and Award rate.
  - ✓ Include that a WWCC is required.
  - ✓ Advice to applicants to include their contact telephone numbers, a resume, a minimum of (2) referees with at least one a work reference, and full contact details.
  - ✓ Closing date and postal address for applications.
  - ✓ Contact name and number where the applicant can obtain more information.
- RECRUITMENT: INTERVIEW
    - The selection panel will draw up suitable interview questions, which relate to all aspects of the position and ensure equal opportunity guidelines are followed. The panel will decide who will ask each question.
    - The panel shall draw up a list of essential requirements for each answer.
    - No longer than 5 days after the closing date the panel will meet to discuss the applications, develop a short list and decide on the interview date and times.
    - An appropriate time frame (approximately 30 minutes) will be allocated to each interview, with a short break between, for discussion.
    - A nominated person on the selection panel will contact the applicants to determine the time and date of interview.
    - Each applicant will be given a copy of the job description and relevant child protection forms before the interview.
    - Each applicant will be asked the same questions with their answers recorded.
    - The panel can use a rating scale to evaluate each applicant's answers.
    - Management will discuss each applicant and their suitability for the position based on their answers, qualifications and experience, comments from referees, and the selection criteria drawn up by the panel.
    - Should management have difficulty in deciding between two applicants, a second interview for these applicants will be conducted, with new questions.
    - Management will then make a decision on the applicant for the job according to the selection criteria. The preferred applicant's referees will be contacted to confirm applicant's suitability and checked with the approved screening agency before offering the applicant the position in a 'child related' field.
    - Should the applicant decline the position, management will either make a second choice from the other applicants or if none are seen as suitable, re-advertise the position.
  - RECRUITMENT: NOTIFICATION
    - Applicants will be given an approximate time that they will be contacted regarding their success for the position.
    - A person on the selection panel will notify the successful applicant and negotiate a starting date. Preferably offers of employment will not be made until the screening check has been completed. If this is not reasonably practical, the employment is to be offered subject to the check being completed. Applicants are to be notified of this condition.



- A letter of confirmation will be sent to successful applicant requesting acceptance in writing.
  - After the appointment has been made and accepted the other applicants will be notified that the position has been filled.
- **RECRUITMENT: EQUAL EMPLOYMENT OPPORTUNITIES**
    - All educator positions will be advertised according to Equal Opportunity Legislation.
    - No one will be discriminated against on the basis of their cultural background, religion, sex, disability, marital status or income.
    - All applicants and referees will be asked the same questions.
    - All applicants will be selected according to equal opportunity guidelines.
    - Selection will be based only on suitability for the position based on the selection criteria, which have been drawn up by the panel. The criteria will cover issues such as qualifications and experience, appropriate knowledge to meet the children's needs, good communication skills, and demonstration in being a fit and proper person for the job, including Working with Children Check and appropriate answers to the interview questions.

**(b) Conditions of Employment:**

- All relevant conditions set down by the award will apply to all employees.
- This includes sick leave, annual leave, rostered days off, overtime, jury duty, study leave, carers leave etc.
- Management will ensure they are aware of the appropriate conditions and keep up to date in relation to any changes in the Award.
- Educators are encouraged to remain up to date with their appropriate conditions and inform management of any changes.
- Educator appraisals will take place after a period of one month in the position.
- Appraisals will then be conducted on an annual basis.
- All educators will maintain professional behaviour at all times.
- All grievance issues are to follow the appropriate procedures as outlined in the grievance and discipline and dismissal policies.
- Educators will be paid fortnightly in the form as advised by management.
- Annual leave will be taken as negotiated with management.
- Annual Leave when necessary, will be rostered to ensure the required staffing levels are maintained at all times.
- Applications for leave must have 4 weeks prior notice and be approved by management.
- Management, based on each individual's request, will determine applications for leave without pay.
- Each educator will supply and record their full name, address, date of birth, evidence of any qualifications they hold including first aid and the identifying number of the employees Working with Children Check.

**(c) Staff Orientation:**

- A member of management and the Coordinator will conduct the orientation process as soon as possible after the applicant has accepted the position.
- The orientation process will include:
  - ✓ Introductions to existing educators and management
  - ✓ Guided tour of the service
  - ✓ Being shown where all relevant records are kept
  - ✓ Discussion about working arrangements and expectations, including professional code of conduct and duty of care
  - ✓ Information about the review and appraisal system
  - ✓ Opportunity to ask any questions regarding the service or expectations.
  - ✓ The new educator will be provided with the following information:
    - Service operation and hours.
    - The service philosophy and policies.
    - Parent information book.
    - Service's code of conduct.
    - Job description.
    - Emergency procedure duties.
    - List of current educators, management and their positions.
    - Terms and conditions of employment.
    - Union membership information.
    - Superannuation information and forms.
    - Taxation forms.
    - Probation period and review and appraisal procedure.
    - Appropriate lines of communication with educators and management.
- After the period of one week, management will sit down with the new employee to address any further issues they may have once they have been in the service.
- All staff will be informed of their responsibilities as a Mandatory Reporter as part of their orientation and induction process. This will involve discussion regarding their current understanding, use of this policy and resources and access to Child Protection training. Information related to sexual grooming will also be provided upon orientation to ensure that staff are fully aware of the signs and limits related to appropriately interacting with children.

**(d) Staff Professionalism:**

- The OSHC Code of Professional Standards, duty of care and expectations will be discussed in the initial orientation process of all new educators.
- Educators will be made aware of their duty of care and their responsibility in relation to supervision, health and safety of the children.
- Professional behaviour in all areas will be reviewed as part of the ongoing employment of all educators.

- Management, in conjunction with the Coordinator, will immediately address any breach in the professional expectations outlined. If the concern involves the Coordinator, two representatives from management, will conduct the discussion.
- All discussions will be recorded, and standard of behaviour and expectations clearly explained.
- Any further problems will be addressed as per the discipline procedure.
- Educators will be made aware of the services philosophy and policies and will be expected to follow these. Should educators have any concerns with the policies, they are to raise this with the Coordinator or management liaison officer.
- Educators will be expected to know, understand and perform their duties as per their job description.
- Educators will be expected to maintain and improve their skills through participation in training and development opportunities. Management will ensure that finances are made available in the budget training.
- Educators will be expected to start duties on time.
- Educators will be expected to dress appropriately for their duties.
- Educators must not attend work under the influence of drugs or alcohol.
- Educators should not attend work when they are unfit to do so due to injury or sickness and must inform the service as soon as possible.
- Educators will use only suitable language that is not offensive to other educators, families and children.
- Educators will be expected to follow all confidentiality issues.
- The service is a smoke free zone. Educators may not smoke in or around the building, or in the sight of the children.
- Educators will be expected to know and follow the child protection policies.
- The quality of the service and positive working environment is dependent on good educator and parent relationships. Educators will follow proper communication procedures as outlined in the appropriate policies and procedures.
- The maintenance of good teamwork will be an expectation outlined in all job descriptions.
- Any conflicts that arise must be addressed as outlined in the grievance procedure.

**(e) In-service Training and Development:**

- Management will ensure that sufficient funds are made available in the budget for all in-service training and development.
- The Coordinator will inform management of any specific training and development needs of the educators.
- Appraisals and the services requirements will be used to ascertain further training needs.
- The Coordinator, in conjunction with management, will access all training available and determine what will be attended and by whom.

- Where possible a yearly plan of training will be made, including dates, educators attending, and costs.
- All educators will be given the opportunity to be involved in some form of training throughout the year.
- All educators will be given opportunities to upgrade their qualifications in line with the National Quality Framework.
- A variety of training methods will be used including:
  - ✓ Internal workshops, which can be conducted by educators or outside presenters.
  - ✓ External meetings with other service to exchange ideas.
  - ✓ Time allocation made to educators to review any new resources that may be of value.
  - ✓ External workshops, conferences and seminars.
  - ✓ Accredited short courses provided by registered training organisations.
- Educators are encouraged to share relevant skills and knowledge they obtained from any training with the other educators in staff meetings or where more time is required in an internal workshop.
- All educators will be considered to be at work for the duration of any training activity they attend for the service.
- The service will cover the costs of all authorised training. The individual however will cover tertiary study costs.

**(f) Review and Appraisal:**

- All educators will be informed of the appraisal system on acceptance of the position and given details in the orientation process.
- An initial review will be undertaken after a period of one month in the position.
- Appraisals will then be conducted on an annual basis.
- Educators and management will agree with the format of the appraisal system, which may be updated to more suitable systems after review, discussion and endorsement by management and educators.
- All educators will be given at least two weeks notification of an upcoming appraisal and a convenient time arranged for both parties.
- The appraisal system shall clearly state the expectations for each position and identify clear performance measures.
- The appraisal system shall ensure two-way communication is maintained and is used as a positive avenue for improving staff performance.
- The appraisal system can be used, as a tool to identify future training needs of the educators.
- At the completion of the appraisal an action plan will be developed identifying areas of training, and action to be taken and goals set for each educator. This will be agreed to and signed by both parties.
- Where it is identified that the educator is not meeting the required performance measures then the following will be undertaken:

✓ Action plan developed to identify areas for improvement. This will include a Policy endorsed 2<sup>nd</sup> November 2021 Evaluation and review 2<sup>nd</sup> May 2023

time frame for further review.

- ✓ Training areas identified and put into place as soon as possible.
  - ✓ Support and guidance given to the educator to help them through the process and assist them in achieving the required standards.
  - ✓ The support can be given through the Coordinator or the management liaison officer.
  - ✓ A record made of the above, dated and signed by both parties.
  - ✓ Should no improvement be made by the next review then further action will be taken.
- If the educator is still dissatisfied, then they should put their concern in writing asking for the decision to be reviewed or that they wish to pursue the issue further through other avenues. These could include the union or mediation.

**(g) Grievance Procedures:**

• GENERAL GRIEVANCE PROCEDURE

- On commencement, all educators and management members will be given the guidelines for grievance procedure.
- To facilitate communication between educators and management, management will annually appoint one of its members as the Liaison Contact.
- Educators and management will annually be offered the opportunity to participate in some form of conflict resolution training.
- All persons involved in the grievance should attempt to resolve the issue through informal discussion and use of problem-solving techniques.
- Persons directly involved in a legitimate grievance process will be expected to continue to conduct themselves at and around the service in a professional manner.
- Malicious or vexatious claims will not be tolerated and will be the subject of disciplinary action where appropriate.
- Any problem, complaint or concern arising between educators or between management should be dealt with by the persons concerned as close to the event as possible in order to avoid an escalation of the issue.
- Meetings of educators and/or management provide regular opportunities to raise and discuss general issues or concerns about the service. All discussions will be conducted in a confidential manner and involve only relevant persons. Only when all parties agree there is a benefit, should the discussion broaden to involve children and/or parents as appropriate.
- Either party may withdraw their grievance at any time. However, where the grievance identifies other issues of concern, management may decide to investigate those other issues.

• FORMAL GRIEVANCE PROCEDURE

- Where the resolution of a grievance has not been satisfactorily achieved through the informal procedure, then a more formal approach should be taken.
- Grievance between educators:

- ✓ As appropriate, the Coordinator, or the Liaison Contact should now be briefed about the grievance and its current status.
- Grievance between committee members:
  - ✓ The whole committee should be briefed.
  - ✓ The grievance(s) will firstly be investigated by the Coordinator or management as appropriate.
- The investigation will involve:
  - ✓ Interviews with both parties and/or witnesses
  - ✓ Assessment of relevant documentation e.g., job descriptions, policies etc.
  - ✓ Preparation of a clear description of the issue
  - ✓ Arranging a formal meeting between parties
- A meeting will be conducted by a neutral third person. This person will manage the conduct of the meeting, be impartial having no input to the content of the meeting and will prepare a written record of the outcome(s) of the meeting.
- Where the service cannot identify a suitably impartial person, management will agree to invite a qualified mediator to assist.
- The meeting will:
  - ✓ Identify the issue(s) of concern and persons who are involved
  - ✓ Arrange all parties to be involved and to put forward their views
  - ✓ Identify alternative solutions
  - ✓ Attempt to reach a mutually satisfactory resolution of the issue(s).
- At formal grievance resolution meetings all parties are entitled to invite a support person to attend. This person does not provide input to the meeting but may offer support and advice to their party during the meeting.
- A confidential written record of the outcome of the meeting will be given to all participants who are to acknowledge their agreement by signing the record. A signed copy will be kept with educator files.
- The neutral party will inform management of the meeting's outcome(s).
- Management will ensure that outcomes are included in job descriptions or service policies as appropriate.
- If one party remains dissatisfied with the meeting's outcome(s) then this should be put in writing to the management committee asking that the process be reviewed or stating that they intend to pursue the grievance further through other suitable avenues.
- Where the issue of grievance is between management and educators and concerns standard of work performance or work practice, then the discipline procedure will be followed.

**(h) Disciplinary Action:**

- It is important that the educators are fully aware of their expectations as an employee in the service and that clear guidelines are given regarding educator's duties, code of conduct and professionalism.
- Management will ensure that all educators are given clear job descriptions and orientation into the position with opportunity to clarify any issues.

- Educators are responsible to address any concerns and clarify any issues in the job description or expectations that they are unsure of.
- Educators are encouraged to maintain good working relationships and have a commitment to maintaining a quality standard of work.
- Educators will be given clear notification should their standard of work or conduct fall below what is expected and outlined in their job description.
- Educators have the right to appeal against any allegation and the right to speak on their behalf or to have a union representative appear on their behalf.
- The following steps will be followed to deal with poor work performance or conduct. There may not be the need to go through all the steps when the issue is resolved however staff should be aware of the whole process.
- Should educators fall below clearly identified standards then the Coordinator or Management will:

- STEP 1: VERBAL WARNING.

1. Give a verbal warning as soon as possible indicating the specific problem regarding the performance of their work or conduct. The issues must clearly relate to the job description.
2. Indicate what should happen to improve the situation and how the educators can improve their performance.
3. Identify any support needed to assist the educator to make the changes and take steps to implement these.
4. Indicate how the improvements will be measured, and when a review will take place. (1-4 weeks depending on the circumstances)
5. Give an opportunity for the educator to respond to the concerns and seek union representation if required.

If this resolves the issue, then there is no need to go any further.

- STEP 2: WRITTEN NOTICE.

1. Where the problem continues to occur the educator will be given written notice of the complaints against them.
2. A formal documented interview with management will take place. The educator should attend and has the right to reply and discuss any complaints against them, or to be represented by a union member or other representative of their choice.
3. The educator will be given at least 48-hour notice of the meeting.
4. Minutes will be taken of the meeting and copy put on the educators file and given to the educator. The educator may attach a written reply to the minutes.
5. The aim of the meeting is to negotiate how the situation may be improved.
6. The educator will again be given specific indication of where their performance standards are not being met, indicate where changes are required and ways of achieving these, and told the method and date of review of their performance.
7. The educator will be granted another probationary period.
8. The educator will be informed at this stage that termination will be considered if no changes occur.

If this resolves the issue, then there is no need to go any further.

○ STEP 3: FINAL WRITTEN WARNING.

1. If the problem still persists another meeting of management should be called, and the educator given notice to attend.
2. The matter should be discussed as per the first meeting and further action considered.
3. At this stage the educator will be given a "final written warning".
4. Again the educator has the right of reply and can discuss the situation. They also have the right to have a union representative or person of their choice attend the meeting.

If this resolves the issue, then there is no need to go any further.

○ STEP 4: TERMINATION OF EMPLOYMENT.

1. If the problem still continues after the 3 warnings, another special meeting of management will be called, and a decision made as to the employment of the educator.
2. If management believes that the educator's performance is unlikely to improve then the educator will be dismissed.
3. A written notice will be given indicating date of dismissal (1 week from notice) and reasons for dismissal.
4. The educator may be paid out in lieu of such notice.

● PROCEDURE FOR DEALING WITH SERIOUS UNACCEPTABLE BEHAVIOUR:

- Where an educator in the workplace:
  - Intentionally endangers life.
  - Is found stealing.
  - Reports to work under the influence of drugs or alcohol.
  - Inflicts or threatens physical or sexual abuse or harassment.
- The Coordinator or management will suspend the employee without loss of pay pending an investigation.
- The investigation is to be completed within 72 hours and an interview date determined.
- If the employee is a union member the union representative will be informed.
- The interview is to be attended by the Coordinator, a nominated representative of management, the person reporting the unacceptable behaviour and the union representative if desired. The employee is to be advised formally of the findings of the investigation and the action being taken.
- When immediate termination is required, a dismissal notice is prepared at the interview. When continued employment is recommended a warning letter will be issued.
- All the relevant records will be recorded on the employee's file.
- If the employee is vindicated of the accusation, all relevant formal documentation is to be removed from their file.



**(i) Relief Educators:**

- The service will employ relief educators on a casual basis to fill short-term vacancies or absences
- The Coordinator will keep a register of relief educators, which will be maintained and updated regularly.
- A file recording experience, qualifications, Prohibited Employment Declaration and completed Working with Children Check, will be kept with the register
- Unsuccessful applicants for positions vacant who seem suitable will be asked if they would like to be placed on the relief educator list.
- Unless in an emergency, all relief educators will need to have been through an interview with the Coordinator, have referees and references checked, and are deemed a fit and proper person to care for the children.
- When no one from the services list is available to fill the position, the Coordinator may contact another Out of School Hours service to employ someone they recommend from their relief list
- When necessary to employ relief educators prior to the checking process being completed, work requirements will be modified to include additional supervision or limiting their direct access to children.
- Job descriptions will be drawn up for all relief educators.
- Relief educators will be asked to fill out a casual work agreement before commencement of duties.
- The Coordinator will, where possible, provide a modified induction to the service, which will include a tour of the service, introductions to educators, a copy of the staff handbook, job description for relief educators, code of conduct and copies of relevant policies. The Coordinator will ensure that they are fully aware of their duties and the services expectations prior to commencement.
- Relief educators must adhere to all areas of confidentiality.
- Anyone who will be collecting children from school will be given clear instructions as to the meeting place, list of children to be collected, special service identification such (so the children know they may go with that person) and a copy of the procedure for missing or absent children.
- All relief educators will be paid the appropriate wage and minimum hours as outlined for casual educators under the relevant award.

**(j) Volunteers, Students and Visitors:**

• VOLUNTEERS

- All volunteers must be interviewed by the Coordinator and provide two suitable referees and where possible references, before they will be able to work in the service. All volunteers will be required to comply with the WWCC guidelines.\
- A job description will be drawn up for volunteers, clearly outlining their duties and expectations of the service.
- The Coordinator will provide a modified induction to the service, which will

include a tour of the service, introductions to educators, job description for volunteers and code of conduct. The Coordinator will ensure that they are fully aware of their duties and the services expectations.

- All volunteers will be required to sign on and off.
- Volunteers will be given a copy of relevant policies such as behaviour management.
- Volunteers are not to discuss children's development or other issues with families.
- Volunteers must adhere to all areas of confidentiality.
- Volunteers should never be left alone with or in charge of any children.
- Volunteers will not be used to do tasks that the employed educators normally do.
- Volunteers will be supernumerary when calculating basic educator: child ratios, except on excursions.
- Volunteers will be invited to take part in social activities of the service.

- **STUDENTS**

- Placements will be offered to high school students who wish to gain work experience as part of a school program.
- The participating school must initiate the work experience, identify the student's suitability and work with the Coordinator in relation to times and expectations.
- The school must provide written authorisation for the student and a copy of their insurance. This will be kept on file.
- Students attending other registered training organisations and studying a relevant field, such as childcare, teaching, recreation or community services. The training organisation must initiate the placement, identify the student's suitability and work with the Coordinator in relation to times and expectations. The training organisation must provide written authorisation for the student and a copy of their insurance. This will be kept on file.
- All placements will be negotiated through the Coordinator and placement be only accepted on the discretion of the Coordinator based on issues such as educators ability to supervise and be available to help the students.
- After the Coordinator sees the placement as worthy, they will seek approval for the placement from management at the next meeting or if unable to do so prior to the meeting, get approval from the Chairperson or other delegated management member.
- Students will be provided with guidelines identifying their responsibilities, expectations and code of conduct while at the service.
- Students should be made aware of relevant policies such as behaviour management.
- Students are not to discuss a child's development or other issues with the families.
- Students should adhere to all policies concerning confidentiality.
- Students should never be left alone with or in charge of any children.
- Students will not be used to do tasks that the employed staff normally do.

- VISITORS

- Visitors may be invited to the service to stimulate the children's program.
- Visitors could include local people or family members with a skill or ability to share with the children and educators or local community resources such as police, fire brigade etc.
- All other visitors must make an appointment to see the Coordinator at a convenient time.
- Professional access to the service will be at the discretion of the Coordinator or management or when required by law to do so.
- Professionals include, union representatives, State and Federal Government Departmental Officers, Occupational Health and Safety inspectors, building inspectors and police officers.
- Any unwelcome visitor will be calmly asked to leave the service. If they refuse, the Coordinator or educator directed by the Coordinator will call the police for removal.
- No educator is to try to physically remove the unwelcome person, but try to remain calm and keep the person calm as far as possible.

**(k) Educator: Child Ratios:**

- The educator: child ratios as outlined in the National Standards will be met at all times.
  - ✓ There will be a maximum of 15 children to 1 educator.
  - ✓ There will be a maximum of 8 children to 1 educator for excursions.
  - ✓ There will be a maximum of 5 children to 1 educator for swimming.
- There will be a minimum of 2 educators present at all times.
- When educators are sick or unable to attend work, appropriate relief educators will be employed to meet the standards.
- For an emergency or if an educator becomes sick, a replacement should be obtained where possible before the educator leaves the service.
- If a relief educator is unable to be obtained, suitable volunteers may be employed on a casual basis to cover the numbers.
- Volunteers will only be counted on excursions to make up the higher number of educators required, or when temporarily employed.
- Students will not be counted as part of the educator: child ratio, at any time.

**(l) Communication:**

- EDUCATORS/MANAGEMENT

- Educators and management are to treat each other with respect, courtesy and understanding.
- Appropriate language is to be maintained at all times.
- The Coordinator is the main line of communication between the educators and management.

- Educators can raise any issues with management through the Coordinator. The Coordinator will ensure that this is drawn to management's attention through the monthly report.
- Where necessary, educators will be invited to management meetings to discuss their concerns.
- Where the matter is seen as urgent, the Coordinator may raise the issue with management prior to the meeting and discuss if there is a need for immediate action to be taken at that time.
- If educators have an issue, they do not wish to address with the Coordinator they may personally write to management identifying the problem and asking for the help of management. A copy of this letter must be given to the Coordinator.
- The issue should be raised at the next management meeting. The educator involved will be asked to attend the meeting to personally discuss the issue.
- Where there is a distinct conflict between an educator and management, the educator or management member can act on this as per the grievance procedures. A mediator or union representative can be brought in to discuss any concerns that have not been able to be resolved by the normal procedures.

- EDUCATORS/FAMILIES

- Educators will create a comfortable and supportive environment for families and strive for open communication and good relations.
- Educators and families will treat each other with respect, courtesy and understanding.
- Appropriate language is to be maintained at all times.
- Educators will not be judgmental towards families and will respect their need to use childcare.
- Educators will accept family's individual differences in raising their children and in all cultural issues.
- Educators will ensure families are greeted and fare welled in all sessions.
- Educators will maintain regular, open communication with families. Educators should inform families personally about anything relating to their children as an ongoing process. This could be praise about the child's day or activities, any problems the child might have had in the day, issues of behaviour that may have been a concern and so on.
- Educators will regularly talk to families about the child's interests or activities and respond to suggestions from the families.
- Educators will regularly talk to families about the child's cultural needs and celebrations and respond to these.
- When family members contact the service to see how a child is settling in, educators will provide them with information regarding the child's participation and wellbeing.
- Conversations will be maintained at a positive level.
- Communication with families will be maintained in a variety of ways such as:
  - ✓ Greeting and fare welling

- ✓ Personal conversations
  - ✓ Notice boards
  - ✓ Parent handbooks
  - ✓ Newsletters
  - ✓ Information from management
  - Educators will ensure that families are fully aware of all lines of communication and ensure these are followed.
  - Educators will be aware of their limitations in relation to family's problems and ensure they are referred to the appropriate people when required.
  - Families and educators are requested to maintain confidentiality at all times.
- EDUCATORS/CHILDREN
    - Educators and children are to treat each other with respect, courtesy and understanding.
    - Educators will respect children's opinions and encourage their participation in the planning of the program and in establishing a code of behaviour for the service.
    - Appropriate language is to be maintained at all times.
    - Educators will use appropriate voice tone and level when talking to children. Shouting will be avoided.
    - Educators will be supportive and encouraging and communicate to children in a friendly positive and courteous manner.
    - Educators will greet and farewell children each session.
    - Educators will initiate conversations with all children and develop an understanding of the child and their interests.
    - Educators will give praise and positive feedback to the children as often as possible.
    - Educators will form friendly and warm relationships with the children in their care.
    - When communicating with children, educators will ensure that they are understood and to communicate at the child's level.
    - Children will never be singled out or made to feel inadequate at any time.
    - Educators will not threaten or verbally abuse the children in any way.
  - EDUCATOR/EDUCATOR:
    - Educators are to treat each other with respect, courtesy and empathy.
    - Appropriate language is to be used between educators at all times.
    - Educators are expected to work together as a team and be supportive of each other in the workplace.
    - Staff meetings are appropriate times to raise matters of interest or concern to other educators. The Coordinator will arrange for educators contributions to be placed on the meeting Agenda.

- Educators are expected to read minutes of meetings and to take notice of changes to service policy and procedures.
- Educators are to read the daily communication book prior to the commencement of each roster.
- Educators will familiarise themselves with the content of all notices displayed around the service.
- An educator with concerns about the work practices or standards of another educator will firstly approach that person to discuss the matter. If the matter remains unresolved, then the grievance procedures will be followed.
- Educators should not unnecessarily involve families or other educators in their matters of grievance or complaint.

**(m) Staffing Arrangements:**

- The service's Nominated Supervisor will be responsible for the service at all times regardless of their attendance at the service.
- In the absence of the Nominated Supervisor at any time, a Responsible Person will be selected to be in charge of the daily operation of the service. They will be chosen based on the following: Are they a fit and proper person, evidence of skills, knowledge and experience working with children, and declarations relating to knowledge of the NQF, National Law and Regulations, MTOP and Child Protection training, including the completion of the accredited assessment task.
- This person will not adopt the Nominated Supervisor's responsibilities during this time. The service will display the details of the Nominated Supervisor and Responsible Person at all times the service is operating.
- A Responsible Person is covered under the Service's Supervisor Certificate.
- The service will appoint an Educational Leader and display the name of this person for families should they wish to discuss the service's programming practices.
- At all times the service is operating, there will be at least one educator who holds a current approved first aid, anaphylaxis and asthma management qualification.
- Educators will record their name and the hours they have worked directly with children each time they are working in the service. This record will also include the name of the Responsible Person, the Educational Leader, and the names of any students and visitors.

**CONSIDERATIONS:**

<b>Education and Care Services National Regulations</b>	<b>National Quality Standard</b>	<b>Other Service policies/documentation</b>	<b>Other</b>
r46, r54, r82, r83, r84, r118, r136,	Standard 2.3, Standard 3.1,	- Staff Handbook - Providing a Child	- Child Protection Legislation.

r146, r147, r148, r149, r150, r151, r168, r170, r173, r176, r181.	QA4, QA5, Standard 6.1, QA7.	Safe Environment Policy. - Interactions with Children Policy. - Governance and Management Policy - Confidentiality Policy. - OSHC Code of Professional Standards.	- Workplace Health and Safety Legislation. - My Time, Our Place. - Children's Services Award 2010.
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**ENDORSEMENT BY THE SERVICE:**

Approval date: \_\_\_\_\_

Date for Review: \_\_\_\_\_

# Sun Protection

## POLICY STATEMENT

Annandale After School Centre aims to balance the risk of skin cancer from too much sun exposure with maintaining adequate vitamin D levels in our children. We aim to take a sensible approach to sun protection in our service that empowers children to take responsibility for their own health and wellbeing (“My Time, Our Place and “Belonging, Being and Becoming.” Outcome 3).

The sun’s ultraviolet (UV) radiation is both the major cause of skin cancer and the best source of vitamin D. We need vitamin D to maintain good health and to keep bones and muscles strong and healthy.

We aim to ensure that all children in attendance at the service when the UV forecast is 3 or above will be protected from harmful rays of the sun. All staff will model appropriate sun protection behaviour and enforce the sun protection policy.

Evidence suggests that childhood exposure to UV radiation contributes significantly to the development of skin cancer in later life. Ultraviolet (UV) radiation cannot be seen or felt and can be high even on cool and overcast days. This means our service educators will teach children not to rely on clear skies or high temperatures to determine the need for sun protection and provide them with exposure to resources and materials that will reinforce this message and assist children to understand the complexities of their environment (“My Time, Our Place and Belonging, Being and Becoming.” Outcome 2).

Strategies for teaching sun protection in the service will be based on children actively practicing and monitoring their own implementation of sun protection strategies as active learners (“My Time Our Place.” Outcome 4). This will include children having opportunities to access UV Alerts and monitoring the exposure to the sun of both themselves and their peers (“My Time, Our Place and Belonging, Being and Becoming.” Outcome 5).

Annandale After School Centre believes that implementing a best practice sun protection policy will have a major impact on reducing their chance of our children developing skin cancer in later life.

## CONSIDERATIONS

National Quality Standard 2 Element 2.3.2 “Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury”.

National Quality Standard 6 Element 6.3.2 “Continuity of learning and transitions for each child are supported by sharing relevant information and clarifying responsibilities”

National Regulation 114 “Outdoor space – shade”

National Regulation 100 “Risk assessment must be conducted”

WHS Act and Regulations 2012

NSW Cancer Council [www.cancercouncil.com.au/reduce-risks/sun-protection](http://www.cancercouncil.com.au/reduce-risks/sun-protection)



# PROCEDURE

## Scheduling of Activities

- The following procedures will be implemented when scheduling activities when the UV Rating is 3 or above.
- Where appropriate, outdoor activities will be scheduled outside of peak UV times or planned for shaded areas with sun protection used for all children.
- In non-daylight saving time (April-Sept) outdoor activities can take place at any time as long as sun protection (hats, clothing, sunscreen, shade) is used when the UV Index is 3 or above.
- Where the UV Index for that day is not known, sun exposure will be minimised between the hours of 10am and 2pm (11am and 3pm during day light saving).
- When planning excursions, sun protection will be included in the risk assessments for service participation.
- All sun protection practices will be maintained while staff are escorting children to and from school and on any excursions.

## Shade

- Structured outdoor activities will be held in shaded areas whenever possible when the UV Index is 3 or above
- The service will identify shade options at various times of the day and the year within the outdoor space and promote these to the children. Educators will set up activities and play spaces to make best use of the shade.
- Children will be encouraged to use available shade when playing outside during times when the UV Index is high.

## Clothing

- Educators and children will wear protective clothing when outside during periods of time when the UV Index is 3 or above.
- When outdoors children will be encouraged to wear sun-safe clothing with sleeves, collars or covered necklines.
- Midriff, crop or singlet tops do not provide adequate protection and are not recommended. The Family Handbook will remind families and children of the appropriate clothing to wear to the service to meet the sun protection policy.

- Children will be encouraged to wear sun-safe hats that protect the face, neck and ears when outside. Recommended hats are bucket hats and broad brimmed hats. Baseball caps and visors are not recommended.
- All educators will be required to wear tops with sleeves and collars or covered necklines and longer style skirts, shorts or trousers.
- Children who do not have a hat must play in a sheltered area. Staff are to enforce the rule that where a child has not got a hat or is wearing clothing that is not recommended as appropriate they must access shaded areas in which to play.

## Sunscreen

- SPF 30+ broad spectrum water-resistant sunscreen will be available at the service for children and educators to use.
- Permission to apply sunscreen will be included in the service enrolment form. Educators will respect the parents' right to refuse authorisation to apply sunscreen however will require children to wear appropriate clothing or play in the shade.

## Role Modelling of Staff

- Educators will wear protective clothing and practice a combination of sun protection strategies (sun-safe hats, clothing, sunglasses, SPF 30+ broad spectrum water resistant sunscreen) when in attendance at the service.
- Wherever possible, staff will seek out shade when undertaking outdoor supervision in months where the UV Alert is 3 or above.
- Educators will use opportunities to discuss with children sun protection and demonstrate a positive and proactive approach to the management of sun protection in the service.

## Collaboration with Children

- Children will be provided with opportunities to take leadership roles in managing sun protection.
- Children will be encouraged to access the internet/ newspaper to check the UV ratings for the day and advise educators of the times when the UV Index will be 3 or above.
- Opportunities for children to set alarms for when the UV Index increases above or drops below 3 will be provided and children assigned duties regarding UV reminders, hat reminders and management of sunscreen.
- Children will be reminded that they can remove their hats when the UV Index falls below 3.

## Education & Information

- The sun protection policy will be available to all families using the service.

- Parents will be informed of the sun protection policy including appropriate clothing requirements on enrolling their child in the centre through the Family Information Booklet.
- Where children have allergies or sensitivity to the sunscreen, parents will be asked to provide an alternative sunscreen, or the child encouraged to play in the shade.
- The centre will incorporate sun and skin protection awareness activities in the program and provide notices and posters about the topic from the Cancer Council NSW as appropriate.

## Review

This policy is adopted as standard for all OSHC services in NSW and endorsed as SunSmart by Cancer Council NSW and Network of Community Activities.

This Policy will not be changed unless advised by Cancer Council NSW and Network of Community Activities.

# Out of School Hours Sun Protection Policy

To join the SunSmart Program Out of School Hours (OOSH) services should use the Cancer Council NSW Sun Protection Policy to adhere to the 10 recommendations.

Service name: \_\_\_\_\_ Date: \_\_\_\_\_

**This policy will support your service to meet the requirements of the Framework for School Age Care in Australia (My Time, Our Place), Education and Care Services National Law, the Education and Care Services National Regulations and the National Quality Standard (NQS). The policy cannot be altered until the next review.**

- **My Time, Our Place** The Framework for School Age Care in Australia
- **National Quality Standard** – All seven quality areas
- **Education and Care Services National Regulations** 113 – Outdoor space - Natural Environment, 114 'Outdoor space – shade' and Regulation 168 education and care service must have policies and procedures 2

## Rationale

Australia has the highest rate of skin cancer in the world. Skin cancer, including melanoma and non-melanoma, is the most common cancer in Australia.

Exposure to ultraviolet (UV) radiation in childhood is a major risk factor for the development of skin cancer later in life. By implementing a best-practice Sun Protection Policy, OOSH services can help protect staff and children from UV radiation and teach children good sun protection habits from an early age to reduce their risk.

Sun protection times are a forecast for the time of day UV levels will reach 3 or above. At these levels, sun protection is recommended for all skin types and the policy areas should be implemented. In NSW, UV levels are high enough (UV 3 or above) to damage unprotected skin most months of the year. UV levels are particularly high during the summer months, and highest in the middle of the day. UV levels and daily sun protection times can be accessed via the SunSmart App or Cancer Council Australia's home page to determine sun protection requirements.

## Recommendations

- 1. Scheduling outdoor activities** Quality Area 1 – Educational program and practice, Quality Area 2 – Children's health and safety
  - UV levels and daily sun protection times are used to plan daily activities and ensure a correct understanding of local sun protection requirements.
  - Sun protection is included in service participation risk assessments, including excursions where all sun protection practices are planned, organised, understood and available.
- 2. Shade** Quality Area 3 – Physical environment
  - The availability of shade is considered for all outdoor activities and excursions.
  - Shade options are provided, maintained and promoted to the children.
  - Activities and play spaces are set up and moved throughout the day to take advantage of shade patterns.

Shade options can include a combination of portable, natural and built shade. Cancer Council encourages regular shade assessments and the monitoring of existing shade structures, to assist in planning for additional shade.
- 3. Hats** Quality Area 2 – Children's health and safety
  - All staff and children are encouraged to wear SunSmart hats\* that protect their face, neck and ears.
  - Children without a SunSmart hat are encouraged to play in the shade or are provided with a spare SunSmart hat.

\* SunSmart hats include:

- Broad-brimmed hats with a brim size of at least 6cm (adults 7.5cm).
- Bucket hats with a deep crown and brim size of at least 5cm (adults 6cm).
- Legionnaire style hats.

Baseball caps or visors do not provide enough sun protection and therefore are not recommended.

#### **4. Clothing Quality Area 2 – Children’s health and safety**

- Staff and children are required to wear SunSmart clothing that covers as much of the skin (especially the shoulders, back and stomach) as possible.
- Children without SunSmart clothing are encouraged to play in an area protected from the sun (e.g. under shade, veranda or indoors) or are provided with spare clothing.

\*SunSmart clothing includes wearing:

- Loose fitting shirts and dresses with sleeves and collars or covered neckline.
- Longer style skirts, shorts and trousers.

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

#### **5. Sunscreen Quality Area 2 – Children’s health and safety**

- SPF30+ (or higher) broad-spectrum water-resistant sunscreen is available at the service.
- All staff and children are encouraged to apply sunscreen 20 minutes before going outdoors and reapply every 2 hours.
- Permission to apply sunscreen is included in the service enrolment form. Where children have allergies or sensitivity to the sunscreen, parents are asked to provide an alternative sunscreen, or the child encouraged to play in the shade.
- Families ensure sunscreen is applied prior to attending vacation care.

Cancer Council recommends usage tests before applying a new sunscreen. All sunscreen is stored in a cool, dry place and the expiry dates monitored.

#### **6. Role modelling of staff Quality Area 1 – Educational program and practice, Quality Area 5 – Relationships with children**

Staff act as role models and demonstrate SunSmart behaviours by:

- Wearing a SunSmart hat, protective clothing, and wearing sunglasses (optional)
- Applying SPF30+ broad-spectrum water-resistant sunscreen
- Promoting the use of shade
- Discussing sun protection with children and demonstrating a positive and proactive approach to the management of sun protection in the service.

Sun safety is everyone’s responsibility. By being role models ourselves and leading the way with our own sun safety, we can inspire our children to be SunSmart when they step outside.

#### **7. Education Quality Area 1 – Educational program and practice, Quality Area 4 – Staffing Arrangements, Quality Area 5 – Relationships with children**

- Children are provided with opportunities to take leadership roles in managing sun protection e.g. accessing daily UV levels and sun protection times, hat reminders and management of sunscreen.
- Children understand why sun safety is important and learn how to take effective sun protection actions.

Further information is available from Cancer Council NSW’s website [www.sunsmartnsw.com.au](http://www.sunsmartnsw.com.au).

#### **8. Information and policy availability Quality Area 6 – Collaborative partnerships with families and communities, Quality Area 7 – Governance and leadership**

- Sun protection policy, procedures, requirements and updates are made available to staff, families and visitors.
- Sun protection information and resources are accessible and communicated regularly to families.
- All parents/families are informed of the sun protection policy including appropriate hat, clothing and sunscreen requirements on enrolling their child in the service or vacation care.

#### **9. Sunglasses (optional) Quality Area 2 – Children’s health and safety**

- Staff and children are encouraged to wear close-fitting wrap-around sunglasses that cover as much of the eye area as possible and comply with Australian Standard AS1067 (Sunglasses: Category 2, 3 or 4).

#### **10. Review Quality Area 4 – Staffing arrangements, Quality Area 7 – Governance and leadership**

- Management regularly monitor and review how effectively they implement their sun protection policy.

Sun protection policies must be updated and submitted to Cancer Council NSW every three years to maintain SunSmart status.

Cancer Council NSW and Network of Community Activities have partnered to promote best practice sun protection policy and practices in the Out of School Hours sector in NSW.

# Supervision of Children

## POLICY STATEMENT:

*Annandale After School Centre* believes that the supervision of children in our care is of paramount importance and that we all have a responsibility to protect the health and safety of each individual at all times. Children need safe and secure environments in which to thrive. Effective supervision is integral to creating environments that are safe and responsive to the needs of all children. Part of this is ensuring that children are protected from hazards or harm that may arise from their play and daily routines. Effective supervision also allows educators to engage in meaningful interactions with children. Our service is committed to:

- (a) Complying with the Education and Care Services National Law and Regulations at all times.
- (b) Ensuring that children are supervised at all times.
- (c) Considering the design and arrangement of children's environments to support active supervision.
- (d) Using supervision skills to reduce or prevent injury or incident to children and adults.
- (e) Guiding educators to make decisions about when children's play needs to be interrupted and redirected.
- (f) Supporting educators and their supervision strategies.
- (g) Providing consistent supervision strategies when there are staffing changes; and
- (h) Acknowledging and understanding when supervision is required for high-risk experiences and/or the ratio of adults to children is increased.
- (i) (National Quality Standard 2.2, Element 2.2.1)

## CONSIDERATIONS:

**Education and Care Services National Law & Regulations**  
**S51, 165, 166, 167, 170, 171**  
**R 82, 83, 99, 100, 101, 102, 115, 123, 155, 168, 176**

**National Quality Standards & Elements**  
Standard 2.2 Element 2.2.1

## PROCEDURES:

### Planning for Supervision

#### Ratios:

- (a) In accordance with the Education and Care Services National Law and Regulations, the service will ensure that the prescribed ratio of 1 educator for every 15 children is adhered to at all times the service is educating and caring for children. This ratio will reduce to 1 educator for every 8 children when on an excursion outside of the service premises.
- (b) Ratios will take into account the number of Educators (their level of skill and experience) the

types of activities children are involved in... Positioning and supervision of children will vary at different times during the session. Educators will be aware of activities, which are of higher risk e.g., outdoor play vs. indoor craft activity.... Educators will constantly discuss and move to where higher risk activities are taking place... This could mean a 1 adult to 20 children for a low-risk craft activity and a 1:10 ratio for tree climbing or fire play... however the overall ratio remain at 1:15 across the service.

### **Rosters:**

- (a) To ensure there are a sufficient number of educators to meet ratios each time children are being educated and cared for, the service will ensure a roster is completed and made available for educators to review. When creating a roster, the Coordinator will take the number of expected children enrolled into consideration.
- (b) As well as a shift roster, the service will also assign educators a zone. Educators will rotate their assigned zones each shift so that they are familiar with the supervision requirements in each zone and also to build relationships with all of the children as they move around the service.

### **Team Approach:**

Each educator comes to the service with their own beliefs and values. With this also comes their understanding and interpretation of how and why certain things are done. It is important to ensure that the service has a team approach when it comes to the way supervision is performed and why it is so critical to their work. The service will regularly discuss supervision practices at meetings and explore each educator's definition of what supervision means to them and what that looks like in action. For all children to be safely supervised there must be an agreement on how supervision is undertaken.

### **Risk Assessments:**

Each supervision zone of the service comes with its own unique risks and hazards. To minimise the possibility of children, educators or visitors being harmed anywhere in the service it may be necessary for certain zones to have a risk assessment completed and documented. This will assist educators in being able to focus on supervising and interacting with children rather than dealing with hazard reduction during key supervision times.

The service will ensure that any area deemed 'high risk', based on the volume of children accessing it, the activities that happen in that zone or the number of 'near misses' that have occurred there, will have a designated risk assessment and accompanying management plan or strategy. This may be included a part of the service's daily indoor/outdoor safety check.

### **Access:**

Educators will ensure that children are unable to/understand not to access unsupervised areas of the service and that potentially hazardous items are kept out of areas that children have access to in accordance with service safety procedures. Yellow lines – educators supervising all key exit and entry points.

### **The Principles of Active Supervision**

Active supervision is a combination of listening to and watching children play, being aware of the environment and its potential risks, any equipment children are using, the weather conditions, the time of day, managing small and large groups of children, transitions and many more factors.

It is crucial that educators are aware of the different ages, personalities, behaviors, needs, abilities and characteristics of the children in their care. How children interact, communicate and play with one another is dependent on the educators building relationships with children to learn about who they are, how they react in certain situations and discover their interests. These are vital skills to develop as they assist educators to predict children's play patterns, which affects how educators plan and establish environments and coordinate supervision strategies to maximise children's safety and ability to play free from harm or injury.

### ***Knowledge:***

Understanding each child's abilities and skill level by developing meaningful relationships with all children and engaging in their play.

Using clear and simple rules and boundaries that are developed with and known to all children and consistently applied by educators and enforcing strategies for when children do have to move out of play areas such as buddy systems for toilet access etc.

Checking the environment for hazards and risks prior to children accessing it and also during supervision and ensuring the setting up of the environment supports active supervision practices.

### ***Vigilance:***

Educators positioning themselves in strategic positions where they can see and hear children. Educators scanning constantly with both sight and hearing for any hazards or issues, which may pose a risk to children's health, well-being or safety.

Circulating the play areas where children are situated.

### ***Empowerment:***

Teach children how to appropriately and safely use equipment and access play areas and take some responsibility for their actions.

Support children to determine safe and unsafe practices.

Encourage children's confidence in reminding their peers about safe practices and to alert an educator if there is a problem.

### ***Important:***

Single staff model services, where the staff member or carer is alone with children for the majority or all of the time, will need to modify their strategies to supervise children because they are unable to rely upon colleagues to assist them. This may involve strategies such as having the group of children all indoors or all outdoors at any given time depending on the visibility available, giving older children more responsibilities in assisting younger children and notifying families that discussions may need to wait until other times if the distraction could put children at risk of harm. Single staff model services obviously still need to consider the safety of children to be paramount at all times, however Management in these cases also need to recognise the difficulties faced for those educators who are working alone and ensure they provide adequate support and information for educators to maintain their supervision standards. Single staff model mostly N.A. Always other staff on hand or close by.

#### **(a) Supervision Outside of the Service**



Transporting children to and from the service:

There are obvious hazards that can be identified when children are outside of the service environment. Such times may include excursions, when children are collected and dropped off at school and when moving between the service and extracurricular activities. Educators will discuss and document the potential hazards and risks associated with the transportation of children whether it is via walking, buses or other modes. A documented risk assessment will be available if the activities of children during these transitions are deemed high risk.

Educators will ensure that children are supervised at all times whilst under the care of the service but outside of the service grounds and that any activities and play children undertake during these times is appropriate to the environment they are in and free from potential hazards where possible.

Educators will ensure they are familiar with the procedures for locating a missing child who has not arrived at their expected collection point.

Educators will ensure that children using public bathroom facilities will be accompanied where possible and that head counts and roll calls occur regularly. Mostly N.A. but where this may happen protocols are in place and everyone to be vigilant and informed of the duty of care routine and all strategic safety factors.

### **(b) Partnerships with Children**

Annandale After School Centre involves children in all aspects of the services daily operations including the rules and boundaries that guide their behaviour. Children are offered opportunities to develop their own rules and boundaries in partnership with educators, which then allow them to better understand the reason for limits and acknowledge the consequences when these are not adhered to.

The age of children in our service range greatly, which reflects various levels of play behaviour. Educators will assess each play scenario in accordance with children's development and adapt supervision strategies to meet individual needs. For example, younger children may require more active supervision than older children do or if children are doing an activity that poses a greater risk, which will affect the level and type of supervision given to that area.

Educators respect all children's rights to privacy and allow them the space to be independent but particularly children in older age groups. Educators will develop supervision strategies that monitor but also allow older children to self-manage their play and limit setting.

Educator's supervision levels will add to and enrich the play of children and only disrupt activities if there is a need due to hazard and risk identification.

Educators will engage in play with children and interact with them in accordance with our services values and beliefs whilst also supervising. This helps to build meaningful relationships and helps to minimise challenging behaviours. Interactions with children are always age appropriate and designed to benefit and enrich children's learning experiences and understandings.

# Transportation

## Centre and staff vehicles

### POLICY STATEMENT

We believe that children travelling to and from school and excursions undertaken will be safe and comply with all the required regulations have the right to be safe.

### CONSIDERATIONS

Road and Transport Regulations

National Quality Standard Quality Area 2.3

### PROCEDURE

- All children travelling from the Centre on an excursion must have the written consent of their parents.
- All vehicles used by the Centre will comply with the appropriate road and transport regulations, will be mechanically sound, have regular maintenance and have third party and comprehensive insurance.
- The driver will ensure that the fuel level is sufficient to undertake the journey.
- All staff or volunteer drivers will hold the appropriate driver's license for the vehicle they are driving.
- All private vehicles can only be used if
  - The vehicle is registered and in a safe mechanical condition.
  - The vehicle is equipped with seat belts.
  - The vehicle has minimum third-party property damage insurance.
  - The driver has a current driver's license.
- Before traveling in the vehicle, the staff member will ensure that all children wear a seat belt or, in a bus, where seat belts are fitted.
- A First Aid Kit should be carried on the vehicle.
- Children will be required to remain seated and not behave in a dangerous or distracting manner. The driver will stop the vehicle, if necessary, in a safe place until the children comply with instructions.
- When picking up children, the bus should be parked in a location that does not require children to crossroads.
- The driver will ensure that the vehicle has the appropriate number of passengers for the vehicle and that it is not overloaded.
- All drivers will carry the Centre's name, address and contact number at all times. An emergency contact number should also be provided.
- In the case of a vehicle breakdown the staff person in charge or the driver will:
  - Phone the Centre to inform the Coordinator.
  - The Coordinator and the staff member will discuss suitable alternative transport and organise for this to be undertaken.
  - Ensure that the children are kept safe at all times.

- In the case of a vehicle accident the staff person in charge or the driver will:
  - Check to see if any children or staff are hurt, conduct first aid and phone for an ambulance if necessary.
  - Comfort and calm the children.
  - Ensure that the children are safe at all times.
  - Take the required details of the other driver involved: name, contact, registration number, driver's license, insurer and any damage made to either vehicle.
  - Phone the Centre to inform the Co-ordinator and organise alternative transport.
  - Phone the police if necessary.
  - Make an accident report on return to the Centre.
- Where possible a mobile phone should be carried in case of accident or emergency and children should be instructed to stay with the vehicle until assistance arrives. The Centre's details should always be carried on the vehicle.
- The Coordinator will inform the parents of the incident, and ensure that all the appropriate accident procedures are undertaken.
- When transporting children by public transport staff will:
  - Ensure that a list of the children's names and number of children travelling is taken.
  - Take the Centre's name, address and contact numbers with them.
  - Conduct a head count on a regular basis.
  - Assist children in getting on and off the mode of transport.
  - Ensure that all children are accounted for before allowing the vehicle to leave.
- When transporting children by foot staff will:
  - Ensure that the safest route is taken.
  - Ensure children cross the road at the crossing or lights where available and obey the road rules.
  - Undertake extreme care crossing all roads.
  - Keep children together as a group and walk in line on pavements. Staff members are to remain vigilant to ensure that no child runs ahead, lags too far behind the group or acts inappropriately.
  - Take appropriate wet weather gear, jackets or sun hats to use as required.
- Children should be made aware of all the rules associated with all the modes of transport. Staff will ensure that these rules are enforced.

# Videos and Films

## POLICY STATEMENT

Films and videos can be used as part of the program of activities after thoughtful consideration relating to the content and message of the film. Staff will ensure all videos and films are suitable for the children's ages and that parent's permission has been given.

## CONSIDERATIONS

Film ratings from Australian Broadcasting Authority  
Voluntary Code of Practice Section 12 (Videos and Films)

## PROCEDURE

- TV, film and video will only be viewed that have a G or PG rating.
- TV and videos may be used, and when used should be planned as part of a balanced program of activities. They could highlight a particular activity or interest in the program.
- They should not be major part of the daily activity in the Centre, except perhaps in extreme weather conditions.
- Parents will be notified that G and PG rated videos may be shown and permission sought on the enrolment form.
- Staff should preview the film or video where possible.
- Parents should sign a consent form when taking children to see a film at the cinema.
- Children should continue to be provided with other activities during the showing of a video and be properly supervised, even if the majority of the children are attending the viewing.

# WATER SAFETY

## POLICY STATEMENT:

Annandale After School Centre will plan experiences with appropriate levels of challenge where children will be encouraged to explore, experiment and take appropriate risks (“My Time, Our Place” and The Early Years Learning Framework: Belonging, Being and Becoming”. Outcome 4), including the use of water as a medium for play in both the outdoor and indoor environment and on excursions.

Water use will be supervised to ensure the safety of children and educators is a priority. The hygienic state of water will be assessed before it is used for children’s play. Drinking water will be accessible but hygienically stored and maintained.

Children will wear sun smart clothing for a water-based activity, for example, hats and collared shirts and staff will role model effective sun smart behavior, for example, seeking shade, wearing sunglasses and encourage the children to do the same.

## CONSIDERATIONS:

Duty of Care

National Regulation 168

National Quality Standard 2.3

## PROCEDURES:

The safety and supervision of children is paramount when in or around water. This relates to water play, excursions near or at bodies of water, hot water, drinking water and hygiene practices with water in the service environment. Children will be adequately supervised at all times during water play experiences.

### a) Water Safety in relation to excursions

The service recognises the risks posed by bodies of water. The service will ensure that every precaution is taken so that children are able to enjoy water-based excursions safely. Risk assessments will be carried out for programmed water-based excursions.

The Regulations do not specify a specific educator to child ratio for activities where water is a feature. The number of educators present is to be determined by a risk assessment of the proposed activity. It must also be noted that in sections 165, 167 and 169 of the National Law there are clear statements about adequate supervision. A range of factors shall determine the adequacy of supervision, including:

- Numbers, ages and abilities of the children
- Number and positioning of educators
- Each child’s current activity
- Areas where children are playing, in particular the visibility and accessibility of these areas
- Risks in the environment and experiences provided to children
- Educators’ knowledge of each child and each group of children, the

experience, knowledge and skill of each educator.

A risk management plan will be undertaken for all excursions near or at bodies of water. Please refer to the service's Excursion Policy.

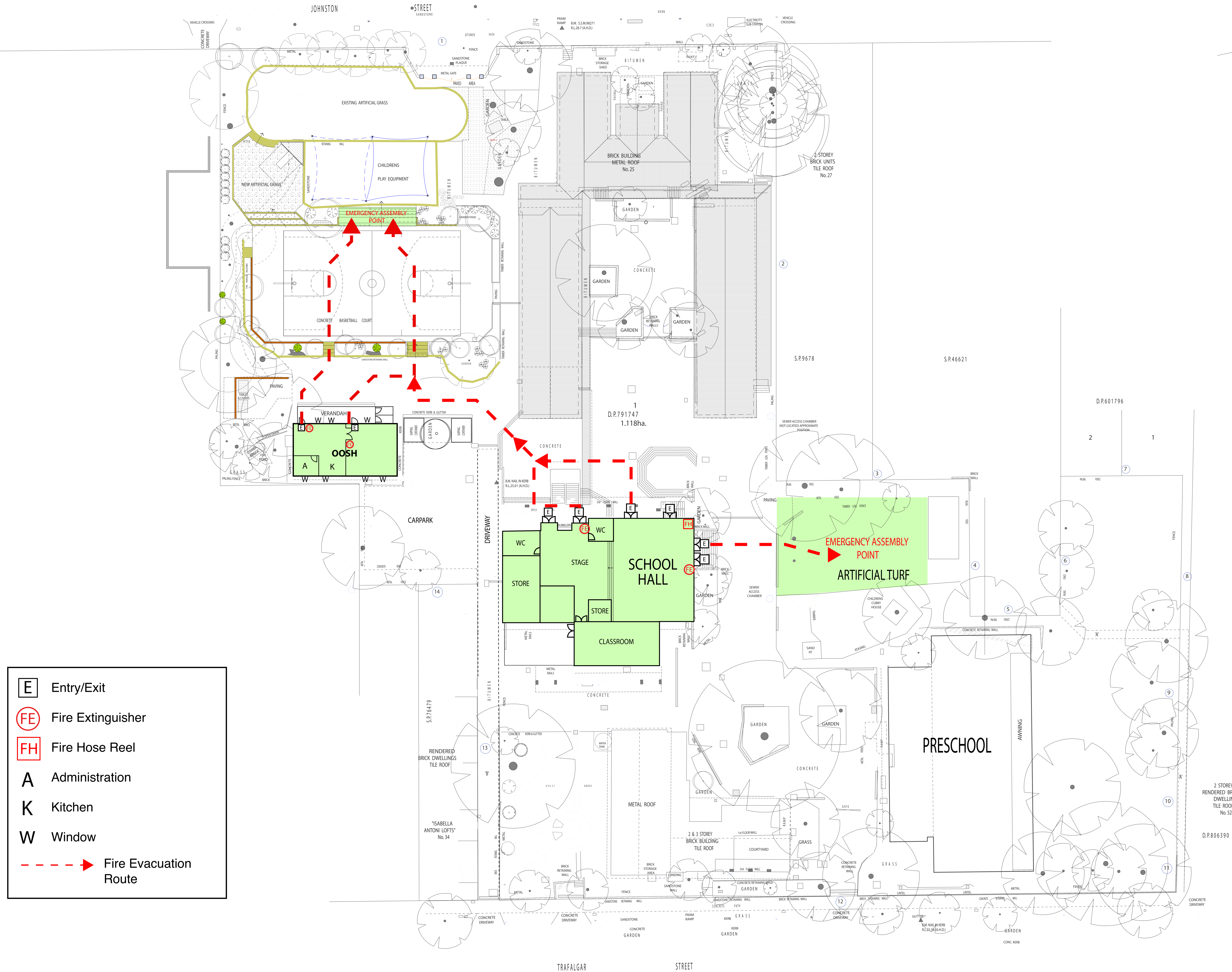
### *Definition of a body of water*

The service recognises the following locations are bodies of water:

- Swimming pools and /or water fun parks
- Wading pools
- Lakes
- Ponds
- The sea / ocean
- Creeks
- Dams
- Rivers
- Equipment used by the service that could contain 5cm or more of water and would allow a child to submerge both nose and mouth at the same time.

### (b) Water safety in relation to water-based activities within the service

- Water use within the service will be supervised to ensure that the safety of children, and educators is a priority. The hygienic state of water will be assessed before it is used for children's play.
- At the completion of the activity the water containers will be emptied, and the containers turned upside down or packed away.
- Educators will ensure water troughs or containers for water play are filled to a safe level. These activities will be supervised at all times by adults and containers, or troughs will be emptied onto garden areas after use. Children will be discouraged from drinking from these water vessels.
- Children will be instructed in the safe use of equipment used during water-based activities, for example, slip and slide, water "guns", bubble machines, etc.
- Any buckets of water that may be used for cleaning or hand washing will not be left unsupervised near the children and will be emptied immediately after use
- The children's play areas will be checked each morning to ensure that no containers or pools of water are accessible for children. If rain occurs during the day, outdoor play areas will be checked for safety prior to the children entering the outdoor environment.
- Any water-based activities should be undertaken on grassed areas when possible, to minimize wasted water.
- Staff will reinforce the water conservation message to embed sustainable practices in children.
- Water restrictions will be taken into consideration when planning and programming water-based activities.



- E Entry/Exit
- FE Fire Extinguisher
- FH Fire Hose Reel
- A** Administration
- K** Kitchen
- W** Window
- - - - - ➔ Fire Evacuation Route

# Work Health and Safety

## POLICY STATEMENT

We are committed to ensuring a safe and healthy working environment for staff, children and visitors. We are committed to injury management aimed at the early and safe return to work of injured staff.

## CONSIDERATIONS

Work Health and Safety Act

National Quality Standard Quality Area 2

National Quality Standard Quality Area 7

## PROCEDURE

### 1. Consultation

- Management and staff work together to identify and solve work health and safety problems.
- Management consults regularly with staff to ensure that work health and safety management is of the highest standard.

### 2. Management

- The Management Committee acknowledges that it has primary responsibility for the health and safety of staff.
- The Management Committee will ensure that WHS responsibilities are appropriately defined, and that all staff receive the training and resources they need to carry out their WHS responsibilities competently.
- Management has a duty to provide and maintain, as far as practicable, a working and learning environment and conditions that are safe and without risk to health.

### 3. Planning

To ensure that the WHS obligations are met, the management will:

- Integrate WHS and injury management into the service's management systems with the aim of preventing or minimising workplace risks
- Develop a strategic WHS plan and performance measures to achieve the aims of this policy, and regularly monitor WHS and injury management practices and improve them wherever possible
- Develop appropriate strategies for ensuring that facilities and any plant hired, purchased or provided to the service meet all relevant standards
- Provide the resources, training, information, instruction and levels of supervision needed to achieve the policy's objectives
- Employ competent and skilled persons who have the training and experience to assist the in meeting WHS policy obligations
- Consult with employees to enable them to contribute to the making of decisions affecting their health, safety and welfare at work



#### **4. Implementation**

To meet these objectives, the service will have systems in place and will delegate responsibilities to staff to:

- Ensure that the workplaces are equipped and maintained to provide for all employees' health and safety while they are at work
- Ensure that appropriate consultation mechanisms are in place
- Identify all current and foreseeable workplace hazards, assess the risks associated with them and develop strategies to eliminate or control the risks
- Maintain an appropriate workplace incident and injury reporting system that will provide information to help prevent incidents and work-related injury or illness in the future
- Encourage employees to report any suspected workplace hazard, work related injury or illness affecting themselves or others, at the earliest opportunity without prejudice to any employee
- Conduct investigations into all accidents and incidents that may expose a person to the risk of injury or illness, or result in injury or illness
- Provide for the prompt management of injured staff and for their safe and timely return to work
- Ensure that all contractors understand the safety standards expected of them and meet these standards when carrying out their work

#### **5. Employees**

All employees while at work regardless of the position they hold, will:

- Comply with their obligations under the WHS Act
- Take reasonable care to ensure the health and safety of themselves, and others under their supervision at work, including children
- Use all provided personal protective clothing or equipment (PPE) in accordance with directions, and report when any PPE requires repair, replacement or where risk assessment indicates the need for PPE to be provided by the employer
- Co-operate with management as far as necessary to enable compliance with any requirement under the WHS Act, including complying with any reasonable OH&S instruction or direction given by management
- Contribute to the service meeting its WHS strategic plan and performance levels by complying with WHS procedures
- Assist by reporting and recording all incidents and hazards that may cause injury or illness (including damage to facilities or equipment requiring maintenance)
- Participate in any training arranged to support the implementation of this policy
- Participate in consultation on any WHS issues or information
- Co-operate in any return-to-work plan developed for injured staff.