

D-1 Dealing with Medical Conditions

NQS

QA. 1.1	The educational program enhances each child's learning and development
QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.2	Each child is protected.
QA. 5.1	Respectful and equitable relationships are maintained with each child.
QA. 6.1.2	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing.
QA. 6.2.2	Effective partnerships support children's access, inclusion and participation in the program
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 92	Medication record
Reg. 93	Administration of medication
Reg. 155	Interactions with children
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available
Reg. 173	Prescribed information to be displayed

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
	Children learn to interact in relation to others with care, empathy and respect
LO. 3	Children become strong in their social and emotional wellbeing

Policy Statement

We will work closely with children, families and, where relevant, schools and other health professionals to manage medical conditions of children attending the Centre. We will support children with medical conditions to participate fully in the day-to-day program at the Centre in order

to promote their sense of wellbeing, connectedness and belonging at the Centre. 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.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-16: Asthma
- MELROSE PARK OSHC Policy D-17: Anaphylaxis
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

Parents 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 parent/guardian through the enrolment process.

Upon notification of a child's medical condition the service will provide the parent 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 parent. This will need to be provided to the centre on enrolment.

All children with Asthma must provide the centre with a medical action plan that is signed by a medical practitioner. The child/ren's enrolment will not be authorised until this has been provided.

All children with allergies or anaphylaxis, must have completed an ASICA Management Plan. This must be signed by a medical practitioner. The child/ren's enrolment will not be authorised until this has been provided.

It is a requirement of the Centre to meet its regulatory obligations that a risk minimisation plan and a communication plan be developed in consultation with the parents. The Nominated Supervisor will meet with the parents and/or relevant health professionals as soon as possible after enrolment to determine content of that plan to assist in a smooth and safe transition of the child into the Centre. The content of planning will include:

- Identification of any risks to the child or others by their attendance at the Centre
- Identification of any practices or procedures that need adjustment at the Centre to minimise risk

- Process and timeline for orientation procedures for educators
- 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 (in accordance with regulation 90). All educators will be informed of any special medical conditions affecting children and orientated to their management (see Educator Orientation Policy).

All medical conditions, including food allergies will be placed inside the pantry cupboard. It is deemed the responsibility of every educator to read and refer to the list at the commencement of every shift.

All medication that may be required by a child must be supplied to the centre.

All relief educators 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 the child (see Relief Educators Policy).

Where a child has a life threatening food allergy, the Centre will endeavour to refrain from supplying the particular food allergen in the Centre and families in the Centre will be advised not to supply that allergen. Parents of children with an allergy may be asked to supply a particular diet if required (e.g. soy milk) (see Allergies Policy).

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Disability Discrimination Act 1975
- NSW Anti-discrimination Act 1977
- Work Health and Safety Act 2011
- Privacy Act 1988

Endorsed Date:	October 2018
Review Date:	October 2019

D-2 Hygiene

NQS

QA. 1.1.1	Curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.
QA. 1.1.3	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child's learning.
QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 5.2.1	Children are supported to collaborate, learn from and help each other
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 106	Laundry and hygiene facilities
Reg. 109	Toilet and hygiene facilities
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children develop knowledgeable and confident self-identities
LO. 3	Children have a strong sense of wellbeing
	Children become strong in their social and emotional wellbeing
	Children take increasing responsibility for their own health and physical wellbeing
LO. 4	Children are confident and involved learners
	Children transfer and adapt what they have learned from one context to another
LO. 5	Children are effective communicators

Policy Statement

Our Centre aims to provide a healthy and hygienic environment which will promote the health of the children, Educators and parents using our service. Children and parents will be encouraged to share

ownership to maintain hygienic practices in the service. Educators will ensure they maintain and model current hygiene procedures as advised by the NSW Department of Health. Educators will engage children in experiences, conversations, routines and responsibilities that promote children's understanding of the importance of hygiene for the wellbeing of themselves and others ("My Time, Our Place" 3.2, 4.2, 4.3).

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy D-4: Food Safety and Handling
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy E-1: Daily Routines

Procedure

Under Regulation 77, the Approved Provider and Nominated Supervisor of an education and care service must implement, and ensure that all Educators members of, and volunteers at, the service implement adequate health and hygiene practices. This includes safe practices for handling, preparing and storing food to minimise risks to children being educated and cared for by the service (Centre).

Educators will maintain and model appropriate hygiene practices and encourage children to adopt the same. As part of children taking increasing responsibility for their own health and physical wellbeing, Educators should acknowledge children who are modeling good hygiene practices and use these examples to provide opportunities for children who have not developed the same level of awareness.

Informal education in proper hygiene practices will be conducted on a regular basis, individually or through group 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 within the Centre, educators will remind children that these are practices to be followed in the Centre but they may be different for them at home.

To reduce the risk of spreading infection, hand washing will be practiced by all educators and children upon entering the service (educators only), before preparing or eating food and after other

tasks such as toileting, cleaning up any items, wiping a nose, coughing, sneezing, before and after administering first aid, playing outside or handling an animal.

All educators must wear disposable gloves when in contact with blood, open sores or other bodily substances, clothes contaminated with bodily fluids or cleaning up a contaminated area. Educators must wash hands with soap and water after removing the gloves. Educators 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.

The Centre 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 paper towel for washing and drying hands. The Responsible Person on duty will ensure these items are available and replenished when necessary.

During school terms, toilet facilities will be cleaned daily by cleaners supplied by the school. During vacation care, the toilet facilities will be cleaned and disinfected daily by Centre Educators only.

Women and girls will have access to proper feminine hygiene disposal.

Soap and paper towel will always be available in the kitchen area.

Surfaces will be cleaned and disinfected after each activity. At the beginning and end of each day, all contaminated surfaces will be sanitised.

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 once per school term.

Children will be encouraged not to share hats.

Food and Hygiene

All food will be handled, prepared and stored in a hygienic manner.

Kitchen equipment will be cleaned and stored appropriately between uses.

Surfaces will be cleaned and sanitised before and after food preparation.

Children will be encouraged to be involved in food preparation to assist them to have opportunities to learn more about hygienic practices when preparing food. This participation should always be supervised and an explanation provided to children on the reasons why hygienic conditions must be maintained.

Children will be encouraged not to share their drinking and eating utensils or utensils that have been dropped on the floor to prevent the spread of bacteria and infection (see D-13 Illness and Infectious Diseases Policy).

Tongs will be used for the serving of food. Where possible, educators will encourage children to self-serve food and drinks, encouraging the development of their food handling skills (see D-4 Food Safety and Handling Policy) as well as acknowledging their growing sense of independence.

All cups, plates and utensils will be washed and sanitised either in the dishwasher or by using hot, soapy water.

As well as washing hands prior to food preparation, educators will also wear disposable gloves. Care must be taken to avoid contaminating food by only using gloves for one continuous task and then discarding them. Gloves must be removed, discarded and replaced with a new pair before handling food and before working with ready to eat food and after handling raw food.

Gloves must be removed, discarded and replaced after conducting any non-food preparation task such as using the toilet, smoking, coughing, sneezing, using a handkerchief, eating, drinking or touching the hair, scalp or body, etc.

All rubbish or left over food is to be disposed of immediately in lidded bins. Educators will ensure bins are emptied daily or more regularly where required. Bins will be washed and disinfected regularly.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- NSW Public Health Act 2010
- NSW Department of Health
- Putting Children First (NCAC): 'Supporting children's hygiene skills'
- Putting Children First (NCAC): 'Food Safety'
- Putting Children First (NCAC): 'Infection Control in Outside School Hours Care'
- Network of Community Activities 'Hygiene' Policy
- Food Standards Australia New Zealand

Endorsed Date:	October 2018
Review Date:	October 2019

D-3 Food and Nutrition

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.1.3	Healthy eating and physical activity is promoted and appropriate for each child
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 6.1.3	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 78	Food and beverages
Reg. 79	Service providing food and beverages
Reg. 80	Weekly menu
Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 173	Prescribed information to be displayed

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children develop knowledgeable and confident self-identities
LO. 3	Children have a strong sense of wellbeing
	Children become strong in their social and emotional wellbeing
	Children take increasing responsibility for their own health and physical wellbeing
LO. 5	Children are effective communicators

Policy Statement

We aim to provide nutritious and varied food of good quality in the Centre. Children will be encouraged to develop healthy eating habits through suitable 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. We also aim to support and provide for children with food allergies, dietary requirements, and cultural or religious dietary practices.

High standards of hygiene will be practised throughout all food preparation and appropriate storage of food will be maintained at all times.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-4: Food Safety and Handling
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-17: Anaphylaxis
- MELROSE PARK OSHC Policy D-18: Diabetes
- MELROSE PARK OSHC Policy D-19: Nut-Free Zone

Procedure

Food and drink will be provided for breakfast and afternoon tea, with small nutritious snacks available as necessary. Fresh and safe drinking water will be available at all times for the children and educators. Fruit will be offered each day with afternoon tea.

All food provided at the Centre will be nutritious, varied and adequate in quantity taking into account children's various dietary requirements for growth and development, and in accordance to the Australian Dietary Guidelines.

The consumption of unhealthy snack food such as lollies, chocolates and other high sugar / high fat foods are not encouraged at the Centre.

A menu, developed in line with the principles in the Dietary Guidelines for Children and Adolescents in Australia, and which accurately describes the food and beverages to be provided by the service each day will be displayed in an accessible area at the Centre for families and children to view. The menu will be altered to ensure it takes into account any changes that have occurred as part of the menu planning / serving process.

Snack times are seen as a social event where children and educators can relax, talk about their day and experience a variety of foods. Educators will demonstrate good healthy and hygienic eating

habits while with the children. Educators will be role models by participating in and showing enjoyment of healthy eating.

To ensure a decreased risk of choking, and to create a relaxed, social meal time, educators and children will be seated together while eating or drinking.

The denial of food will never be used as a punishment.

Food will be set aside for any children at out of centre activities for them to consume on arrival at the centre.

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, cultural and religious practices will be acknowledged and addressed in the provision of food
- Children will be encouraged to participate in the development of the menu, discussions about nutrition, and preparing and cleaning up after meals, where practicable.

Education of healthy eating habits will be developed through ongoing examples, specific activities, notices, posters and information sheets to families. Families will be encouraged to continue healthy eating habits at home.

All children's individual needs such as allergies, anaphylaxis, dietary requirements etc. will be addressed in the menus. Alternate menu items will be available to children with specific allergies / anaphylaxis when appropriate. Educators will keep a list of all children's allergies or food restrictions near the food preparation area to ensure this information is available to educators at all times (see Allergies Policy). Educators must check this allergy list prior to the serving of any food at the Centre. The Centre is a Nut-Free Zone.

Cold and/or room temperature drinking water will be made available to suit varying tastes and needs. One educator will ensure that this is available and refilled as required throughout the operation of the Centre. Children will be encouraged to get drinking water themselves when required, using separate drinking containers. Other suitable drinks may be made available at the discretion of the Centre Coordinator. Containers are to be cleaned and stored appropriately.

All food will be prepared and stored in a hygienic manner (see Food Handling and Hygiene Policy). Food will be stored in original packaging while unopened and once opened, kept in a tightly sealed container away from any chemicals. Food requiring refrigeration will be sealed and stored in the refrigerator according to the Food Handling and Hygiene Policy.

Children's cooking activities will be encouraged to develop life skills. Where children are involved in food preparation, they will always be adequately supervised to ensure safe and hygienic conditions are maintained.

Opportunities for educator Professional Development will be provided to ensure educators have the skills required to accurately plan and prepare food. Any changes made due to this professional

development will be documented to show continual improvement.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- NHMRC Dietary Guidelines for Children and Adolescents in Australia
- NHMRC Australian Guide to Healthy Eating
- Network of Community Activities Factsheet: 'Balanced Healthy Eating in OOSH'
- Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood
- NSW Public Health Act 2010
- Putting Children First (NCAC): 'Nutrition and Healthy Eating'
- Network of Community Activities 'Nutrition & Food Safety' Policy
- Nutrition Australia: Drinks for children
- Nutrition Australia: Food and Fitness for Children
- Australia and New Zealand Food Standards Code
- NSW Food Act 2003
- NSW Food Regulation 2010

Endorsed Date:	October 2018
Review Date:	October 2019

D-4 Food Safety and Handling

NQS

QA. 1.1.3	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child's learning.
QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.1.3	Healthy eating and physical activity is promoted and appropriate for each child
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 5.2.1	Children are supported to collaborate, learn from and help each other
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 78	Food and beverages
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children develop knowledgeable and confident self-identities
LO. 3	Children take increasing responsibility for their own health and physical wellbeing
LO. 4	Children are confident and involved learners
	Children transfer and adapt what they have learned from one context to another

Policy Statement

We will ensure effective food safety practices are implemented and maintained to help reduce the risk of food-borne illnesses, to identify potentially hazardous foods and to minimise the spread of illnesses and infectious diseases. The Management Committee will ensure provision is made for training in the annual budget to ensure educators are up-to-date in food safety, handling and hygiene practices within a child care service according to current legislation and best practice.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-3: Food and Nutrition
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy E-1: Daily Routines

Procedure

The following food preparation and serving standards as determined by the Food Standards Australia and New Zealand (FSANZ), will be maintained at all times.

Educators will observe the following guidelines in regards to hygiene when preparing food:

- Not prepare foods for others if they are ill
- Ensure they do not sneeze, cough or expel air over surfaces that may come into contact with food
- Always wash hands following sneezing, coughing, touching their hair or body, or blowing their nose
- Cover any wounds with appropriate waterproof food handler's Band-Aids
- Always wash hands thoroughly with warm soapy water and dry thoroughly with paper towel before and after touching food, and in between handling raw and ready to eat foods.
- Tie hair back when handling food
- Ensure outer clothing is of a level of cleanliness that is appropriate for the handling of food
- Remove or cover jewellery when handling food
- Instruct and supervise children to wash hands thoroughly before food consumption
- Ensure sufficient soap and hand drying equipment is made available in the children's toilets

Educators will observe the following guidelines in regards to food handling, preparation and storage:

- Ensure cooking utensils are clean and washed in the dishwasher to ensure appropriate sanitisation.

- Ensure the fridge, oven and hot plates are clean and kept clean by including in the termly cleaning schedule. All kitchen surfaces will be cleaned and sanitised before and after use.
- Separate preparation areas, storage areas and utensils will be used for raw foods, cooked foods and ready-to-eat foods to prevent cross-contamination. Chopping boards are colour coded and used only for certain foods and thoroughly cleaned and sanitised before and after food preparation.
- Clean disposable gloves will be used at all times during food handling and will be changed at least once every hour, or more regularly as required. Disposable gloves are single use items and should be disposed of and changed upon change of task e.g. if they come in contact with non-food items such as cleaning chemicals, money, treating wounds.
- Clean sponges will be used. Sponges used for non-food purposes such as craft will be clearly marked and not used for kitchen purposes.
- Dishes are to be washed in warm, soapy water (45 °C) and sanitised in hot water (77 °C). Dishes will be air dried where possible.
- Avoid serving food from damaged containers such as dented tins or broken seals.
- Tongs will be used for the serving of food. Where possible, educators will encourage children to self-serve food and drinks, encouraging the development of their food handling skills (see D-2 Hygiene Policy).
- Check all “use by” dates. No food past its “use by” or “best before” date will be served at the Centre.
- All food packages that are opened will be labelled with opened date and date in which the food will be discarded, according to instructions outlined on food label. Any foods removed from their original packages/containers must be labelled, including contents, any allergy information and open/discard date.
- Discard leftovers in the fridge after 2 days.
- Store foods in containers that are clean, easy to wash, have good fitting lids or are covered with plastic film. All containers will clearly display the use by/best before date.
- Store raw foods below cooked foods in the refrigerator.
- Store raw meat products at bottom of the refrigerator.
- Wash all fruit and vegetables thoroughly.
- Always supervise children eating and warn them when food is hot.
- Display a thermometer clearly in the refrigerator and freezer and check it daily. Correct cold storage temperature is below 5 °C.

- Avoid overfilling the freezer and fridge. This is extremely important for correct temperature regulation.
- Keep kitchen free from vermin and insects. Food scraps will be cleaned from the kitchen every day and garbage will be disposed of effectively.

Educators will understand that the following food products are high-risk for food-borne bacteria:

- Meat
- Poultry
- Dairy Products
- Eggs
- Small goods such as luncheon meats, ham
- Seafood
- Cooked Rice
- Cooked Pasta
- Prepared Salads such as potato salad and coleslaw
- Prepared fruit salads or chopped fruit platters

Potential hazardous, high-risk foods will be handled with extra care by observing the following:

- Keep high risk foods out of the 'temperature danger zone' – keep cold food cold and hot food hot
- The Temperature Danger Zone is between 5 °C and 60 °C
- Cook hot foods to steaming hot, i.e. an internal temperature of 75 °C
- Keep cold foods under 5 °C
- High risk food left in the temperature danger zone for more than four hours will be thrown away
- High risk food left in the temperature danger zone for two hours must be consumed within the four hour rule (above) or discarded. Once high risk food has been in the temperature danger zone for two hours it cannot be kept as a leftover for future consumption.
- When cooling cooked potentially hazardous food, cool the food:
 - from 60 °C – 21 °C within two hours
 - from 21 °C – 5 °C within a further four hours

- Keep cold food in the fridge until it is ready to serve.

The Centre will review and evaluate food handling practices every 6 months in line with current food handling best practice guidelines from recognised authorities.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- NSW Public Health Act 2010 No.127 Part 3. Division 1
- Putting Children First (NCAC): 'Food Safety'
- Food Standards Australia New Zealand – Food Safety Standards Fact Sheets (<http://www.foodstandards.gov.au>)
- Australia New Zealand Food Standards Code
- NSW Food Authority
- NSW Food Act 2003
- NSW Food Regulation 2010

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D-5 Hazardous Materials

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented
QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 3.2	The service environment is inclusive, promotes competence and supports exploration and play-based learning.
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 106	Laundry and hygiene facilities
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure and supported
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Policy Statement

We will provide a safe environment and protect the health and wellbeing of the children, educators and parents of the Centre. We will ensure that all activities undertaken while the service is in operation will not pose potential risk and that all hazardous materials will be stored appropriately.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-18: Work Health and Safety
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators

- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-28: Occupational Health and Safety

Procedure

The Management and/or Educator WHS Representatives (see D-28 Workplace Health and Safety Policy) will ensure that all hazardous machinery, chemicals and activities which have the potential to cause danger to children, educators or others in the Centre will be managed, stored and handled appropriately according to Centre policy.

Daily WHS risk assessments will be undertaken to identify any potential hazards, assess the risk and control the risk to an acceptable level. Hazardous machinery, chemicals and activities which are likely to cause potential danger to children, educators or others in the Centre will not be used or undertaken while the service is in operation.

Should any pests or vermin be identified, 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 will be used minimally and only with adequate ventilation, and preferably not in the presence of the children.

Aerosols such as spray paints etc. which are used for specific activities will only be used outside in a well-ventilated area.

Educators will be made aware on initial orientation (see C-3 Educator Orientation and Induction Policy), of any potentially dangerous products, which may pose a danger to the children and where these are stored. All relief educators will also be made aware of these products and where they are stored.

All potentially dangerous products such as cleaning materials, disinfectants, sharp objects, 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. Educators will be responsible for ensuring that these areas remain secure and will not inadvertently provide children with access to these items.

Cleaning and hazardous products will not be stored in close proximity to food products to avoid contamination.

Safety Data Sheets (SDS) will be available for all cleaning and potentially hazardous items used in the operation of the Centre. New products will not be brought into the centre without an appropriate

SDS being organised prior. Educators will be made aware of where these are located to ensure they are available in the case of an emergency.

Educators must always read the label before use of any cleaning material, sprays or chemicals and be aware of appropriate first aid measures.

The NSW Poisons Information Centre can be contacted for 24 hour advice and assistance regarding poisons on 13 11 26.

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 will be displayed to highlight the issue.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Education and Care Services National Law Act 2010
- Kidsafe NSW
- Putting Children First (NCAC): 'Safety in Children's Services'
- Occupational Health and Safety Act 2000
- Network of Community Activities Factsheet: 'OH&S Hotspots in OOSH'
- Network of Community Activities Factsheet: 'Risk Assessment and Management'

Endorsed Date:	October 2018
Review Date:	October 2019

D-6 Transportation

NQS

QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 89	First aid kits
Reg. 99	Children leaving the education and care service premises
Reg. 100	Risk assessment must be conducted before excursion
Reg. 102	Authorisation for excursions
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure and supported
LO. 3	Children take increasing responsibility for their own health and physical wellbeing

Policy Statement

We believe in the child's right to feel safe while travelling to and from school and excursions. We will ensure that all modes of transportation used while children are in our care will be safe and will comply with all the required regulations.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy D-8: Sun Protection
- MELROSE PARK OSHC Policy D-10: First Aid

- MELROSE PARK OSHC Policy D-11: Management of Incident, Injury and Trauma
- MELROSE PARK OSHC Policy D-30: Supervision
- MELROSE PARK OSHC Policy E-5: Excursions

Procedure

All children travelling from one place to another while under the care of the Centre must have written consent from their parents or authorised nominee (see A-4 Enrolment Policy and A-10 Acceptance and Refusal of Authorisations).

A risk assessment will be conducted prior to any activities which require the use of transportation.

All vehicles used by the Centre will comply with the appropriate road and transport authority regulations, will be mechanically sound, have regular maintenance and have CTP and comprehensive insurance.

The driver will ensure that the fuel level is sufficient to undertake the journey.

Car seats, restraints and booster seats, where applicable, will be approved and fitted in accordance with the Roads and Maritime Service NSW.

A portable First Aid Kit will be carried on the vehicle.

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
- any educator or volunteer driver holds the appropriate driver's licence for the vehicle they are driving

Before travelling in the vehicle, educators will ensure that all children wear a seat belt, where appropriate, i.e. seat belts may not be available on buses.

Children will be expected 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 which does not require children to cross roads. If the children are required to cross the road, educators must ensure children are taken across at crossing lights or a pedestrian crossing, where possible.

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 Responsible Person on duty or the driver will:

- contact the Nominated Supervisor
- the Nominated Supervisor and Responsible Person on duty will discuss suitable alternative transport and organise for this to be undertaken
- ensure that the children are kept safe at all times

The Nominated Supervisor or Responsible Person on duty will inform the parents of the breakdown if necessary.

In the case of a vehicle accident, the Responsible Person on duty and/or educators will:

- check to see if any children or educators 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 licence, insurer and any damage made to either vehicle
- contact the Nominated Supervisor and organise alternative transport if required
- contact the Police if necessary
- complete an incident, injury, trauma and illness report upon return to the Centre

A mobile phone will be carried in case of accident or emergency and children will be instructed to stay with the vehicle until assistance arrives.

The Nominated Supervisor or Responsible Person on duty will inform the parents of the incident, and ensure that all the appropriate incident, injury and trauma procedures are undertaken (see D-11 Management of Incident, Injury and Trauma).

When transporting children by public transport, educators will:

- keep a list of the children's names and number of children travelling
- take a list of emergency contact numbers with them
- keep a fully stocked portable First Aid Kit and any relevant medications
- conduct a head count on a regular basis
- assist children with 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, educators 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
- exercise extreme caution crossing all roads
- keep children together as a group and walk in line on pavements
- 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
- keep a fully stocked portable First Aid Kit and any relevant medications

Children should be made aware of all the road rules associated with all the modes of transport. Educators will ensure that these rules are enforced.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Roads and Maritime Service NSW
- Kidsafe NSW
- Putting Children First (NCAC): 'Effective Supervision'

Endorsed Date:	October 2018
Review Date:	October 2019

D-7 Animals

NQS

QA. 1.1	The educational program enhances each child's learning and development
QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure and supported
	Children develop their autonomy, inter-dependence, resilience and sense of agency
	Children learn to interact in relation to others with care, empathy and respect
LO. 2	Children are connected with and contribute to their world
LO. 3	Children take increasing responsibility for their own health and physical wellbeing
LO. 4	Children develop dispositions such as curiosity, cooperation, confidence, creativity, commitment, enthusiasm, persistence, imagination and reflexivity

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. Educators will ensure that everyone in the Centre treats the animals with respect and in a humane way, at all times. Strict supervision will be maintained and appropriate hygiene practices will be implemented.

Related Policies

- MELROSE PARK OSHC Policy A-15: Role of Management Committee
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-9: Emergency Procedures
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy E-2: Written Program

Procedure

The decision to keep a pet or have an animal visit the Centre will be made by the Nominated Supervisor in consultation with the Management Committee, based on an observed need or value to the children. Animals may be incorporated as part of the educational program.

The Nominated Supervisor must discuss this in their report at a management meeting and have approval of the management committee prior to any animal being able to enter the Centre.

Considerations regarding individual children's allergies will be taken into account before bringing an animal into the Centre.

All animals which are kept in the Centre shall be maintained in a clean and healthy condition. Appropriate food and water will be replenished and maintained at all times.

An educator will be designated the duty of ensuring that the animal is appropriately fed and looked after. Alternatively, a roster of educators and children can be made to fulfil this duty. 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. Everyone in the Centre will treat with respect and in a humane way all animals, at all times.

Children will be reminded about the hygiene practices required after handling any animal and educators will ensure that this is maintained (see D-2 Hygiene Policy). All appropriate hygiene procedures will be followed regarding cleaning and disposal of waste. Animals will be located away from any food or food preparation areas.

Any animal 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.

Supervision is to be maintained at all times when animals are present around children.

Unknown or Nuisance Animals on the Premises

No animals should be on the premises (as per Section 14 of the Companion Animals Act (1998)) without the authority of the Nominated Supervisor or Management Committee.

Occasionally animals, such as stray dogs, may enter the premises. Children will be made aware of the importance of staying away from animals unknown to them.

In the event that an animal unknown to the Centre is on the premises, educators will ensure that the children are moved as far away from the animal as possible.

If educators feel the animal has become a threat to the children, the following will be observed (see D-9 Emergency Procedures Policy – *Nuisance Animals*):

- Direct the children to quietly and calmly leave the playground or other affected area and calmly move them inside the building (if not affected)
- Close all doors and open windows if the children are inside
- Refrain from sudden screaming or shouting as this may frighten a snake or larger animal and it may scatter in the direction of the children
- Report to pest exterminator, local council or other appropriate body for treatment

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Prevention of Cruelty to Animals Act 1979
- Companion Animals Act (1998)

Endorsed Date:	October 2018
Review Date:	October 2019

D-8 Sun Protection

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.2	Each child is protected.
QA. 3.1	The design of the facilities is appropriate for the operation of a service.
QA. 3.1.1	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 6.1.3	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service..

National Regulations

Reg. 100	Risk assessment must be conducted before excursion
Reg. 114	Outdoor space—shade
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available

My Time, Our Place

LO. 1	Children feel safe, secure and supported
LO. 3	Children have a strong sense of wellbeing
	Children take increasing responsibility for their own health and physical wellbeing
LO. 4	Children transfer and adapt what they have learned from one context to another

Policy Statement

We aim to ensure that all children attending the Centre will be protected from harmful rays of the sun, whilst understanding that Vitamin D, sourced from the sun, is an important factor in keeping bones and muscles strong and healthy. Educators will model appropriate sun protection behaviour and enforce the Sun Protection Policy at all times. Parents and families will be informed of the

Centre's policy on Sun Protection through posters, newsletters and the Family Handbook.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy E-2: Written Programs

Procedure

Children and educators will wear protective clothing when outside such as hats that protect their face, ears and neck, and be encouraged to wear shirts that cover their shoulders and necks. Bucket hats and broad brimmed hats are recommended.

Educators will direct children to wear hats for outdoor play. Educators will enforce the 'No Hat - No Outside Play' rule. Children who do not have a hat must play in an undercover area.

Children will not share hats. Children are responsible for storing their own hats in their own school bags. Where the Centre's spare hats are used, they are to be used only by one child. All spare hats must be washed before use by anyone else.

Sunglasses are recognised as an important factor in the protection of our eyes from the sun's rays. Sunglasses will be encouraged for all educators and students during operation of the service.

An SPF 50+ broad spectrum, water resistant sunscreen will be made available in the Centre. Sunscreen will be provided to children when the UV rating is above 6.

All sun protection practices will be maintained on excursions, including walking to and from the centre, where applicable. Sun protection will be included in the risk assessment for excursions.

The Sun Protection Policy will be available to all families using the Centre and parents will be informed of the policy upon enrolling their child through the parent handbook. Permission to apply sunscreen will be included in the enrolment form. The Certified Supervisor will respect the parents' right to refuse authorisation to apply sunscreen. In these instances, the Certified Supervisor will communicate with the parent regards providing an alternate suitable sunscreen. Should the parents refuse, the children will be required to wear appropriate clothing and play in shaded areas.

Where children have allergies or sensitivity to sunscreen, parents will be asked to provide an alternative sunscreen, and/or the child required to play in the sheltered areas.

Activities will be planned to avoid exposure to the sun between the hours of 11: 00am and 3:00pm, particularly between the months of October and March. Outdoor activities will be held in shaded areas whenever possible.

The Centre will identify shade options at various times of the day and the year with the available outdoor space and promote these to the children. Educators will set up activities and play spaces to make best use of the shade.

Where shade is considered inadequate, Management and/or Normanhurst Public School should be approached to provide additional shade cover.

Educators will use opportunities to discuss sun protection with children and demonstrate a positive and proactive approach to the management of the sun protection in the Centre.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Cancer Council NSW – SunSmart Recommendations

Endorsed Date:	October 2018
Review Date:	October 2019

D - 9 Emergency Procedures

NQS

QA. 2.2	Each child is protected.
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

LO. 1	Children feel safe, secure and supported
LO. 3	Children become strong in their social and emotional wellbeing
LO. 4	Children use a range of skills and processes such as problem solving, inquiry, experimentation, hypothesising, researching and investigating
	Children transfer and adapt what they have learned from one context to another

Policy Statement

We will provide an environment that ensures the safety and well-being of the children at all times. 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 undertaken.

Related Policies

- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-12: Policy Development and Review
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy B-6: Indoor Environment
- MELROSE PARK OSHC Policy B-7: Outdoor Environment
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-11: Management of Incident, Injury and Trauma

- MELROSE PARK OSHC Policy D-27: Custody
- MELROSE PARK OSHC Policy D-28: Occupational Health and Safety
- MELROSE PARK OSHC Policy E-5: Excursions

Procedure

An emergency, in relation to an education and care service, includes any situation or event that poses an imminent or severe risk to the persons at the education and care service premises. Examples include flood, fire, or a situation that requires the premises to be locked-down.

Emergencies will be alerted by:

- **Three sharp blows of a whistle – indicates EMERGENCY EVACUATION PLAN**
- **Ringing of a bell or our code “CODE FLOOR” – indicates LOCK DOWN PLAN**

In the event of an emergency when triple zero (000) is called, educators are to:

- Speak slowly and clearly
- State the type of threat
- Give the following information:
 - Location – Melrose Park Public School
 - Address – 110 Wharf Rd, Melrose Park 2114
 - Informant’s location – include Melrose Park OSHC phone number (0411 526 238)
- State the actual location of the threat
- Give details of any injuries
- Do not hang up until address is confirmed

Emergency procedures will be developed based on information from local fire and emergency authorities, and based on the current procedures followed by the School.

All educators, including relief educators, will be informed of the procedure and their specific duties as identified in their orientation to the Centre. Educators will report and take direction from the Responsible Person on Duty.

Educators will only attempt to extinguish fires if the fires are small, there is no threat to their personal safety and they feel confident enough to operate the extinguisher. The children must already have been evacuated from the room.

Educators should be aware of bush fire dangers and have appropriate training on the necessary procedures.

The NSW Fire Brigade Child Safety Unit will be contacted for advice and training on fire safety.

Emergency Evacuation

An emergency evacuation may be required for any of the following but not limited to:

- Fire
- Chemical spillage
- Bomb threat
- Flood
- Hostage situation
- Building collapse
- Gas leak

Emergency evacuation procedures will be clearly displayed near the main entrance and exit of each room used by the Centre. A risk assessment will be prepared and reviewed annually to identify potential emergencies relevant to the service.

The approved provider of an education and care service must ensure that:

- the emergency and evacuation procedures are rehearsed at minimum once every 3 months by the educators, volunteers and children present at the service on the day of the rehearsal and the responsible person in relation to the service who is present at the time of the rehearsal; and
- the rehearsals of the emergency and evacuation procedures are documented.

Evacuation rehearsals (drills) will be conducted every three months, more regularly when there are new children attending the Service, and will be conducted during different service types (i.e. both before and after school care sessions) allowing all children and all educators to be involved.

Prior to an Emergency Evacuation drill, Educators will discuss with children the reasons for practicing the drill and clear instructions as to what to listen out for and the Evacuation Path.

Following each drill, a record will be made including the date, time and length of time it took to leave building. Children's comments as to how the drill may be improved will be welcomed. Recommendations for improvements from educators can also be included in the record. Such documentation will be kept for a minimum of 2 years.

Parents will be informed of the procedure and assembly points in the Parent Handbook.

The evacuation plan will include:

- Routes on 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 point in case the first one becomes unsafe
- List of items to be collected and by whom
- List of current emergency numbers
- Educator duties in the emergency

Educators will be nominated to:

- Make the announcement to evacuate, identifying where and how
- Collect children's attendance records, educator sign in records and parents contact numbers
- Collect emergency services numbers
- Make the phone call to '000' or another appropriate service. Management Committee and parents as required.
- Collect the First Aid Kit
- Check that the building, toilets, all alternate rooms, and the playground are empty and that all the doors and windows are closed as securely as possible to reduce the spread of fire
- Supervise the children at the assembly area and take a roll call of the children, educators and visitors

No child or educators are to go to their lockers or bags to collect personal items during an emergency evacuation. This would lead to confusion and delays.

The nominated supervisor will maintain a fire blanket and smoke detectors and have these maintained regularly as per manufacturer's instructions. Fire extinguishers will be installed and maintained in line with Australian Standard 2444.

Evacuation Procedure at Melrose Park OSHC

In the event of an emergency, the Responsible Person on duty will sound the megaphone siren.

The Responsible Person on duty will:

- Call '000'
- Take room key and roll, enrolment register with contact numbers and mobile phone
- Take First Aid Kit and emergency medication
- Lock the Centre

Other educators on duty will:

- Gather children from inside and outdoor play areas as quickly as possible, closing all doors and windows if safe to do so
- Check the toilets, kitchen and corridor areas to ensure no children or educators remain in the danger area
- Ensure no children or educators attempt to collect any personal belongings or pack up games/equipment
- Walk quickly and calmly to the assembly area
- Conduct a roll call and head count of the children, and check all educators are present
- Report any missing children or educators to the Responsible Person on duty

Assembly area:

ASSMEBLY POINT: Cricket Pitch

When emergency services arrive, the Responsible Person on duty will inform the Officer in charge of the nature and location of the emergency and any missing persons.

No-one should re-enter the building until the Officer in charge has advised it is safe to do so.

Lock down

Centres are required to lockdown when there is a foreseeable threat of harm to educators, children or visitors caused by, but not limited to, the following:

- Bad weather
- Toxic/chemical spills
- Dangerous and/or threatening persons
- Unwanted/uninvited visitors
- Violent, intoxicated and/or drug affected persons
- Dangerous animals
- Unidentified external disturbance
- Bomb threats
-

Lockdown Procedure at Melrose Park OSHC

In the event that a lockdown is required, all educators will be notified and the Responsible Person on duty will say the phrase 'Code floor'.

The Responsible Person on duty will:

- Call '000'
- Ensure main entry doors are secure and switch off all lighting
- Keep roll, parent contact lists, First Aid Kit, medication and mobile phone
- Conduct a roll call and headcount and account for all persons within the service
- Lock the school gates

Other educators on duty will:

- Move all children into the Centre, if accessible, directing them to sit out of sight from the outside
- Ensure all lighting is switched off, all doors/windows and exit/entry points are secured
- Close all blinds or curtains over windows

When emergency services arrive, 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 leave the building until the Officer in charge has said it is safe to do so.

In the event that the Melrose Park OSHC room is unsafe, the Responsible Person will determine an alternative safe zone and follow the above steps.

Nuisance Animals

The Centre's activities may occasionally be disrupted with snakes, dogs, cats, birds, wasps, bees and other nuisance animals.

If this occurs, educators will direct the children to quietly and calmly leave the affected area and move them into the main room (if not affected). Close all doors and open windows if the children are inside.

Sudden screaming or shouting will frighten a snake or larger animal and it may scatter in the direction of the children.

The Responsible Person on duty will report to a pest exterminator, local council or other appropriate body for treatment.

Severe storms

For emergency assistance during storms, call the NSW SES on 132 500.

Before the storm season:

- Report any tree branches overhanging the Centre to the school
- Keep a portable radio and torch, both with fresh batteries
- Ensure the portable First Aid Kit is fully stocked
- Report any loose objects or other hazards to the school
- Keep masking tape (for glass), plastic sheeting and large garbage bags for rain protection

If a severe storm approaches:

- Listen to the local radio for information
- Shelter children
- Disconnect all electrical appliances
- Mark the roll and check that all children and educators are accounted for and under shelter
- Fill clean containers with water

When a storm strikes:

- Stay inside and shelter children clear of windows
- If necessary, cover children with foam mats, blankets or tarpaulin under tables
- Remain calm and comfort any distressed child
- Do not use any fixed line communication during the storm

Power Failure

Determine if the power failure is Centre based or covers the surrounding suburban area.

Keep the children inside if the power failure is due to fallen power lines nearby.

Contact Energy Australia for emergency service if the cause of the failure has been determined. Inform them that it is a child care service with children in the building. This will permit them to allocate priority to their response.

Ensure a mobile phone is available.

After sundown, ensure the entry steps are lit whenever anyone needs to use them. Keep torches and replacement batteries at the sign in desk to light the room.

Keep the children calm and comfort any distressed child.

Bushfires

In the event of a bushfire:

- Ring '000' if required
- Evacuate, if possible
- Listen to the radio for information
- Contact the local Emergency Service and local Police who should be able to inform you of any threat to the centre

If there is plenty of time to evacuate:

- Notify the police of the location where you are evacuating
- Take the roll, contact phone numbers, First Aid Kit, medication, radio and plenty of drinking water with you
- Take a mobile phone and advise Emergency Services of the number
- Follow the Emergency Evacuation Procedure

Safety measures for the Centre:

- Fill buckets and basins with water
- Hose the outside of the building
- Douse nearby shrubs and grass with water
- Keep a portable radio and torch, both with fresh batteries
- Keep a fully stocked portable First Aid Kit
- Close all doors
- Listen to the radio for information
- Mark the roll and check that all children and educators are accounted for and under shelter
- Place children under tables with wet blankets on top of tables and down sides and remain there until fire has passed

- Remain calm and comfort any distressed child

Floods

In the event of a flood:

- Ring '000' if required, or contact the NSW SES on 132 500 for emergency assistance
- Know your local highest ground level area
- If possible, evacuate children to higher ground and notify Emergency Services of the location to where you are evacuating
- Take a mobile phone and notify Emergency Services of the number
- Take the roll, contact phone numbers, First Aid Kit and medication
- Take radio and torch, both with fresh batteries
- Listen to local radio regarding flood warnings
- Turn off electricity
- Fill clean containers with water
- Close all windows and doors
- Remain calm and comfort any distressed child
- Mark roll and check that all children and educators are accounted for and under shelter

Earthquake

Safety measures for the Centre:

- Contact Police and State Emergency Services to discuss an emergency plan
- Keep a portable radio and torch, both with fresh and spare batteries
- Keep a fully stocked portable first aid kit
- Know the safe areas within the Centre – under tables, against inside walls or in a corner
- Know the danger spots in the Centre – windows, mirrors, hanging objects and tall unsecured furniture
- Know how and where to turn off the electricity, gas and water

If Earthquake begins:

- If you are indoors –
 - stay there
 - Place children under tables or take cover under internal doorframes if possible
 - Keep away from windows, tall unsecured furniture and overhead fittings
- If you are outdoors –
 - Keep children clear of buildings, walls, power lines and trees
 - Do not stand under awnings
 - Beware of power lines
- Remain calm and comfort any distressed child
- Mark the roll and check that all children and educators are accounted for
- Check children for injuries and apply first aid as required

Watch for hazards:

- Turn off domestic appliances
- If there is damage, turn off electricity, gas and water supplies
- Check for water leaks, broken or fallen electrical wires or sewage lines
- Check buildings for cracks and damage, including roof and foundations
- Emergency water may be obtained from water heaters, melted ice cubes and toilet cisterns
- Be prepared for after-shocks
- Evacuate if necessary
- Do not enter damaged buildings

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 Centre, or on an excursion, educators will:

- Calmly and politely inform them of Policy and ask them to leave the Centre or the vicinity of the children. Immediately go into lockdown.
- 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 on duty is unable to make the call, another educator should be directed to do so
- No educator is to try to physically remove the unwelcome person, but try to remain calm and keep the person as far as possible from the group while waiting for the Police

If a non-custodial parent is on the premises and poses a threat to educators or children:

- Where verbal or physical threats are made, educators must endeavour to protect the majority from harm
- Usually a non-custodial parent does not intend harming his/her own child but if the parent persists, release child if necessary
- Every effort should be made to contact the custodial parent, Police and Department of Family and Community Services as soon as possible

Educators should be aware of any unfamiliar person on the premises and find out intentions as quickly as possible and try to contain them outside the Centre.

Emergency involving an Educator

In the case of an emergency/incident incapacitating an educator, senior students (years 5 or 6 only) will be asked for their cooperation in alerting other educators.

Educators will give instructions to the students to move their peers away from the Educator while they are waiting for another educator to arrive and assist.

Senior students are to assemble other children away from the emergency and wait for further instruction from the Responsible Person or other educators.

Children will be brought back to the centre once another Educator has arrived to assist.

Apply First Aid, if applicable.

If necessary, contact '000'.

EVACUATION MAP

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- NSW State Emergency Services
- Work Health and Safety Regulation 2011
- Children and Young Persons (Care and Protection) Act 1998

- Putting Children First (NCAC) – ‘Planning for Emergencies’
- National Standards Section 2.12 (Emergency Procedures/Fire Drills)
- Melrose Park Public School Emergency Procedures

Endorsed Date:	October 2018
Review Date:	October 2019

D-10 First Aid

NQS

QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 3.1.1	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
QA. 4.1	Staffing arrangements enhance children’s learning and development
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 12	Meaning of serious incident
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 87	Incident, injury, trauma and illness record
Reg. 89	First aid kits
Reg. 136	First aid qualifications
Reg. 137	Approval of qualifications
Reg. 146	Nominated supervisor
Reg. 147	Staff members
Reg. 168	Education and care service must have policies and procedures
Reg. 176	Time to notify certain information to Regulatory Authority

Policy Statement

First aid equipment and facilities will be available to all educators, children and visitors while either in the centre or on excursions. All educators will be encouraged to undertake first aid training as part of their conditions of employment to ensure full and proper care is maintained.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy C-2: Conditions of Employment
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction

- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-11: Management of Incident, Injury and Trauma
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-16: Asthma
- MELROSE PARK OSHC Policy D-17: Anaphylaxis
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

Under Regulation 136, the approved provider of a centre-based service must ensure that the following persons are in attendance at any place where children are being educated and cared for by the service, and immediately available in an emergency, at all times that children are being educated and cared for by the service—

- at least one educator who holds a current approved first aid qualification;
- at least one educator who has undertaken current approved anaphylaxis management training;
- at least one educator who has undertaken current approved emergency asthma management training.

The same person may hold one or more of these qualifications.

For the purpose of the Regulation:

- **approved anaphylaxis management training** means anaphylaxis management training approved by the National Authority in accordance with Division 7;
- **approved emergency asthma management training** means emergency asthma management training approved by the National Authority in accordance with Division 7;
- **approved first aid qualification** means a qualification that includes training in the following that relates to and is appropriate to children; and has been approved by the National Authority in accordance with Division 7:
 - emergency life support and cardio-pulmonary resuscitation;
 - convulsions;
 - poisoning;
 - respiratory difficulties;
 - management of severe bleeding;
 - injury and basic wound care;
 - administration of an auto-immune adrenalin device;

All educators will be required to obtain their First Aid Certificate.

New educators will undergo first aid training as part of their condition of employment and all educators will renew their certificates as required.

The Centre will budget for the cost of the first aid course or renewal for each educator as part of the training budget.

A fully stocked and updated first aid kit will be kept in a designated child safe and secure place in the Centre. This will be easily accessible to all educators and volunteers and will be kept inaccessible to children. 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.

A separate travelling first aid kit will also be maintained and taken on all excursions, any outdoor activities, and in the event of an emergency evacuation.

An inventory of the kits will be maintained, checked termly and signed off by the Nominated Supervisor. The Nominated Supervisor may be required to produce these checklists if requested by Management or by the NSW Regulatory Authority.

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. Cold packs will be kept in the freezer for treatment of bruises and strains as well as instant ice packs for excursions or other emergencies

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

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

In the case of a minor incident, 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 as per the Hygiene Policy, and Illness and Infectious Diseases Policy
- Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner
- Ensure that anyone who has come in contact with any blood or fluids wash in warm soapy water
- Record the incident in the Minor Incident/Injury/Trauma folder, indicating name, date, time, nature of injury, how it occurred, treatment given and by whom, to be signed by the educator reporting and the witness.
- If the minor incident involves an injury to the head, parents should be contacted immediately to inform them of the incident. If a child's demeanor or condition worsens shortly after the incident then parents should be contacted to inform them, otherwise parents can be notified of the incident upon arrival at the Centre when collecting their 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 and Trauma Policy are followed and the Regulatory Authority is notified within 24 hours.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- St John Ambulance Australia – First Aid
- Australian Children’s Education and Care Quality Authority (ACECQA)

Endorsed Date:	October 2018
Review Date:	October 2019

D-11 Management of Incident, Injury and Trauma

NQS

QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 12	Meaning of serious incident
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 89	First aid kits
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 174	Time to notify certain circumstances to Regulatory Authority
Reg. 177	Prescribed enrolment and other documents to be kept by approved provider
Reg. 183	Storage of records and other documents

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We will ensure the safety and well-being of educators, children and visitors, within the Centre and on excursions, through proper care and attention in the event of an incident, injury or trauma. The Centre will make every attempt to ensure sound management of the incident, injury or trauma, to prevent any worsening of the situation. Parents or emergency contacts will be informed immediately where the incident, injury or trauma is deemed serious and all serious incidents will be reported to the relevant authorities.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-15: Role of the Management Committee
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-12: Death of a Child or Educator
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

Under regulation 161, parents are required to provide written consent for the Approved Provider, Nominated Supervisor or an educator to seek:

- medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and
- transportation of the child by an ambulance service

The above authorisations will be obtained on enrolment. Parents will be required to supply the name and contact details of their preferred doctor as well as the child's Medicare number. These will also be recorded as part of the enrolment process.

On Employment, educators will be required to supply a contact number in case they are involved in an emergency or accident.

If a child, member or visitor has an accident while at the Centre, they will be attended to immediately by an educator who holds a first aid certificate.

In the case of medication being required in an emergency without prior consent of the parents/guardians, the responsible person on duty is to secure that consent from a registered medical practitioner.

Anyone injured will be kept under adult supervision until they recover or an authorised person takes charge of them.

Meaning of *serious incident*:

For the purposes of section 174(5) of the Law, the following are prescribed as serious incidents:

- the death of a child
 - while being educated and cared for by an education and care service; or

- following an incident while being educated and cared for by an education and care service;
- any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an education and care service:
 - which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - for which the child attended, or ought reasonably to have attended, a hospital;

Examples Whooping cough, broken limb, anaphylaxis reaction.
- any incident where the attendance of emergency services at the education and care service premises was sought, or ought reasonably to have been sought;
- any circumstance where a child being educated and cared for by an education and care service:
 - appears to be missing or cannot be accounted for; or
 - appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or
 - is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

In the case of a minor incident, 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 as per the Hygiene Policy, and Illness and Infectious Diseases Policy
- Ensure that all blood or bodily fluids are cleaned up and disposed of in a safe manner (see Illness and Infectious Diseases Policy)
- Ensure that anyone who has come in contact with any blood or fluids be attended to as per guidelines in the Illness and Infectious Diseases Policy
- Record the incident in the Minor Incident/Injury/Trauma folder, indicating name, date, time, nature of injury, how it occurred, treatment given and by whom, to be signed by educator reporting and witness.
- If the minor incident involves an injury to the head, parents should be contacted immediately to inform them of the incident. If a child's demeanor or condition worsens shortly after the incident then parents should be contacted to inform them, otherwise parents can be notified of the incident upon arrival at the Centre when collecting their child.
- A parent must be informed within 24 hours of the incident, injury or trauma and must sign the appropriate form to confirm this has been communicated.

In the case of a major incident requiring more than basic 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 advise the responsible person or Nominated Supervisor of their decision.
- If the child's injury is serious, the first priority is to get immediate medical attention. The ambulance service will be called immediately. Parents/guardians should be notified also,

however there will be no delay in organising proper medical treatment. Another educator can keep trying to contact the parents/guardians in the meantime if available.

- Attend to the injured person and apply first aid as required.
- Educators will ensure that disposable gloves are used with any contact with blood or bodily fluids as per the hygiene policy, and Illness and Infectious Diseases Policy.
- An educator will stay with the child until suitable help arrives, or further treatment taken.
- The educator will try to make the child comfortable and reassure them that they will be alright.
- If an ambulance is called and the child is taken to hospital, an educator will accompany the child and take the child's medical records with them if the parents / guardians have not yet arrived.
- Complete a Centre Major Incident/Injury/Trauma report and a report for the Regulatory Authority.

The responsible person on duty will:

- Notify the parents or emergency contact person immediately regarding what happened and advise that action is being taken. Every effort will be made not to panic the parents.
- Ensure that all blood or bodily fluids are cleaned up in a safe manner.
- Ensure that anyone who has come in contact with any blood or fluids is treated as per the Illness and Infectious Diseases Policy.
- Try to reassure the other children and keep them calm, keeping them away from the injured child.

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

- Parents/Guardian
- NSW ambulance service
- The police
- Regulatory Authority
- The Management Committee

The Centre will notify the parent/guardian that a serious incident has happened and advise them to contact the relevant medical agency.

Only a qualified medical practitioner can declare a person dead and 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 incident 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.

Reporting of Serious Incident, Injury and Trauma

Any serious incident, injury or trauma (including death) will be recorded within 24 hours of the event occurring. The child's parent/guardian must be notified of any incident 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 (Management Committee).

Notification must be made to ACECQA via the NQAITS online portal.

It may not become apparent that an incident was serious until sometime after the incident occurred. If this is the case, the Nominated Supervisor must notify the Regulatory Authority within 24 hours of becoming aware that the incident was serious.

Records of an incident must be kept in a safe and secure location and for the relevant period of time, in accordance with the National Regulations:

- If the record relates to an incident, illness, injury or trauma suffered by a child while under the care of the service, it must be kept until the child is aged 25 years
- If the record relates to an incident, illness, injury or trauma suffered by a child that may have occurred following an incident while under the care of the service, it must be kept until the child is aged 25 years
- If the record relates to the death of a child while under the care of the service, or that may have occurred as a result of an incident while being cared for, it must be kept until the end of 7 years after the death

Regulatory Authority for NSW

Educators will ensure that the NSW Regulatory Authority (see below) is notified of the child's death or of a serious injury / incident / trauma as soon as practicable and within 24 hours, or as soon as the educator hears of the death. This is a requirement under the Education and Care Services Regulations (2011)

NSW Early Childhood Education and Care Directorate
Department of Education and Communities

Locked Bag 5107
PARRAMATTA NSW 2124
Phone: 1800 619 113 (toll free)
Fax: (02) 8633 1810

Website: <http://www.dec.nsw.gov.au/ecec>
E-mail: ececd@det.nsw.edu.au

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Work, Health and Safety Act 2011
- Privacy Act 1988
- Children (Education and Care Services National Law Application) Act 2010

Endorsed Date:	October 2018
Review Date:	October 2019

D-12 Death of a Child or Educator

NQS

QA. 2.2	Each child's health and physical activity is promoted and supported
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 12	Meaning of serious incident
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 168	Education and care service must have policies and procedures
Reg. 176	Time to notify certain information to Regulatory Authority

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

Educators in the Centre must be prepared to handle all incidents in a professional and sensitive manner. In the event of such a tragic circumstance as the death of a child or an educator, the educators will follow guidelines as set out below.

Related Policies

- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy C-4: Educator Professionalism
- MELROSE PARK OSHC Policy D-9: Emergency Procedures

- MELROSE PARK OSHC Policy D-11: Management of Incident, Injury and Trauma

Procedure

The death of a child or educator whilst in attendance at the centre will result in the same procedures undertaken as that of a “serious incident” (see D-11 Management of Incident, Injury and Trauma Policy).

The death must be reported to:

- Emergency Services (both Police and Ambulance)
- NSW Government – Department of Family and Community Services
- The Management Committee
- The Regulatory Authority for NSW (see below)

Clear emergency procedure should be maintained for the other children at the Centre (see D-9 Emergency Procedures Policy).

The Responsible Person 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.

It is **not** the role of the Centre to inform the parent/guardian that their child has died. Only a qualified medical practitioner can declare a person dead and 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.

A detailed incident report will be completed as soon as practicable, but no later than 24 hours after the incident (Regulation 87), and forwarded to the President of the Management Committee.

The site of an incident may be subject to investigation and should be protected from disturbance until notified that there is no interest in the site by the Police. Counselling will be made available for all children and educators.

Regulatory Authority for NSW

Educators will ensure that the NSW Regulatory Authority (see below) is notified of the child’s death as soon as practicable and within 24 hours. This is a requirement under Regulation 176 of the Education and Care Services Regulations (2011).

NSW Early Childhood Education and Care Directorate
Department of Education and Communities

Locked Bag 5107
PARRAMATTA NSW 2124

Phone: 1800 619 113 (toll free)

Fax: (02) 8633 1810

Website: <http://www.dec.nsw.gov.au/ecec>

E-mail: ececd@det.nsw.edu.au

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Privacy Act 1988
- Children (Education and Care Services National Law Application) Act 2010
- NSW Government – Department of Family and Community Services
- My Time, Our Place Framework for School Age Care in Australia

Endorsed Date:	October 2018
Review Date:	October 2019

D-13 Illness and Infectious Diseases

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.2	Each child is protected.
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 5.1	Respectful and equitable relationships are maintained with each child.
QA. 5.1.2	The dignity and rights of every child are maintained.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 7.1	Governance supports the operation of a quality service

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 88	Infectious diseases
Reg. 89	First aid kits
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available
Reg. 173	Prescribed information to be displayed

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We aim to provide a safe and hygienic environment that will promote the health of the children. We will take all reasonable steps to prevent the spread of infectious diseases through the implementation of procedures that are consistent with the guidelines of the state Health Authorities. Children with infectious diseases will be excluded from the centre for the period recommended by the Department of Health.

All care and consideration will be given to the child who becomes ill while at the centre, ensuring they are kept comfortable and ensuring the risk of cross infection is minimised until the child is collected by the parent/emergency contact.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-4: Food Safety and Handling
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-14: Immunisation
- MELROSE PARK OSHC Policy D-21: HIV/AIDS/HEP B & C

Procedure

Parents will be informed about the illness and infectious diseases policy on enrolment through the family handbook.

A child or adult will be considered sick if he/she:

- sleeps at unusual times, is lethargic
- has a fever over 38 degrees
- is crying constantly from discomfort
- vomits or has diarrhoea
- 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. Children who appear unwell when being signed in by their parent/guardian will not be permitted to be left at the service.

If a child becomes ill or develops symptoms at the centre, the parents will be contacted to take the child home. Where the parents are not available, emergency contacts will be called to ensure the child is removed from the service promptly.

The child 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.

During a mild fever (38°C - 39.5°C), natural methods will be employed to bring the child's temperature down until the parents or authorised collector arrives or help is sought. Such methods include; clothes removed as required, clear fluids given, tepid sponges administered.

If an educator is unwell they should not report for work. Educators should contact the centre as soon as possible to inform them that they are unable to attend work.

If an educator becomes ill or develops symptoms at the centre, they can return home if able or organise for someone to take them home.

The responsible person will organise a suitable replacement as soon as possible.

Infection Control Procedures

Handwashing is the most effective way to reduce the spread of infection, particularly when handling food or bodily fluids. Educators and children must thoroughly wash their hands before and after handling or eating food, after toileting, after dealing with bodily fluids, after wiping noses, after coughing or sneezing, after handling rubbish, or after touching animals.

Gloves should be worn as a barrier when cleaning up bodily fluids. Hands must be washed after gloves are removed and gloves should never be used as a substitute for washing hands.

Safe and hygienic food practices will be maintained to prevent food contamination and the transmission of bacteria (see Food Handling and Hygiene Policy).

All educators dealing with open sores, cuts and bodily fluids with any child or adult shall wear disposable gloves. Educators 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 educators must 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 get on the skin but there is no cut or puncture, wash away with warm soapy water.

In the event of exposure through cuts or chapped skin, promptly wash away the fluid 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 open eyes gently with cold or tepid tap water or saline solution.

In the event that CPR must be performed, disposable sterile mouth masks are to be used or, if unavailable, a piece of cloth. The educator in charge of the first aid kit will ensure that a mask is available at all times.

Any exposure should be reported to the responsible person and Management to ensure the proper follow up procedure occurs. Where an educator or child has come into contact with another person's blood or bodily fluids, and they have a break in their skin, or the exposure has been through their mouth or eyes, they should present to a GP to advise the circumstances.

Any soiled clothing shall be handled using disposable gloves, placed and sealed in a plastic bag for the child's parents to take home.

Any blood or bodily fluid spills will be cleaned up immediately using gloves and the area further cleaned with warm water and detergent. Large blood spills should be further wiped with a diluted bleach solution, made up immediately prior to use. Educators must utilise gloves when using the bleach solution. After the clean-up of all spills, educators must remove gloves, and place in a sealed plastic bag along with any cloths used in the cleaning process, and dispose. Following the disposal of such items, educators should thoroughly wash their hands immediately.

Management of infectious disease outbreak

All educators will ensure proper hygiene practices are carried out as outlined in the Hygiene policy.

The centre will also abide by their immunization policy, as required.

Children and educators 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 and will be explained to the parent/guardian. For example, children with diarrhea will be excluded for 24 hours after the diarrhea has ceased.

The decision to exclude or re-admit a child or educator will be determined by the responsible person on duty based on the child's/educator's symptoms, medical opinion and Department of Health guidelines for people who have an infectious disease or who have been exposed to an infectious disease.

The responsible person on duty has the right to refuse access if concerned 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 centre.

Parents will be informed about the occurrence of an infectious disease in the centre (Regulation 173) as soon as reasonably practical, ensuring that the individual rights of educators or children are not infringed upon.

The Public Health Unit will be notified if any child contracts a vaccine-preventable disease.

Payment of fees will be required for children during an outbreak of a vaccine-preventable disease, unless other arrangements discussed and agreed to by the management committee have been made.

Management of HIV/AIDS/Hepatitis B and C

Under the Federal Disability Act and the Equal Opportunity Act, no discrimination will take place based on a child's/parent's/educator'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 an educator member the right to equal opportunity of employment. The Centre has no right to advise other families attending the service of a child or educator's HIV status.

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 educators as other children in the centre.

Where an educator is informed of a child, parent or other educator who has HIV/AIDS or Hepatitis B or C, this information will remain confidential at all times. A breach of this confidentiality will be considered a breach of discipline.

Educators will ensure that no discussion is made other than insuring proper care of all children is maintained.

Proper, safe and hygienic practices will be followed at all times and implementation of procedures to prevent cross infection as identified in this policy will be implemented.

Educators and parents will be encouraged to participate in AIDS and Hepatitis education.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Disability Discrimination Act 1992
- NSW Anti-discrimination Act 1977
- Work Health and Safety Act 2011
- Privacy Act 1988
- NSW Department of Health Guidelines
- Staying Healthy in Child Care Manual 5th Edition
- Equal Employment Opportunity Act 1987
- Putting Children First (NCAC) Factsheet: 'Infection Control in Outside School Hours Care'
- Putting Children First (NCAC) Factsheet: 'Managing Illness in Child Care'

Endorsed Date:	October 2018
Review Date:	October 2019

D-14 Immunisation

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 88	Infectious diseases
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures

Policy Statement

We respect the right of individual parents to choose whether or not they immunise their children. However, children who are not immunised will be excluded for the period of an outbreak of a vaccine-preventable disease. Proof of immunisation will be sought on enrolment and will be kept on file with the enrolment form.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-6: Fees
- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy C-2: Conditions of Employment
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Disease
- MELROSE PARK OSHC Policy D-21: HIV/AIDS and HEP B & C

Procedure

Families will provide the Centre with a copy of their Immunisation History Statement (from the Australian Childhood Immunisation Register) on enrolment as evidence of child's immunisation status. Where an Immunisation History Statement is not available, the centre will be unable to accept the Enrolment. Once received, the ACIR certificate will be kept on file with the child's enrolment form.

In the event of an outbreak of a 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.

In the event that any child contracts a vaccine-preventable disease, The Public Health Unit will be notified:

NSW Health Public Health Unit - 1300 066 055

Payment of fees will be required for children excluded during an outbreak of a vaccine-preventable disease. Families eligible for Child Care Benefit, are able to elect for these days excluded from the Centre to be noted as 'approved absences'.

All educators should also maintain through immunisation, their immunity to common childhood diseases. Educators will be encouraged to undergo immunisation for Hepatitis B if they are not already immunised. Educators will be required to provide immunisation status on employment. In line with the immunisation policy, any educators not immunised against a vaccine-preventable disease will also be excluded for the duration of an outbreak.

It is also recommended that all adults receive a booster dose of tetanus and diphtheria vaccine every ten years.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- NSW Public Health Act 2010
- Dept of Health Recommendations
- National Health and Medical Research Council "Staying Healthy in Child Care- Preventing Infectious Diseases in Child Care" (2006)
- Putting Children First (NCAC) – 'Infection Control in Outside School Hours Care'

Endorsed Date:	October 2018
Review Date:	October 2019

D-15 Allergies

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
LO. 3	Children have a strong sense of wellbeing

Policy Statement

We aim to provide safe and effective care of children by ensuring educators are fully aware of the individual needs of all children, including their reactions to, and management of, allergies. Policies and practices relating to allergy management will be reviewed regularly.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors

- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-3: Food and Nutrition
- MELROSE PARK OSHC Policy D-4: Food Safety and Handling
- MELROSE PARK OSHC Policy D-17: Anaphylaxis

Procedure

Parents will be required to inform the Centre of any allergies the child may have at the time of enrolment. This information will be recorded on the enrolment form.

Where the child has a severe allergy, the parents will be asked to supply a colour copy of the ASCIA Allergy Management plan from their doctor explaining the effects if the child was to be exposed to a particular allergen and the action required, as per Regulation 90. Children with Anaphylaxis will be required to provide the colour copy of the ASICA "Action Plan for Anaphylaxis" from the child's doctor, with current colour photo. Without these plans, a child's enrolment will not be confirmed. A medical kit with the child's medication will also be required before enrolment is confirmed.

A risk minimisation and communication plan will be provided to all parents and must be completed and signed before enrolment is approved.

Parents will be reminded of this requirement through the Family Handbook.

Permission will be sought from the parent for their child's action plan to be placed in a visible spot in the kitchen.

All educators will be informed of the current enrolments with allergies on an ongoing basis. A list will be kept of all children with particular allergies and educators will be responsible for referring to the list at the commencement of each shift.

All relief educators and volunteers 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 the child.

Food Allergies

Parents will be required to provide an outline of the child's current diet on a Severe Allergies Form. Parents may be required to provide further information regarding the allergy and action plan at the discretion of the Centre Director.

A listing of children with food allergies will be placed in the kitchen so as to be easily visible and accessible to educators.

A list of what the child cannot eat will be recorded, as well as alternatives of what the child can eat.

Parents/guardians of child with an allergy will be provided with a copy of the Allergies Policy (Regulation 91).

Practices and procedures in relation to safe food preparation and consumption will be reviewed each time an enrolment for a child with a Severe Allergy is accepted at the centre.

At minimum, this policy will be reviewed every 12 months.

If relevant, policies and practices in relation to specific needs of individual children will be developed and implemented.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- United Nations Rights of the Child (Article 24)
- NSW Public Health Act 2010

Endorsed Date:	October 2018
Review Date:	October 2019

D-16 Asthma

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 94	Exception to authorisation requirement—anaphylaxis or asthma emergency
Reg. 136	First aid qualifications
Reg. 137	Approval of qualifications
Reg. 145	Staff record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 247	Asthma management training

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We aim to provide an environment which is safe and healthy where children with asthma can participate equally in all aspects of the programs and experiences offered at the service. We will ensure all educators are equipped with adequate knowledge and training of asthma management to enable them to respond immediately and appropriately to an asthma emergency.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations

- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

The Centre will ensure there is at least one educator present at all times that children are being educated and cared for at the centre who has undertaken approved emergency asthma management training, as per Regulation 136.

Parents will be required to inform the Centre of any child diagnosed by a medical practitioner as being asthmatic, and the severity, at the time of enrolment. This information is recorded on the enrolment form.

Parents are reminded of this requirement through the Family Handbook.

Parents will be required to provide a copy of a medical action plan, as authorised by a medical practitioner (Regulation 90). Permission will be required from parents to have the action plan displayed in a location visible to educators responsible for the child.

Any medication required such inhalers and spacers must be supplied by the parents in a hard plastic box, clearly marked with the child's name and any additional relevant information must be kept with the medication at all times.

An emergency reliever inhaler and spacer will be kept in the First Aid Kit. Educators will be responsible for replacing the inhaler when it has expired. If the emergency spacer is used by a child during an asthma attack, the spacer will be disposed of after use, and a replacement purchased.

All medication must be stored in an area easily accessible to educators but inaccessible to children and away from any direct heat source.

When off school grounds, any asthma medication must be carried and administered only by educators adequately trained in asthma management.

All educators, including relief educators and volunteers, will be informed of the current enrolled children who have been diagnosed as being asthmatic upon employment. Educators will be responsible for familiarising themselves with the children diagnosed.

In the event of an asthma attack occurring where a child has been diagnosed as being asthmatic, educators will follow the instructions on the child's action plan.

In the event of an asthma attack occurring where a child has not received an asthma diagnosis and has no prior history of asthma, educators will:

- Sit the child upright and reassure them. Child must not be left alone.
- Administer 4 puffs of the reliever inhaler (one puff at a time), preferably through a spacer device. Child should take 4 breaths with each puff of the inhaler.
- Wait 4 minutes
- Have another educator contact parent or guardian
- If there is little or no improvement repeat the above steps
- If there is still little or no improvement, contact ambulance services "000"
- Continue the above steps until medical services arrive

Medication may be administered to a child without an authorisation in case of an asthma emergency (Regulation 94). If medication is administered under this regulation, the approved provider or nominated supervisor of the education and care service must ensure that the following are notified as soon as practicable:

- a parent of the child
- emergency services

Educators must ensure that all asthma medication administered is recorded in a medication record.

Parents/guardians of children diagnosed as being asthmatic must be provided with a copy of the Asthma Policy (Regulation 91).

Any Educators who has been diagnosed as being asthmatic by a medical practitioner must advise the Centre Director. This will be recorded on their emergency details form and any additional information recorded on file.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- Australian Children's Education and Care Quality Authority (ACECQA)

- United Nations Rights of the Child (Article 24)
- Asthma Australia - <http://asthmaaustralia.org.au/>

Endorsed Date:	October 2018
Review Date:	October 2019

D-17 Anaphylaxis

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 94	Exception to authorisation requirement— anaphylaxis or asthma emergency
Reg. 136	First aid qualifications
Reg. 137	Approval of qualifications
Reg. 145	Staff records
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 173	Prescribed information to be displayed
Reg. 246	Anaphylaxis training

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We believe the safety and wellbeing of children who are at risk of anaphylaxis is a whole-community responsibility. We aim to provide an environment which is safe and healthy where children at risk of anaphylaxis can participate equally in all aspects of the programs and experiences offered at the service. We will ensure all educators are equipped with adequate knowledge and training of allergies, anaphylaxis and emergency procedures to enable them to respond immediately and appropriately.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-19: Nut-Free Zone
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

The Centre will ensure there is at least one educator present at all times that children are being educated and cared for at the service who has undertaken approved anaphylaxis management training, as per Regulation 136.

Parents will be required to inform the Centre of any child diagnosed by a medical practitioner as being at risk of anaphylaxis, at the time of enrolment. This information is recorded on the enrolment form.

Parents are reminded of this requirement through the Family Handbook.

Parents will be required to provide a colour copy of the ASCIA Anaphylaxis Action plan with current colour photo attached, as authorised by the medical practitioner (Regulation 90). This can be found on the centre's website. Permission will be required from parents to have the action plan displayed in a location visible and accessible to educators responsible for the child.

Any medication required such as an adrenalin pen or anti-histamine must be supplied by the parents in a hard plastic box, clearly marked with the child's name and any additional relevant information must be kept with the medication at all times.

The Centre Director will ensure that any child who has been prescribed an adrenalin pen is only allowed to attend the centre if their medication has been made available to educators.

All medication must be stored in an area easily accessible to educators but inaccessible to children and away from any direct heat source.

When off school grounds, any adrenalin pens for children on the excursion must be carried and administered only by educators adequately trained in anaphylaxis management.

All educators, including relief educators and volunteers, will be informed of the current enrolled children who have been diagnosed with anaphylaxis upon employment. Educators will be responsible for familiarising themselves with the children diagnosed.

In the event of an anaphylactic reaction occurring where a child has been diagnosed at risk of anaphylaxis, educators will follow the instructions on the child's action plan.

In the event of an anaphylactic reaction occurring where a child has been diagnosed as only being allergic, educators will:

- Call an ambulance immediately "000"
- Commence first aid measures
- Contact the parent/guardian
- Contact the person to be notified in the event of illness if the parent/guardian cannot be contacted

Medication may be administered to a child without an authorisation in case of an anaphylaxis emergency (Regulation 94). If medication is administered under this regulation, the approved provider or nominated supervisor of the education and care service must ensure that the following are notified as soon as practicable:

- a parent of the child
- emergency services

Educators must ensure that all anaphylaxis medication administered is recorded in a medication record.

Parents/guardians of children diagnosed as being at risk of anaphylaxis must be provided with a copy of the Anaphylaxis Policy on enrolment (Regulation 91).

If parental permission is given, the Centre must notify the other families using the service of a child at risk of anaphylaxis being enrolled in the service (Regulation 173). The child's name will not be mentioned. This can be done in the newsletter and will be displayed on the noticeboard.

If relevant, policies and practices in relation to specific needs of individual children will be developed and implemented.

Food Allergies

If a child has been diagnosed as being at risk of anaphylaxis directly relating to certain foods:

- Parents will be required to provide an outline of the child’s current diet on a Severe Allergies Form (see D-15 Allergies Policy)
- A listing of children with food restrictions will be placed in the kitchen to remind educators
- A list of what the child cannot eat will be recorded, as well as alternatives of what the child can eat
- All educators are to make themselves aware of the record on an ongoing basis

Practices and procedures in relation to safe food preparation and consumption will be reviewed each time an enrolment for a child with a risk of anaphylaxis is accepted at the centre.

Melrose Park OSHC is currently a nut-free centre in line with the anaphylaxis requirements of attending children. Where possible, the Centre will reduce the risk of exposure to allergens and provide alternatives during meal times where an allergen may be present.

Any educators who have been diagnosed as being at risk of anaphylaxis by a medical practitioner must advise the Centre Director. This will be recorded on their staff details form and any additional information recorded on file.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- Australian Children’s Education and Care Quality Authority (ACECQA)
- United Nations Rights of the Child (Article 24)
- Allergy and Anaphylaxis Australia - <http://www.allergyfacts.org.au/>
- Network of Community Activities Factsheet – ‘Anaphylaxis’

Endorsed Date:	October 2018
Review Date:	October 2019

D-18 Diabetes

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 136	First aid qualifications
Reg. 145	Educators record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We aim to provide safe and effective care for children diagnosed with diabetes by ensuring all educators are fully aware of the individual needs of each child. All educators will be appropriately trained in emergency first aid to ensure they are able to adequately administer medication and respond appropriately in a diabetes emergency.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions

- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-3: Food and Nutrition
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

Parents will be required to inform the Centre of any child diagnosed by a medical practitioner as having diabetes at the time of enrolment. This information is recorded on the enrolment form.

Parents are reminded of this requirement through the Family Handbook.

The Centre Director will organise a meeting with the parents/guardians of the child to discuss the details of managing the child's condition during their time at the Centre.

Parents will be required to provide a copy of a diabetic emergency plan, as authorised by the medical practitioner (Regulation 90). Permission will be required from parents to have the diabetic emergency plan displayed in a location visible and accessible to educators responsible for the child.

The following will need to be obtained from the parents before the child is able to attend the service:

- Blood Glucose Test authorisation
- Blood glucose testing kit, labelled clearly with the child's name
- Diabetic emergency plan, as authorised by medical practitioner

If the child requires any additional considerations with regards to toileting, meal times, food restrictions, physical activity etc., the parent/guardian must advise the Centre Director upon enrolment, or as soon as is relevant. It is the duty of the Centre Director to ensure this information is made available to the educators responsible for the child.

Alternatives will be provided for any child diagnosed with diabetes at meal times, where possible and/or appropriate.

Any medication or relevant medical equipment required must be supplied by the parents in a hard plastic box, clearly marked with the child's name and any additional relevant information must be kept with the medication at all times.

All medication must be stored in an area easily accessible to educators but inaccessible to children and away from any direct heat source.

All blood glucose testing and emergency response in regards to a diabetic child, must be managed only by the educators on duty that are First Aid trained. Where the child is able and confident to test their Blood Glucose Levels independently, a quiet area will be provided for them to do so. The child

will be monitored and required to advise an educator that they have completed their test so as to keep them informed of their current levels.

All educators, including relief educators and volunteers, will be informed of the current enrolled children who have been diagnosed as diabetic upon employment. It is the responsibility of all educators to familiarise themselves with any children diagnosed.

In the event of a diabetic emergency occurring, educators will follow the instructions on the child's diabetes emergency plan.

Parents/guardians of children who have been diagnosed as diabetic must be provided with a copy of the Diabetes Policy (Regulation 91).

If relevant, policies and practices in relation to specific needs of individual children will be developed and implemented.

Any educators who has been diagnosed as diabetic by a medical practitioner must advise the Centre Director. This will be recorded in their emergency details form and any additional information recorded on file.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Australian Children's Education and Care Quality Authority (ACECQA)
- United Nations Rights of the Child (Article 24)
- Diabetes NSW - <http://www.australiandiabetescouncil.com/>

Endorsed Date:	October 2018
Review Date:	October 2019

D-19 Nut-Free Zone

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 6.1.3	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing.
QA. 7.1.3	The induction of educators, co-ordinators and staff members, including relief staff, is comprehensive.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available
Reg. 173	Prescribed information to be displayed

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
	Children learn to interact in relation to others with care, empathy and respect
LO. 3	Children take increasing responsibility for their own health and physical wellbeing

Policy Statement

We believe the safety and wellbeing of children who are at risk of anaphylaxis is a whole-community responsibility. Melrose Park OSHC is a nut-free zone in line with the anaphylaxis requirements of attending children. We aim to provide an environment which is safe and healthy for all children and in doing so, the Centre will reduce the risk of exposure to allergens where appropriate.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-12: Policy Development and Review
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-3: Food and Nutrition
- MELROSE PARK OSHC Policy D-4: Food Safety and Handling
- MELROSE PARK OSHC Policy D-15: Allergies
- MELROSE PARK OSHC Policy D-17: Anaphylaxis

Procedure

Parents will be advised that the Centre is a Nut-Free Zone on enrolment and will be reminded regularly through the Family Handbook, posters and newsletters.

To ensure the safety and wellbeing of all children, the following guidelines will be maintained at all times:

- Parents/guardians must advise the Centre if their child has any allergies or has been diagnosed with anaphylaxis at the time of enrolment, and must provide the relevant Medical Action Plan and medications (See Anaphylaxis Policy)
- Parents/guardians will be asked not to pack lunches or snacks for their children which include nuts or nut products – examples could include:
 - Peanut Butter, Nutella, other spreads including nuts
 - Fruit and Nut mixes
 - Muesli Bars or other lunch box snack bars which include nuts
 - Lollies or chocolates containing nuts
- Children will be reminded not to swap or share lunches or snacks
- Products which include nuts in their ingredient list will not be allowed in the Centre or as part of any food supplied by the Centre (this does not include products with the warning ‘may contain traces of nuts’)

- Parents/guardians will be encouraged to always read the labels of food products prior to packing them for their children’s lunches
- Allergy and anaphylaxis awareness will be encouraged amongst the Centre’s community
- The Centre will reduce the risk of exposure to allergens during meal times and provide alternatives where an allergen may be present
- Vigilant observation whilst eating and hand-washing to prevent cross contamination will be upheld
- Children will not be isolated from others or discriminated against due to an allergy

Practices and procedures in relation to safe food preparation and consumption will be reviewed each time an enrolment for a child with a risk of anaphylaxis is accepted at the centre.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Australian Children’s Education and Care Quality Authority (ACECQA)
- United Nations Rights of the Child (Article 24)
- Allergy and Anaphylaxis Australia - <http://www.allergyfacts.org.au/>
- Network of Community Activities Factsheet – ‘Anaphylaxis’

Endorsed Date:	October 2018
Review Date:	October 2019

D-20 Medication

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.2	Each child is protected.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 6.2.2	Effective partnerships support children's access, inclusion and participation in the program
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 92	Medication record
Reg. 93	Administration of medication
Reg. 94	Exception to authorisation requirement—anaphylaxis or asthma emergency
Reg. 95	Procedure for administration of medication
Reg. 96	Self-administration of medication
Reg. 136	First aid qualifications
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available
Reg. 181	Confidentiality of records kept by approved provider

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children feel safe, secure, and supported
LO. 3	Children take increasing responsibility for their own health and physical wellbeing

Policy Statement

We aim to ensure the proper care and attention of all children through following specific guidelines regarding all medications administered to the children. To ensure the interests of educators, children and parents are not compromised, medication must be in its original packaging and 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 (Regulation 93).

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-10: Acceptance and Refusal of Authorisations
- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-16: Asthma
- MELROSE PARK OSHC Policy D-17: Anaphylaxis

Procedure

As per Regulation 95, if medication is administered to a child being educated and cared for by a service, the medication must only be administered:

- if the medication has been prescribed by a registered medical practitioner, from its original container, bearing the original label with the name of the child to whom the medication is to be administered, and before the expiry or use by date; or
- from its original container, bearing the original label and instructions and before the expiry or use by date

Non-prescription medication will only be administered at the Centre from its original container bearing the original label and instructions for administration, and before it's expiry date.

Medication will only be administered by the Certified Supervisor or First Aid Trained educators during service operating hours.

Written authorisation from the parent or guardian must be sought prior to medication being able to be administered, or for a child to self-administer medication. Verbal approval of a medical practitioner or parent/guardian may be accepted in the case of an emergency, as per Regulation 93. Authorisation from anyone other than the parent/ guardian or medical practitioner cannot be accepted.

Under Regulation 94, medication may be administered to a child without an authorisation in the case of an anaphylaxis or asthma emergency. If medication is administered under this regulation, the

approved provider or Nominated Supervisor must ensure that both the parent of the child and emergency services are notified as soon as practicable.

Parents who require medication to be administered to their child at the Centre must complete the *Authorisation to Administer Medication Form* (see A-10 Acceptance and Refusal of Authorisations Policy) providing the following information:

- the name of the child
- the authorisation to administer medication (including, if applicable, self-administration), signed by a parent or a person named in the child's enrolment record as authorised to consent to administration of medication
- the name of the medication to be administered
- the time and date the medication was last administered
- the time and date, or the circumstances under which, the medication should be next administered
- the dosage of the medication to be administered
- the manner in which the medication is to be administered

The Nominated Supervisor or Responsible Person will ensure the details on the form are clear and clarify any questions they may have prior to accepting the authorisation.

Where medication is being administered by educators, the medication must be given directly to the Responsible Person and not left in the child's bag. The medication will be clearly marked and stored out of reach of children. Medication that requires refrigeration, will be stored in a locked box in the fridge, all other medication will be stored in the locked first aid cupboard.

If anyone other than the parent is bringing the child to the Centre, written authorisation from the parent, or other authorised nominee, including the above information, must accompany the medication.

An exception to the procedure is applied for asthma medication in which case the child may carry their medication on their person with parental permission. Where the child carries their own asthma medication, they must report their use of the puffer to an educator as soon as possible after administering. The Centre will maintain a record of this medication administration including the time, the educator advised and if the symptoms were relieved.

Administration of Medication

Before medication is given to a child, the Responsible Person (holding a current First Aid Certificate) administering the medication will verify the correct dosage with another educator who will also witness the administration of the medication.

After the medication is given, the Responsible Person will record the details on the *Authorisation to Administer Medication Form*, including:

- the dosage that was administered
- the manner in which the medication was administered
- the time and date the medication was administered
- the name and signature of the person who administered the medication
- the name and signature of the person who verified and witnessed the administration of the medication

Where a medical practitioner’s approval is given, an educator will complete the *Authorisation to Administer Medication Form* and write the name of the medical practitioner for the authorisation.

Where medication for treatment of long term conditions such as asthma, epilepsy, or ADHD is required, the Centre will require an individual medical management plan from the child’s medical practitioner or specialist detailing the medical condition of the child, correct dosage and how the condition is to be managed in the service environment.

To support children to take increasing responsibility for their own health and wellbeing, specific consideration will be given to children who are carrying medication in their school bags to self-medicate, only when written authorisation has been provided by the parents/guardian (Regulation 96). 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. This plan must be provided by the doctor. In one-off circumstances, the service will not make an exception to this rule and will require the parents to complete the procedure for the educators to administer the medication.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Children (Education and Care Services National Law Application) Act 2010
- Privacy Act 1988

Endorsed Date:	October 2018
Review Date:	October 2019

D-21 HIV/AIDS/Hep B and C

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 5.1	Respectful and equitable relationships are maintained with each child.
QA. 5.1.1	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
QA. 7.1	Governance supports the operation of a quality service

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 136	First aid qualifications
Reg. 145	Staff record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children feel safe, secure and supported
LO. 3	Children have a strong sense of wellbeing
	Children become strong in their social and emotional wellbeing

Policy Statement

We believe all children have a right to be cared for and we aim to provide a safe and secure environment for all children in our care. We will not discriminate against any child or families' right to attain care. We believe that HIV/AIDS and Hepatitis B and C are best dealt with by preventative measures and aim to eliminate the risk of spreading disease to ensure the safety of all children and educators. Strict confidentiality procedures will be maintained at all times.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy C-3: Educators Orientation and Induction

- MELROSE PARK OSHC Policy C-8: Disciplinary Action
- MELROSE PARK OSHC Policy C-13: Interactions with Children
- MELROSE PARK OSHC Policy D-1: Dealing with Medical Conditions
- MELROSE PARK OSHC Policy D-2: Hygiene
- MELROSE PARK OSHC Policy D-10: First Aid
- MELROSE PARK OSHC Policy D-13: Illness and Infectious Diseases
- MELROSE PARK OSHC Policy D-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy D-20: Medication

Procedure

Under the Federal Disability Act and the Equal Opportunity Act, no discrimination will take place based on a child's/parent's/educator's HIV/AIDS/Hep B or C status.

Discrimination relating to access to the Centre is against the law. A child with HIV/AIDS/Hep B or C has the right to obtain a position in the Centre should a position be available, just as an educator has the right to equal opportunity of employment.

A child with HIV/AIDS/Hep B or C shall be treated the same as any other child, as HIV/AIDS/Hep B or C is not transmitted through casual contact.

Where educators are informed of a child, parent or other educator who has HIV/AIDS/Hep B or C:

- This information will remain confidential at all times (see Privacy and Confidentiality Policy). Breach of this confidentiality will be appropriately addressed under the Disciplinary Action Policy.
- Educators will ensure proper care of all children is maintained.
- No conversation is to be undertaken in the hearing of any unauthorised adults, or around the children.
- Proper, safe and hygienic practices will be followed at all times (see Hygiene policy).
- No person will ever be denied the right to First Aid treatment.

All children will be considered as infectious when administering first aid. All educators dealing with open sores, cuts and bodily fluids with any child or adult shall wear disposable gloves and maintain appropriate hygiene. Educators with cuts, open wounds or skin disease such as dermatitis will cover their wounds and wear disposable gloves. Gloves will be properly and safely discarded and educators will wash their hands after use.

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 warm soapy water.

Any blood or bodily fluid spills will be cleaned up immediately using gloves and the area further cleaned with warm water and detergent. Large blood spills should be further wiped with a diluted bleach solution, made up immediately prior to use. Educators must utilise gloves when using the bleach solution. After the clean-up of all spills, educators must remove gloves, and place in a sealed plastic bag along with any cloths used in the cleaning process, and dispose. Following the disposal of such items, educators should thoroughly wash their hands immediately.

Any soiled clothing shall be handled using disposable gloves. Clothing will be placed and sealed in a plastic bag for parents to take home.

If CPR is to be performed disposable sterile mouth masks will be used. If unavailable, educators will perform CPR using compressions only. The person in charge of the First Aid Kit will ensure that a child sized mouth mask is available at all times.

Any exposure should be reported to the Centre Director and Management to ensure proper follow up procedures occur. Educators must report any new cases of HIV/AIDS/Hep B and C to the NSW Public Health Unit.

NSW Health Public Health Unit – 1300 066 055

Educators and parents will be encouraged to participate in HIV/AIDS/Hep B or C education. This can take the form of educators training, educational seminars, brochures, etc. Funds will be allocated for this in the educators training budget.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- United Nations Rights of the Child
- NSW Department of Health - <http://www.health.nsw.gov.au/>
- Federal Disability Discrimination Act 1992
- Equal Opportunity Act 2010
- Occupational Health and Safety Act 2000
- Children (Education and Care Services National Law Application) Act 2010

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D-22 Child Protection

NQS

QA. 2.2	Each child's health and physical activity is promoted and supported
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.3	Management, educators and staff are aware of their roles and responsibilities to identify and respond to every child at risk of abuse or neglect.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 4.1.1	The organisation of educators across the service supports children's learning and development.
QA. 5.1.2	The dignity and rights of every child are maintained.
QA. 7.1.3	The induction of educators, co-ordinators and staff members, including relief staff, is comprehensive.
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 84	Awareness of child protection law
Reg. 155	Interactions with children
Reg. 168	Education and care service must have policies and procedures
Reg. 176	Time to notify certain information to Regulatory Authority
Reg. 181	Confidentiality of records kept by approved provider
Reg. 273	Course in child protection
Reg. 310	Educator to child ratios
Reg. 358	Working with children check to be read

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
	Children learn to interact in relation to others with care, empathy and respect
LO. 3	Children become strong in their social and emotional wellbeing

Policy Statement

We are committed to developing a safe and secure environment, which encourages children to interact positively with respect for others. 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. Educators and Management have a legal responsibility as mandatory reporters to take action to protect children whom they suspect may be suffering from abuse, violence or exploitation. Our Centre will carry out responsibilities of Mandatory Reporting as indicated under legislation. This responsibility involves following the procedures as outlined by Community Services and the NSW Commission for Children and Young People.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-15: Role of Management Committee
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy C-1: Educators Recruitment and Selection
- MELROSE PARK OSHC Policy C-3: Educators Orientation and Induction
- MELROSE PARK OSHC Policy C-10: Volunteers/students/visitors
- MELROSE PARK OSHC Policy C-11: Educators Child Ratios
- MELROSE PARK OSHC Policy C-12: Communication

Procedure

All educators, both paid and unpaid, volunteers and students are required to complete a “Working with Children Check” prior to being appointed, and this must be verified by the Nominated supervisor prior to this person being in contact with children.

Supervision

Educators must be aware of children and the environment at all times. Adequate supervision is an important part of providing a safe and protective environment. The Centre will assess the level of supervision required in all situations, accounting for the development of each child, the difficulty of the activity, and the potential for an incident to occur which may place children at risk. Appropriate educator to child ratios will be maintained at all times.

Students, volunteers and visitors to the Centre will not be left unsupervised with the children.

Children will only be released from the Centre to persons who are authorised to collect them. Procedures for signing children in and out of the Centre will be closely monitored by educators to ensure the above (See Dropping off and Picking Up policy).

Mandatory Reporting

A Mandatory Reporter is someone who is required by law to make a report to Community Services if they have current concerns about the safety, welfare or wellbeing of a child (s23 NSW Children and Young Persons Care and Protection Act 1998). A child is defined as a person under 16 years of age. Mandatory Reporters are not required to report on unborn children, or those 16-17 years of age, but are encouraged to do so. Penalties apply for failing to make a report.

In OSHC services, Mandatory Reporters are:

- Educators who deliver services to children
- Management, either paid or voluntary, whose duties include direct responsibility or direct supervision for the provision of these services
(From information supplied by Department of Community Services Helpline Information Kit 2001)

Every educator or member of the Management Committee has a legal and ethical obligation to act to protect any child who is at significant risk of harm. Educators will undergo training in relation to child protection and notification as part of the training budget.

Areas of concern include:

- Physical abuse
- Neglect
- Sexual abuse
- Domestic Violence
- Psychological harm
- Relinquishing care
- Parent / carer domestic violence
- Parent / carer substance abuse
- Parent / carer mental health
- Prenatal Report

Any educator who forms a belief on reasonable grounds that a child is at significant risk of harm should immediately complete an incident / injury / trauma and illness report form, ensuring objectivity, and following service procedure and policy on Privacy and Confidentiality. The educator must then discuss these concerns with the Nominated Supervisor to ascertain if there is any further information the educator is unaware of. Any such conversations should be held in a confidential location, and Privacy and Confidentiality Procedures should be discussed prior to and at the end of

every Child Protection related conversation. Any notes from the meeting shall be stored in accordance with the centre's Privacy and Confidentiality Policy.

To confirm if notification is required, the Nominated Supervisor, in conjunction with the educator will use the on-line Mandatory Reporter Guide which is available at:

www.keepthemsafe.nsw.gov.au to ascertain if the report shows the child at significant risk of harm.

Accompanying each question are definitions and examples that assist Mandatory Reporters to determine whether they should:

- Make a report to the Child Protection Helpline
- Consult their Child Wellbeing Unit
- Make a referral to community or government support services
- Document and continue their relationship with the child or young person or their family

Where there is significant risk of harm, educators will be directed by the online Mandatory Reporter Guide to contact the Child Protection Helpline directly. The report page from the online tool should be printed, sealed in an envelope and placed in the child / family file regardless of the outcome. The report to the helpline can either be completed by the Nominated Supervisor or the educator, but where the Nominated Supervisor does not make a report, the educator is legally required to do so. These numbers are available 24 hours, 7 days a week:

- **133 627** (13 DOCS) Mandatory Reporters only
- **132 111** for members of the general public to report the suspected abuse or neglect of a child or young person

When phoning the Helpline, educators should have gathered as much information as possible regards the child, family, outcomes of the online Mandatory Reporter Guideline tool, as well as their own details. Specialised Child Protection staff will answer all calls. Educators should remember that it is not their responsibility to prove the abuse, just to have reasonable suspicion that abuse or neglect has occurred.

Should the Mandatory Reporting Guidance Tool be inconclusive, the Nominated Supervisor / Educator should contact the Helpline for advice.

Where the Mandatory Reporting Guidance Tool advises the Nominated Supervisor / Educator to "document and continue the relationship", the service should continue to provide support and services, as well as offer referrals for the child and family.

Educators will leave the situation in the hands of the designated Departmental Officers once a report has been made. They should not discuss the issue with the parents or try to undertake any further investigation into the situation. Where further information is observed etc., the person who originally made the report should contact Community Services to advise. If no new information comes to light, the Educator need not contact Community Services again.

Educators will not question the child or parents prior to any discussions with the departmental Helpline officers.

Should the situation arise where the child is considered in immediate danger and the child is taken into the care of Community Services, educators will follow the advice of the Departmental Officers.

Educators should be aware that they are protected as a notifier under The Commission for Children and Young Persons (Care and Protection) Act (1998).

Information published on Mandatory Reporting by Community Services will be made available in a 'educators only' area of the centre. These documents will be kept up to date and referred to regularly.

It is the responsibility of Management and the Centre Director to:

- Ensure all educators are aware of their responsibilities as Mandatory Reporters
- Ensure appropriate phone numbers and literature is made available to educators
- Ensure educators are aware of current legislation in protecting children and young people

Where a Child Protection related complaint is made about an educator, or someone in the Centre (defined as 'reportable conduct'):

- A report must be made to the NSW Ombudsman within 30 days (www.nswombudsman.nsw.gov.au).
- The person making the report should follow the advice of the Departmental Officers
- Management committee will follow this advice
- The matter will be treated with strict confidentiality

Where the allegation is made to an educator or a member of Management, the facts as stated will be recorded in writing on an Incident Report including dates, times, name of person involved, name of person making the allegation and the person making the report.

This report should be kept on record and treated as strictly confidential. If the Centre Director or person in charge is suspected, the President of the Management committee should be informed.

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 investigated further or resolved.

Support should be given to people making an allegation and / or persons who have been suspected. This support can be given in the form of counselling or referral to an appropriate agency.

Responding to a child's disclosure

If a child discloses allegations of abuse, it is vital that the educator involved is ready to listen attentively and remain calm and supportive. Finding a quiet, private place to talk and allowing the child to tell their story in their own words is important. Educators should avoid asking leading questions or probing for information that the child is not ready to disclose. It is important that the child is reassured that they have done the right thing in telling someone what has happened and that they have a right to feel safe. The educator should assure the child that they believe them and will try and help.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Children (Education and Care Services National Law Application) Act 2010
- Children and Young Persons (Care and Protection) Act (1998)
- Privacy Act 1988
- Working with Children Check NSW
- NSW Mandatory Reporting Guide, May 2013
- NSW Child Protection Interagency Guidelines (2006)
- Keep Them Safe – Information Session / overview participants manual 2009 / 2010
- Legislation Amendment (Wood Inquiry Recommendations) Act 2009 No 13
- Putting Children First (NCAC) – ‘Child Protection’
- Department of Community Services Helpline Information Kit 2001
- Commission for Children and Young People Act 1998
- Child Protection (Prohibited Employment) Act 1998
- Ombudsmen Act 1974 (with relevant Child Protection Amendments)

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Review Date:	October 2019

D-23 Child Management / Behaviour Guidance

NQS

QA. 1.1.1	Curriculum decision making contributes to each child's learning and development outcomes in relation to their identity, connection with community, wellbeing, confidence as learners and effectiveness as communicators.
QA. 1.1.3	All aspects of the program, including routines, are organised in ways that maximise opportunities for each child's learning.
QA. 1.2.3	Each child's agency is promoted, enabling them to make choices and decisions that influence events and their world.
QA. 2.2	Each child's health and physical activity is promoted and supported
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 4.2	Management, educators and staff are collaborative, respectful and ethical.
QA. 4.2.2	Professional standards guide practice, interactions and relationships.
QA. 4.2.1	Management, educators and staff work with mutual respect and collaboratively, and challenge and learn from each other, recognising each other's strengths and skills.
QA. 5.1	Respectful and equitable relationships are maintained with each child.
QA. 5.1.1	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included.
QA. 5.2	Each child is supported to build and maintain sensitive and responsive relationships.
QA. 5.2.1	Children are supported to collaborate, learn from and help each other.
QA. 5.2.2	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
QA. 5.1.2	The dignity and rights of every child are maintained.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions.
QA. 7.2	Effective leadership builds and promotes a positive organisational culture and professional learning community.
QA. 7.1.1	A statement of philosophy guides all aspects of the service's operations.
QA. 7.1	Governance supports the operation of a quality service

National Regulations

Reg. 155	Interactions with children
Reg. 156	Relationships in groups
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available

My Time, Our Place

LO. 1	Children have a strong sense of identity
	Children feel safe, secure, and supported
	Children develop their autonomy, inter-dependence, resilience and sense of agency
	Children learn to interact in relation to others with care, empathy and respect
LO. 2	Children develop a sense of belonging to groups and communities and an understanding of the reciprocal rights and responsibilities necessary for active community participation
	Children respond to diversity with respect
	Children become aware of fairness
LO. 3	Children have a strong sense of wellbeing
	Children become strong in their social and emotional wellbeing
LO. 4	Children use a range of skills and processes such as problem solving, inquiry, experimentation, hypothesising, researching and investigating
	Children transfer and adapt what they have learned from one context to another
LO. 5	Children are effective communicators

Policy Statement

We aim to provide an environment where all parents, educators and children feel safe, cared for and relaxed and which encourages co-operation and positive interactions between all persons. Rules will be clearly established based on safety, respect for others, order, and cleanliness, which helps create a caring environment. Positive behaviour will be encouraged and self discipline skills developed through positive example and direction.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-23: Code of Conduct
- MELROSE PARK OSHC Policy C-12: Communication
- MELROSE PARK OSHC Policy C-13: Interactions with Children
- MELROSE PARK OSHC Policy D-24: Exclusion for Unacceptable Behaviour
- MELROSE PARK OSHC Policy D-25: Harassment, Bullying and Violence
- MELROSE PARK OSHC Policy D-30: Supervision
- MELROSE PARK OSHC Policy E-3: Gender Equity and Inclusion
- MELROSE PARK OSHC Policy E-4: Cultural Relevance / Anti-Bias

Procedure

Basic agreements and clear guidelines of acceptable behaviour will be established through consultation with educators and children.

Rules will encourage respect for the rights of others and help create a caring environment and be based on safety, order, and cleanliness. Children and parents will have the opportunity to be involved in developing rules and our Centre's Code of Behaviour.

All rules will be clearly expressed in a positive way and reinforced consistently.

Rules will be displayed within the Centre and children, parents and educators will be reminded of the rules regularly.

Children will be made aware of the consequences which will occur when rules are broken. All consequences will be relevant to the situation and not demeaning to the child. No child will ever be subject to, or threatened with, corporal punishment. No child will ever have food, or other basic needs, withdrawn as a form of punishment.

Positive behaviour will be encouraged by role modeling, diverting children to more appropriate activities, showing appreciation for appropriate behaviour and building on each child's strengths and achievements.

Children are to be given opportunities which enable them to be responsible for their own behaviour through the development of problem solving skills. Children will be encouraged to seek support when necessary.

Educators will follow up all behavioural issues by discussing the situation with the child and working together on better solutions for future behaviour.

Educators, together with the school and parents, should work in partnership in promoting a consistent and positive approach to behaviour management. Educators and parents will raise concerns as they arise and discuss ways of working together to assist children in making changes to inappropriate behaviour.

At any stage parents may be notified if a pattern of continual misbehaviour is developing.

Educators will have access to training and support in positive approaches to behaviour management. This will be made available as part of the training budget.

To assist in maintaining a positive, safe and caring environment, educators and children will have the following responsibilities.

Children will:

- accept and value every child and adult regardless of race, cultural background religion, sex or ability

- treat each other with respect, courtesy and understanding
- be encouraged to maintain positive communication and relationships between educators, children and other adults
- ensure that appropriate language and behaviour is maintained at all times
- be aware of, and fulfil, their responsibilities as an active part of the Centre community
- settle their differences in a peaceful manner, using communication skills to resolve difficulties and never using violence against another person or child
- develop self-discipline skills through positive examples and direction
- develop an understanding that behaviour results from choice made by the individual and that all behaviour has consequences
- not leave the service unless they are in the care of a parent or guardian

Educators will:

- accept and value every child and adult regardless of race, cultural background religion, sex or ability
- treat all children, parents and each other with respect, courtesy and understanding
- be tolerant of all members of the school community
- maintain positive communication with the children at all times
- communicate at the child's level in a friendly positive and courteous manner and ensure they are understood
- ensure the dignity and rights of each child are maintained
- use voice intonations, facial expressions, and explanations as methods of discipline
- avoid shouting at children
- encourage children to take responsibility for their actions by:
 - initiating conversations with all children, and developing an understanding of the child and their interests
 - forming friendly and warm relationships with the children in their care and being supportive and encouraging
 - ensuring that expectations relating to the children's behaviour is explicit and clear and consequences are consistently applied
 - acting as a role model for acceptable behaviour

- encouraging and rewarding acceptable behaviour
- focusing on the behaviour, not the child
- giving praise and positive feedback to the children as often as possible
- providing an environment which will foster the child's self-esteem
- helping children develop self-discipline skills through positive examples and direction
- introducing older children to simple conflict resolution skills
- helping children to appreciate and care for each other and their surroundings
- ensuring that appropriate language is used at all times
- never singling out any children or making them feel inadequate at any time
- avoiding threatening or verbally abusing the children in any way

Where a child demonstrates consistent unacceptable behaviour, steps will be taken to develop a behaviour management plan (see D-24 Exclusion for Unacceptable Behaviour Policy). If unacceptable behaviour continues, a child may be excluded from the Centre on a temporary or permanent basis. This will be decided by the Management Committee in conjunction with the Nominated Supervisor and where appropriate, the School Principal.

Rewarding positive behaviour

The following positive behaviours will result in a child receiving an OSHC success card:

- Including others in play
- Sharing toys and resources
- Turn taking/good sportsmanship
- Packing away toys/activities without being asked
- Showing kindness to others
- Helping staff

Once a child receives 10 OSHC success cards they will receive a prize.

Melrose Park OSHC behaviour management policy

Step 1	Verbal reminder	<p>Identify the rules not followed</p> <p>Provide and discuss with the child alternative choices</p> <p>Use positive redirection</p>
Step 2	Verbal reminder/ official warning to child	<p>Reinforce the value of positive behaviour.</p> <p>Identify the rules not followed and expected behaviour.</p> <p>Explain the consequence of repeated unacceptable behaviour e.g. removal from activity/area or a “reflection time”.</p>
Step 3	Reflection time	<p>The child will be removed from the activity/area or given a reflection time.</p> <p>The child will be offered the use of the cool down box.</p> <p>The child is encouraged to think about their actions and how they may have affected others.</p> <p>The children will be encouraged to ask themselves:</p> <p>What happened?</p> <p>What were they thinking/feeling at the time?</p> <p>What have you thought about since?</p> <p>Who has been affected by what you did?</p> <p>What do you need to do to make things right?</p> <p>What are the OSHC rules/guidelines?</p>
Step 4	Behaviour management report	<p>A behaviour report will be completed by a staff member and signed by their parent on pick up.</p> <p>The parent will be given a signed copy of the report and both parents notified by email.</p> <p>The parent will have the opportunity to discuss the child’s behaviour, any external factors affecting the child’s behaviour and ways to manage the child’s behaviour in the future.</p>
Step 5	Individual behaviour management plan	<p>A child with repeat behaviour reports will have a behaviour management plan created in collaboration with the parents.</p>
Step 6	Exclusion	<p>Children who receive three behaviour reports in a month will receive a one-day exclusion from OSHC at the director’s discretion in consultation with the Principal and President of the OSHC committee.</p>

THE OSCH DIRECTOR RESERVES THE RIGHT TO MISS ANY STEP IF THE BEHAVIOUR IS SERIOUS AND CONSIDERED TO BE ENDANGERING THE SAFETY AND WELL BEING OF THE OSHC CHILDREN/STAFF/GUESTS.

Melrose Park OSHC Behaviour Management report

Child's name: _____

Date: _____ Time: _____

Inappropriate behaviour recorded: Tick box and circle behaviour.

Bullying- a repeated verbal, physical, social or psychological behaviour that is harmful and involves the misuse of power by an individual or group towards one or more persons. Cyber bullying refers to bullying through information and communication technologies. Bullying can involve humiliation, domination, intimidation, victimisation and all forms of harassment including that based on sex, race, disability, homosexuality or transgender.

Physical violence/ behaviour- e.g. hitting, biting, kicking, pushing, pinching, scratching, spitting, pulling hair or other.

Unsafe play- e.g. out of bounds, inappropriate use of equipment, deliberate use of equipment to endanger, actions potentially harmful to others (e.g. tackle instead of tipping)

Refusal to comply with Staff directions – e.g. Disobedience/refusal to listen (e.g. after clarification of expectations, the child continues to disobey instructions), disrespectful gestures, refusal to listen, leaving the care environment.

Inappropriate Language – e.g. comments that are racial, swearing, malice, and inappropriate sexual references or gestures

Damaged OOSH equipment

Brief description of incident:

Outcome from this behaviour:

Endangered safety of him/herself

Endangered the safety or wellbeing of others

Physically hurt another child/staff member/parent/person

Warning number _____ of maximum 3 warnings

Or

A critical incident has occurred and it is deemed unsafe for your child to return to the service (one day exclusion).

Director signature: _____ Date: _____

Parent/guardian signature: _____ Date: _____

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Children (Education and Care Services National Law Application) Act 2010
- Children's and Young Persons (Care and Protection) Act 1998
- Voluntary Code of Practice, Section 12 (Exclusion for unacceptable behaviour)
- United Nations Convention on the Rights of the Child
- Network of Community Activities Factsheet – 'Excluding Children'
- Play Rights and Responsibilities of children, educators and parents for a co-operative OOSH environment (Network)

Endorsed Date:	July 2019
Review Date:	July 2020

D-24 Exclusion for Unacceptable Behaviour

NQS

QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented
QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 4.1	Staffing arrangements enhance children’s learning and development
QA. 5.2.2	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.2.2	Effective partnerships support children’s access, inclusion and participation in the program
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

National Regulations

Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 155	Interactions with children
Reg. 156	Relationships in groups
Reg. 168	Education and care service must have policies and procedures
Reg. 176	Time to notify certain information to Regulatory Authority

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
	Children learn to interact in relation to others with care, empathy and respect
LO. 2	Children develop a sense of belonging to groups and communities and an understanding of the reciprocal rights and responsibilities necessary for active community participation
	Children respond to diversity with respect
	Children become aware of fairness
LO. 3	Children have a strong sense of wellbeing
LO. 5	Children are effective communicators

Policy Statement

We aim to provide an environment which promotes the safety and wellbeing of all children in our care. Where a child displays consistent unacceptable behaviour, or presents a threat to others, reasonable steps will be taken to ensure the safety and wellbeing of others within the Centre. The Management Committee and Nominated Supervisor will work together with parents to establish and implement a Behaviour Management Plan. If unacceptable behaviour continues, temporary or long term exclusion may be enforced at the discretion of the Management Committee.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-11: Maintenance of Records
- MELROSE PARK OSHC Policy A-15: Role of the Management Committee
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy A-23: Code of Conduct
- MELROSE PARK OSHC Policy C-12: Communication
- MELROSE PARK OSHC Policy C-13: Interactions with Children
- MELROSE PARK OSHC Policy D-23: Child Management / Behaviour Guidance
- MELROSE PARK OSHC Policy D-25: Harassment, Bullying and Violence
- MELROSE PARK OSHC Policy D-30: Supervision

Procedure

Consistent Unacceptable Behaviour

Where a child demonstrates consistent unacceptable behaviour, 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
- review the consequences to ensure they are not inadvertently encouraging the behaviour
- identify and assess possible causes for the behaviour
- discuss the issue with the parents and the child followed by an email confirming this information.
- record all incidents, indicating what happened before and after the incident, time, date and who was involved

- develop a plan of action involving behaviour management in discussion with all educators, parents, school, and other professionals, as required
- record the plan of action, ensuring all are aware of how to implement the plan and develop an evaluation system and review date

Exclusion for Unacceptable Behaviour

Where the unacceptable behaviour is violent, threatening or injures other children and/or educators, or threatens the safety of the child (leaves the school grounds or supervised areas) the “Exclusion for Unacceptable Behaviour” procedure may be implemented immediately.

If a child physically hurts other children or adults, educators will:

- remove the child from the situation
- ensure the hurt person is attended to and given proper attention and care
- record the incident, indicating date, time, victim, injury, offender and attendant
- ensure that the parents of all children involved are notified of the incident, as soon as possible, but no later than 24hours following the incident (such incidents will be immediately referred to the Management Committee).

The Nominated supervisor will contact the principal and committee president or committee member should the president be unavailable to implement a one-day exclusion, the child’s next booking day. The decision of the director, principal and committee president will be emailed to the committee and will be implemented following the approval of two committee members. The parent will be contacted to collect their child themselves or by an authorised nominee from the centre as soon as possible. The parent/s will be notified of the one-day exclusion via phone and email and given a signed copy of the behaviour report. The child’s bookings will be marked as Absent no charge for the duration of the exclusion.

Should the incident be deemed serious enough to warrant a longer suspension the committee will be contacted and a decision made within the child’s one day suspension.

Repeated incidents of physically injuring or threatening injury to other children and/or adults or absconding at the Centre may result in a temporary suspension of a child’s enrolment.

Should unacceptable behaviour continue and the above strategies are not working, the Nominated Supervisor will inform the Management Committee and the School Principal. Management, in consultation with the Nominated Supervisor and educators, will discuss the issue.

Where, in the interest of the child and other children at the Centre, exclusion is seen as the only step to be taken, this will be decided by the Management Committee. Exclusion may be a temporary arrangement whilst strategies for dealing with the behaviour are discussed with all involved parties.

The Management Committee reserve the right, following serious behaviour incidents, to temporarily exclude the child, effective immediately. Where long term exclusion is decided upon by the Management Committee, it will be considered only after:

- adequate support and counselling
- parents have been notified and given the opportunity to discuss their child's behaviour and have input into a behaviour management plan for their child
- parents have been referred to other agencies, where necessary
- careful consideration has been given to the problem by educators and Management
- clear procedures have been established for accepting the child back into the Centre

Management Committee reserve the right to refuse re-enrolment of a child if the situation requires such an action. Consideration for re-enrolment will be at the discretion of the Nominated Supervisor and Management and conditional on development and compliance with the devised behaviour management plan.

Strategies outlined in Network's 'Play – Rights and Responsibilities' will be used as a guide or point of reference.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Privacy Act 1988
- Children's and Young Persons (Care and Protection) Act 1998
- Voluntary Code of Practice, Section 12 (Exclusion for unacceptable behaviour)
- United Nations Convention on the Rights of the Child
- Play Rights and Responsibilities of children, educators and parents for a co-operative OOSH environment (Network)
- Network of Community Activities Factsheet – 'Excluding Children'

Endorsed Date:	October 2018
Review Date:	October 2019

D-25 Harassment, Bullying and Violence

NQS

QA. 2.2	Each child's health and physical activity is promoted and supported
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 4.2	Management, educators and staff are collaborative, respectful and ethical.
QA. 5.2	Each child is supported to build and maintain sensitive and responsive relationships.
QA. 5.2.2	Each child is supported to regulate their own behaviour, respond appropriately to the behaviour of others and communicate effectively to resolve conflicts.
QA. 5.1.2	The dignity and rights of every child are maintained.
QA. 6.2.2	Effective partnerships support children's access, inclusion and participation in the program
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 155	Interactions with children
Reg. 156	Relationships in groups
Reg. 168	Education and care service must have policies and procedures
Reg. 176	Time to notify certain information to Regulatory Authority
Reg. 181	Confidentiality of records kept by approved provider

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
	Children learn to interact in relation to others with care, empathy and respect
LO. 2	Children develop a sense of belonging to groups and communities and an understanding of the reciprocal rights and responsibilities necessary for active community participation
	Children respond to diversity with respect
	Children become aware of fairness
LO. 3	Children have a strong sense of wellbeing
LO. 5	Children are effective communicators

Policy Statement

We recognise that all educators, children, parents and visitors have a right to feel safe and comfortable while at the Centre. We aim to provide an environment that is free from physical, emotional, psychological or sexual harassment, bullying or violence by ensuring all educators and families are aware of the Centre's philosophy, complaints and grievance procedures and that all children are made aware of the Centre rules.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-14: Complaints
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy C-3: Educators Orientation and Induction
- MELROSE PARK OSHC Policy C-5: Educators Professionalism
- MELROSE PARK OSHC Policy C-7: Grievance Procedures
- MELROSE PARK OSHC Policy C-8: Disciplinary Action
- MELROSE PARK OSHC Policy C-12: Communication
- MELROSE PARK OSHC Policy C-13: Interactions with Children
- MELROSE PARK OSHC Policy D-9: Emergency Procedures
- MELROSE PARK OSHC Policy D-22: Child Protection
- MELROSE PARK OSHC Policy D-23: Child Management / Behaviour Guidance
- MELROSE PARK OSHC Policy D-24: Exclusion for Unacceptable Behaviour
- MELROSE PARK OSHC Policy D-30: Supervision

Procedure

Harassment, bullying and/or violence will not be tolerated under any circumstances at Melrose Park OSHC. Bullying is identified as a range of anti-social behaviours which are different from one-off events of aggression or conflict between individuals or groups.

Harassment and bullying can take many forms:

- *Physical* - hitting, punching, pushing, any kind of sexual interference; threatening to harm people or their property; hiding, damaging or destroying the property of others
- *Verbal* - name-calling, putting others down, using words to threaten or tease, ridiculing; making derogatory comments about a person's culture, background, customs, gender, sexuality or beliefs; spreading rumours about people or their families and friends; mocking or denigrating another person's abilities and talents (including via e-mail and text)
- *Gesture* - looks, shrugs or other gestures which are associated with threats or which are offensive
- *Sexual* - sexual harassment in this context, refers to " *deliberate sexual comments and gestures, or any other conduct of a sexual nature which is perceived to be embarrassing, demeaning or compromising*"
- *Cyber Bullying* – using text messages or social media to harass or with the intention of harming or victimising others

Melrose Park OSHC adopts the Melrose Park Public School's philosophy against bullying.

Prevention and Response Strategies

Educators will teach children strategies to challenge bullying behaviour through appropriate and age-specific learning experiences. Strategies could include:

- using assertive behaviour – saying "No" or "I don't like it when you do that"
- knowing when to walk away from teasing
- learning to read other people's feelings, body language, or expressions
- developing appropriate conflict resolution skills

The Centre will work with children and families to promote socially responsive environments in which empathy and respect for others, taking responsibility for your actions and understanding how your actions affect others are modelled, encouraged and taught. Children will be taught about their right to feel safe and the importance of telling others when they feel unsafe.

Effective supervision will be maintained in all play areas and all aspects of the program.

When involving children:

Basic agreements and clear guidelines of acceptable behaviour will be established through consultation with educators and children (see D-23 Child Management / Behaviour Guidance). Not all aspects of bullying will attract consequences and restrictions as below as often the incidents can be handled and resolved appropriately with assistance of the educators at the Centre.

If a child is seen to be demonstrating any form of harassment or bullying, educators will:

- talk to the child individually about the incident, ensuring the child understands that anti-social behaviour is not tolerated at the Centre
- speak to other children involved in the incident
- complete an incident report including all sides of the story, indicating date, time, victim, offender and attendant (child names shall remain confidential)
- ensure that the parents of all the children involved are notified of the incident, as soon as is practicable, but no later than 24hrs following the incident

If deemed necessary, a meeting with the Nominated Supervisor will be scheduled to discuss a behaviour management plan for the child and the steps outlined in the D-24 Exclusion for Unacceptable Behaviour will be followed. If the behaviour continues, the Management Committee will be informed and a decision will be made as to whether the child should be excluded from the Centre for a period of time.

When involving educators:

Educators will be presented with an Educators Handbook and code of conduct upon employment. Any educators seen to be demonstrating harassment, bullying or violence of any kind will be referred to the Nominated Supervisor and/or Management Committee. The steps outlined in C-8 Disciplinary Action Policy will be followed.

The privacy and confidentiality of all involved in an incident involving harassment, bullying, or violence, will be maintained as per the Centre's policy on Privacy and Confidentiality.

Harassment and threats of violence from unknown persons

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

- Calmly and politely inform them of Policy and ask them to leave the Centre or the vicinity of the children
- 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 on duty is unable to make the call, another educator member should be directed to do so
- Where possible, educators will calmly move the children away from the person and observe the difficult situation, acting as a witness
- No educators are to try to physically remove the unwelcome person, but try to remain calm and keep the person as far as possible from the group while waiting for the Police

The steps outlined in D-9 Emergency Procedures will be followed.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Privacy Act 1988
- Putting Children First (NCAC) Factsheet – ‘Bullying and Childcare’
- Putting Children First (NCAC) Article – ‘Managing bullying in child care’
- Children's and Young Persons (Care and Protection) Act 1998
- United Nations Convention on the Rights of the Child
- NSW AntiDiscrimination Act 1977

Endorsed Date:	October 2018
Review Date:	October 2019

D-26 Security

NQS

QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 3.1	The design of the facilities is appropriate for the operation of a service.
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 103	Premises, furniture and equipment to be safe, clean and in good repair
Reg. 168	Education and care service must have policies and procedures
Reg. 181	Confidentiality of records kept by approved provider
Reg. 183	Storage of records and other documents

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We will ensure the proper security of the building and staff by implementing appropriate measures regarding entry and access to the OSHC premises.

Related Policies

- MELROSE PARK OSHC Policy A-15: Role of Management Committee
- MELROSE PARK OSHC Policy B-1: Facility Management
- MELROSE PARK OSHC Policy B-3: Storage

Procedure

Only approved educators and Management Committee members will be given a key to access the building and equipment areas pending approval from the School Principal.

A key register will be maintained which 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.

Extra keys will only be cut after agreement by the Management Committee, who will ensure agreement of the Principal. A record will be made of where all keys are allocated. All key transfers between staff are to be recorded. Keys are to be labelled with a contact phone number, usually the Nominated Supervisor's mobile phone number.

A safe or lockbox will be provided to keep all important documents secure (see B-3 Storage Policy). Access to the safe or lockbox will only be permitted by approved staff and Management Committee members. Staff will not open the safe/lockbox in clear view of anyone.

Educators will ensure that the building is left in a secure manner before leaving, including the setting of any alarms.

Educators will ensure that 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 Management Committee as soon as practicable if there has been a break in to the Centre of any kind.

Educators will remain at the Centre until the police arrive or inform them of what to do.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Work Health and Safety Act 2011
- Privacy Act 1988

Endorsed Date:	October 2018
Review Date:	October 2019

D-27 Custody Agreements / Court Orders

NQS

QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions
QA. 7.1.3	The induction of educators, co-ordinators and staff members, including relief staff, is comprehensive.
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 99	Children leaving the education and care service premises
Reg. 157	Access for parents
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 168	Education and care service must have policies and procedures
Reg. 177	Prescribed enrolment and other documents to be kept by approved provider
Reg. 181	Confidentiality of records kept by approved provider
Reg. 183	Storage of records and other documents

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We recognise the diversity of all families and their situations and that the welfare and well-being of all children in our care is paramount. If a child at the Centre is subject to any access order or agreement, the service must have a copy on record plus any additional alteration registered by the court.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-13: Participation and Access
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy C-3: Educators Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-22: Child Protection

Procedure

Parents / guardians must ensure that any custody agreements or court orders relating to their child are provided to the Centre upon enrolment (see A-4 Enrolment Policy). If the order is only put in place after the child has already been attending, then it must be provided to the Nominated Supervisor as soon as practicable. The centre cannot stop a parent from having contact with or collecting a child in their care without sighting, and having a copy of, the appropriate court order.

The Nominated Supervisor will ensure all educators are aware of orders or agreements in place at the time of employment or, as the orders are put in place.

If a parent is restricted by law from having any contact with or being authorised to collect their child, the Centre is legally bound to comply. Therefore, if a non-custodial parent arrives at the Centre, educators will be required to follow the steps outlined in the Participation and Access Policy, thus attempting to prevent the parent from taking the child.

Educators will remember their responsibility to all children in their care if such a situation arises. In instances where the non-custodial parent arrives and takes the child from the centre, the matter will be referred to the Police immediately.

Educators will not pass on any information in relation to the child to non-custodial parents if an order or agreement has been sighted / received.

A copy of the order or agreement is to be kept on file with the child's enrolment form and stored in a secure location, as per Regulations 160 and 183 (see A-17 Privacy and Confidentiality Policy).

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard

- My Time, Our Place Framework for School Age Care in Australia
- Family Law Act 1975
- Children (Education and Care Services National Law Application) Act 2010
- Children's and Young Persons (Care and Protection) Act 1998
- United Nations Convention on the Rights of the Child

Endorsed Date:	October 2018
Review Date:	October 2019

D-28 Workplace Health and Safety

NQS

QA. 2.1	Each child's health and physical activity is promoted and supported
QA. 2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
QA. 3.1.1	Outdoor and indoor spaces, buildings, fixtures and fittings are suitable for their purpose, including supporting the access of every child.
QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 4.1	Staffing arrangements enhance children's learning and development
QA. 7.1	Governance supports the operation of a quality service
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 103	Premises, furniture and equipment to be safe, clean and in good repair
Reg. 105	Furniture, materials and equipment
Reg. 106	Laundry and hygiene facilities
Reg. 109	Toilet and hygiene facilities
Reg. 115	Premises designed to facilitate supervision
Reg. 168	Education and care service must have policies and procedures
Reg. 175	Prescribed information to be notified to Regulatory Authority

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
LO. 3	Children take increasing responsibility for their own health and physical wellbeing
LO. 5	Children are effective communicators

Policy Statement

We are committed to the workplace health and safety of our educators and children at the Centre. The Centre is to be maintained in a safe condition and all substances at the Centre are to be used safely. We will continue to provide safe work systems and work environments through cooperative consultation, training, implementing risk control strategies and regular reviews. Everyone is to be aware of safety at the Centre by both identifying hazards and taking steps to control risks. We

understand that all children have a right to be protected from possible or potential hazards and dangers posed by products, plants, objects, animals and people in the immediate and wider environment.

Related Policies

- MELROSE PARK OSHC Policy A-4: Enrolment
- MELROSE PARK OSHC Policy A-13: Participation and Access
- MELROSE PARK OSHC Policy A-17: Privacy and Confidentiality
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy D-22: Child Protection

Procedure

The Management Committee and Nominated Supervisor hold the responsibility for promotion and maintenance of Workplace Health and Safety (WHS) at the Centre.

Resources will be committed to enable educators and management to comply with relevant aspects of the WHS Acts and Regulations, including a budget to enable purchase of new equipment, maintenance of existing equipment and training educators to achieve compliance.

The following WHS responsibilities are defined for the Management Committee, Nominated Supervisor / Centre Director, and educators.

The Management Committee will ensure that:

- WHS is discussed at every meeting
- the WHS Policy is reviewed at least annually
- educators at the Centre are implementing identified risk control strategies
- the budget reflects WHS training and program implementation
- they actively participate in WHS consultation with the educators, parents and children
- they review the success of risk control strategies

The Nominated Supervisor will ensure that:

- safety is discussed at every educators meeting
- relevant training opportunities are identified and educators are encouraged to attend
- children in the Centre are aware of WHS practices and are encouraged to inform educators at the Centre of any risks or hazards they come across
- regular hazard and risk assessments are undertaken and identified risks are controlled
- consultation through educators meetings and educators memo's will ensure that issues concerning WHS will be raised and resolved
- new educators and all visitors to the Centre are briefed regarding WHS practices
- they actively participate in WHS consultation with management, educators, parents and children
- all WHS issues are reported to management

The educators at the Centre will:

- undertake appropriate training as directed by Management and the Nominated Supervisor
- actively participate in consultative processes implemented at the Centre about WHS
- report to the Nominated Supervisor any risks or hazards of which they are aware
- ensure that children in their care play and undertake activities in safe areas whilst demonstrating safe and healthy practices e.g. wearing of hats outdoors, in-boundary areas are the only areas used for play etc.

WHS "Hot Spots" in OSHC

The Management Committee and Nominated Supervisor will ensure that a checklist is developed and updated to reflect daily checks on specified hazards and frequent checks (i.e. once a term) on other hazards. These hazards may be related to, but not limited to, the following:

- Infectious Disease
- Hazardous Substances
- Electrical Safety
- Personal Protective Equipment (PPE)
- Slips, trips and falls safety
- Emergency procedures
- Machinery and equipment safety

- Manual handling and ergonomic practices
- Food preparation and handling
- Scalding and burns
- Storage and heights

Other areas to be aware of in relation to educators include:

- Violence or harassment in the workplace
- Educator amenities
- Stress

Adopting a risk management approach to WHS

Risk assessment is a key part of risk management. To develop a risk management approach, the Nominated Supervisor together with educators and Management will:

- Identify potential or actual hazards within the Centre, including when and how they may occur or when they may be more prevalent
- Assess the potential risk of incident, injury, harm or illness to children and adults
- Develop strategies to eliminate or minimise risk and hazards from occurring, or to control hazards when they happen
- Inform others with an interest in the Centre about when, why and how to implement OH&S strategies
- Develop a reporting system to document incidents, injuries and illnesses
- Regularly review, evaluate and improve, where necessary, WHS strategies

Hazard Identification

Hazard identification can occur through the following activities:

- Safety audits
- Workplace inspections
- Accident investigations
- Educators consultation
- Injury and illness records
- Complaints and safety risks
- Observations by people at the Centre

Hazard Assessment

Hazard assessment is made with regard to the following points:

- More than once cause (combination of factors)
- Exposure (frequency and duration of hazard)
- Severity (extent of injury or harm)
- Human differences (skills, physical capabilities)

Hazard assessment needs to consider the required performance standards and priorities based on extent of available human, financial and physical resources.

Assessment of Risk

To assess a risk, a judgement is made asking the following questions in conjunction with the risk matrix:

- How likely is it that the hazard would cause an incident?
- If the hazard did cause an incident, what would the consequences be?

Risk control strategies are used to eliminate or reduce the exposure to the risk. The following “hierarchy of control” ranks the types of control strategies in decreasing effectiveness if eliminating the hazard is not practicable. More than one control may be needed.

- REMOVE – substitute with less hazardous materials or equipment
- ADOPT A SAFER PROCESS – change work systems
- ENCLOSE OR ISOLATE THE HAZARD – use gates or remote handling
- USE ENGINEERING CONTROLS
- USE ADMINISTRATIVE PROCEDURES – documented procedures and training
- USE PERSONAL PROTECTIVE EQUIPMENT – must be suitable and include training

Where hazards or risks are associated with Department of Education property, the school Principal will be informed for immediate rectification.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia

- Work Health and Safety Act 2011
- Work Health and Safety Regulations 2011
- Children (Education and Care Services National Law Application) Act 2010
- NSW Government: WorkCover Authority of NSW www.workcover.nsw.gov.au
- Safe Work Australia: www.safeworkaustralia.gov.au
- Network of Community Activities Factsheet – ‘Workplace Health and Safety’
- Network of Community Activities Factsheet – ‘OH&S “Hot Spots” in OOSH’
- Putting Children First (NCAC) Article – ‘As safe as houses: Occupational health and safety in child care’

Endorsed Date:	October 2018
Review Date:	October 2019

D-29 Manual Handling

NQS

QA. 3.1.2	Premises, furniture and equipment are safe, clean and well maintained.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National Regulations

Reg. 103	Premises, furniture and equipment to be safe, clean and in good repair
Reg. 168	Education and care service must have policies and procedures

Policy Statement

We aim to ensure the identification, assessment and control of all Manual Handling tasks performed by educators is in accordance with the requirements of the Workplace Health and Safety legislation to reduce the risk of injury in the workplace.

Related Policies

- MELROSE PARK OSHC Policy A-15: Role of Management Committee
- MELROSE PARK OSHC Policy A-18: Work Health and Safety (WHS)
- MELROSE PARK OSHC Policy B-6: Indoor Environment
- MELROSE PARK OSHC Policy C-3: Educator Orientation and Induction
- MELROSE PARK OSHC Policy D-28: Occupational Health and Safety

Procedure

The Management Committee and Nominated Supervisor are responsible for ensuring that the risk of injury as a result of Manual Handling tasks is minimised by complying with relevant legislative requirements for Workplace Health and Safety.

The Nominated Supervisor, in consultation with Management, will ensure that manual handling posters and information are available for educators, reminding them of the importance of using safe lifting practices. Such information can be sourced through Workcover NSW.

Educators will:

- only move heavy objects as a team

- ensure all equipment is as readily accessible as possible without needing to stretch too far or bend too low
- adhere to all weight and height limits when using portable ladders
- try not to twist their backs when carrying or lifting
- ensure the floor space is uncluttered and free from trip/slip hazards (see B-6 Indoor Environment Policy)
- try to store heavy items at waist height as much as possible
- ensure they do not lift any children, unless in an emergency – in emergency situations, two educators at minimum will lift any children requiring assistance

Manual Handling will be included in the monthly hazard/risk assessment (see D-28 Occupational Health and Safety Policy) and Centre practices reviewed regularly to reduce risk of injury.

Identification/Assessment and Control

The following will be used as a guide within the service to assist in reducing the risk of injury:

- **Identification** of the risks of all manual handling tasks
- **Assessment** of different risk factors and their likelihood
- **Control** of the risk through policy/practice review, use of mechanical aids where possible and the provision of training and information to educators

Educators will be provided with Manual Handling training to give them the skills and abilities to be safe at work. The Committee will ensure funds are earmarked in the budget for such training.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- Work Health and Safety Act 2011
- Work Health and Safety Regulations 2011
- Privacy Act 1988
- NSW Government: WorkCover Authority of NSW www.workcover.nsw.gov.au
- Network of Community Activities Factsheet – ‘Workplace Health and Safety – Overview’
- Network of Community Activities Factsheet – ‘Risk Assessment and Management’

- Network of Community Activities Factsheet – ‘OH&S “Hotspots” in OOSH’

Endorsed Date:	October 2018
Review Date:	October 2019

D-30 Supervision

NQS

QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA. 3.1	The design of the facilities is appropriate for the operation of a service.
QA. 4.1	Staffing arrangements enhance children’s learning and development
QA. 4.1.1	The organisation of educators across the service supports children's learning and development.
QA. 6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 7.1.3	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.
QA. 7.1	Governance supports the operation of a quality service

National Regulations

Reg. 100	Risk assessment must be conducted before excursion
Reg. 115	Premises designed to facilitate supervision
Reg. 123	Educator to child ratios—centre-based services
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
LO. 3	Children take increasing responsibility for their own health and physical wellbeing

Policy Statement

Supervision is one of the key requirements in the prevention of incidents, accidents and injury throughout the centre. Educators require the skills to be able to assess potential risks during supervision and be able to implement changes to supervision to avoid incident, accident or injury. All new and relief educators, along with volunteers, should be informed of potential supervisory risks in the OSHC environment.

Related Policies

- MELROSE PARK OSHC Policy A-3: Philosophy
- MELROSE PARK OSHC Policy A-8: Dropping off and Picking up
- MELROSE PARK OSHC Policy A-20: Nominated Supervisor

- MELROSE PARK OSHC Policy B-6: Indoor Environment
- MELROSE PARK OSHC Policy B-7: Outdoor Environment
- MELROSE PARK OSHC Policy C-9: Relief Educators
- MELROSE PARK OSHC Policy C-10: Volunteers/Students/Visitors
- MELROSE PARK OSHC Policy C-11: Educators Child Ratios
- MELROSE PARK OSHC Policy D-22: Child Protection
- MELROSE PARK OSHC Policy D-23: Child Management / Behaviour Guidance
- MELROSE PARK OSHC Policy D-28: Occupational Health and Safety
- MELROSE PARK OSHC Policy E-5: Excursions

Procedure

Parents / guardians must ensure they greet and farewell educators when dropping off or picking up their child/ren so as to make educators aware of which children are in their care at all times (see A-8 Dropping off and Picking up Policy).

Children will only be allowed to play in the artificial grassed area directly out the front of the centre during each session to ensure children are visible at all times. If a child is playing 'out of sight' and / or outside boundaries, they are considered 'out of bounds' and will be redirected to play within the set boundaries.

Educators will communicate with each other for the purpose of advising changes to supervision routines / placement of educators. No educator is to leave their area of supervision without informing another educator or ensuring no children are in their area.

The Nominated Supervisor will ensure throughout each shift that educators are positioned so to adequately supervise children in care.

When children are playing, educators must make every effort to be aware of where children are at all times and what they are doing. Educators will engage with the children whilst supervising, but must always be aware of all children in their vicinity.

Work related discussions with fellow educators will only be as required, kept brief and, if needed, followed up at a time when educators are not allocated to supervise.

The Nominated Supervisor will ensure supervision practices are discussed and reviewed at each Educators Meeting. Such discussions will surround the best positioning of educators to ensure effective supervision, areas in which children are at potential risk of being unsupervised and recent incidents where supervision could have been improved.

A Risk assessment will be completed, reviewed and discussed regularly at Educators Meetings to allow input from all educators. Special focus should be placed on supervision, areas of concern and hiding places for unwelcome persons.

The Nominated Supervisor will ensure educators / child ratios are adequate for the area in which supervision is taking place. Educators who feel they are not able to supervise adequately due to the number of educators / children or the area being supervised should inform the Nominated Supervisor as a matter of priority.

Educators will recognise and discuss regularly the potential for unsupervised actions in the toilets. Children will be required to inform educators when they need to use the toilet block and must take a friend with them. Educators will be aware of the amount of time children have been in the toilet block and follow up should this have been an extended amount of time. Children will be required to inform the same educator when they return from the toilets. During times where children are only playing inside, educators are to watch the children walk to and from the toilets from the verandah.

Educators will be aware when persons are in the OSHC vicinity and greet them, asking if they can help. No person should be on the OSHC premises without being greeted by an educator.

Programmed activities requiring additional supervision must be highlighted to educators on arrival at the centre. These activities should only be planned if this does not compromise the supervision of the other children.

Supervision for excursions will be assessed using a Risk Assessment per activity. These will be visible at the service for parents prior to the activity day (see E-5 Excursions Policy).

Changeover of educators must include a head count or roll call of the children in the supervision area / service.

The Management Committee will assist in providing funds in the budget for training on supervision practices of educators. Where the environment is making supervision difficult, such issues will be discussed with the Management Committee and a decision reached for the safety of the children.

Outdoor Boundaries

- Educators will discuss bounds to all children at the commencement of each session. The boundaries at Melrose Park OSHC are indicated by the markings on the basketball court, physical wood boundaries at the equipment and the bathrooms. The bounds will be discussed with the children each session to ensure that all attendees are aware of appropriate playing areas for the session.
- Educators will evaluate each session and make changes to the boundaries if necessary (i.e. if water/puddles are a concern during inclement weather). This may be due to educator / child ratios, number of children, the weather or other environmental conditions. The new boundary for the session will be advised to children and educators and marked by the use of the orange cones.
- Children are only allowed to go to the toilets to wash their hands, get a drink or go to the toilet and leave the area once finished. They must have permission from an educator to go

to the bathroom and let that the same educator know when they have returned. Children will be encouraged to go to the bathroom in pairs.

- If the children are seen to be out of bounds, educators will remind them of the boundaries and that it is for their safety that the boundaries are set.

Sources

- Educational and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Children (Education and Care Services National Law Application) Act 2010
- Children's and Young Persons (Care and Protection) Act 1998
- United Nations Convention on the Rights of the Child
- Putting Children First (NCAC) Factsheet – 'Effective Supervision'

Endorsed Date:	October 2018
Review Date:	October 2019

D-31 Personal property

NQS

QA. 2.2	Each child is protected.
QA. 2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
QA.6.1	Respectful relationships with families are developed and maintained and families are supported in their parenting role
QA. 6.1.1	Families are supported from enrolment to be involved in the service and contribute to service decisions.
QA. 7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

National regulations

Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
LO. 3	Children take increasing responsibility for their own health and physical wellbeing
LO. 5	Children are effective communicators

Policy statement

We aim to care for children's personal belongings but will not be liable for any damaged, stolen or lost items. We acknowledge that children will bring or carry with them certain personal belongings to the Service. Any property brought into OSHC or vacation care by a child or family is the sole responsibility of that individual and should be kept in the child's school bag. It can be distressing for children to misplace their toys from home and can cause conflict between children. To save the upset and heartache, parents are requested to encourage children to leave their toys at home. We have numerous stimulating toys and resources for all children to play with and are in numerous quantities, catering to their interests.

Related Policies

- MELROSE PARK OSHC Policy A-14: Complaints
- MELROSE PARK OSHC Policy C-7: Grievance Procedures

- MELROSE PARK OSHC Policy C-12: Communication

Procedure

Children and families will be encouraged to keep personal belongings and toys at home or in their school bag while attending OSHC and vacation care.

During exceptional program circumstances, the children may (on occasion) be requested to bring their personal belongings, this may include school holiday programs.

Permission slips acknowledging responsibility for the child's personal property will be completed on vacation care days when children are requested to bring toys/equipment from home relevant to the days theme. The permission slip will specifically outline the requested toys/ equipment.

Risks assessments will aim to protect the children's personal property from being damaged, lost or stolen but the sole responsibility remains the child's/families. It is not a requirement on these days for a parent to supply their children with their personal toys or equipment. Any child without personal toys or equipment will be supplied with alternate activities.

Inappropriate items

Melrose Park OSHC will enforce a non-violent toy policy in which we seek family assistance in preventing their children from bringing in toys that are inappropriate such as violent toys from home e.g. toy guns and weapons.

Lost Property

OSHC will provide appropriate storage for lost property that will be available to children and families at all times.

The educators will take as much care as possible in ensuring that clothing; toys, and books etc. are returned to their correct family. The labelling of all items can help us achieve this. However, we must make it clear that the Service is not responsible for damaged, lost or stolen items. If families choose to leave belongings in the Service during the day it is completely at the family's own risk.

We will actively encourage children to care for their belongings by:

- Reminding children appropriately when belongings need to be placed e.g. Lunch box/hat into bag.
- reminding children not to play/touch/use another child's property without their permission
- Providing suitable storage to keep belongings safe.
- Collaborate with families any item of personal belonging which is either special, expensive or at risk of being damaged to be kept in a secured and safe position.
- Encouraging children to wear paint smocks during craft activities to protect their uniforms.

Any grievances or concerns related to lost damaged or stolen property of the children will be managed in accordance with the complaint's procedure.

Sources

- Educational and Care Services National Regulations 2011

- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia

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