

**POLICY DOCUMENTS
2016/2017**



Rolling Hills Pre-school Inc.
54 Landscape Drive, Mooroolbark, 3138.
Phone/Fax: (03) 9726-4522
www.rollinghillspreschool.com



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CURRICULUM DEVELOPMENT POLICY

Best Practice – Quality Area 1

PURPOSE

This policy will provide guidelines to ensure that the educational program (curriculum) and practice at Rolling Hills Preschool is:

- based on an approved learning framework
- underpinned by critical reflection and careful planning
- stimulating, engaging and enhances children’s learning and development.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing an educational program that is based on reflective practice, critical analysis and planning
- supporting each child to achieve learning outcomes consistent with the national *Early Years Learning Framework* and/or the *Victorian Early Years Learning and Development Framework* (refer to *Sources*)
- providing an educational program where children can learn through play and are supported to make decisions, problem-solve and build relationships with others
- creating an environment that supports, reflects and promotes equitable and inclusive behaviours and practices
- involving families in the development and review of educational program and practice.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved learning framework: A document that outlines practices that educators and co-ordinators must use to support and promote children’s learning. The *Early Years Learning*

Framework (Belonging, Being & Becoming) and the *Victorian Early Years Learning and Development Framework* are approved learning frameworks for use in Victoria (refer to *Sources*).

Critical reflection: Reflective practices that focus on implications for equity and social justice (*Early Years Learning Framework*, p45 – refer to *Sources*).

Curriculum: All interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children’s learning and development (*Early Years Learning Framework*, p45 – refer to *Sources*; adapted from Te Whariki).

Each child: A phrase used in the *National Quality Standard* when an individualised approach is warranted and educators are required to modify their response to meet the needs of an individual child. An example is ‘each child’s current knowledge, ideas, culture and interests provide the foundation for the program’.

Educational Leader: The Approved Provider of an education and care service must designate, in writing, a suitably qualified and experienced educator, co-ordinator or other individual to lead the development and implementation of educational programs at the service (Regulation 118). This person must have a thorough understanding of the *Early Years Learning Framework* (or other approved learning framework), be able to guide other educators in their planning and reflection, and mentor colleagues in the implementation of their practice.

Learning: A natural process of exploration that children engage in from birth, as they expand their intellectual, physical, social, emotional and creative capacities. Early learning is closely linked to early development.

Learning framework: Refer to **approved learning framework** above.

Learning outcome: A skill, knowledge or disposition that educators can actively promote in early childhood settings, in collaboration with children and families.

Learning relationships: Relationships that further children’s learning and development. Both adult and child have intent to learn from one another.

Play-based learning: A context for learning through which children organise and make sense of their social world as they engage actively with people, objects and representations.

SOURCES AND RELATED POLICES

Sources

- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia:* <http://education.gov.au/early-years-learning-framework>
- *Educators’ Guide to the Early Years Learning Framework for Australia:* <http://education.gov.au/early-years-learning-framework>
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*, ACECQA www.acecqa.gov.au
- *Guide to the National Quality Standard*, ACECQA: www.acecqa.gov.au
- *National Quality Standard Professional Learning Program:* www.earlychildhoodaustralia.org.au/nqsplp
- *Victorian Early Years Learning and Development Framework:* www.education.vic.gov.au/earlylearning/eyldf/default.htm
- *Victorian Early Years Learning and Development Framework – Resources for Professionals:* www.education.vic.gov.au/earlylearning/eyldf/profresources.htm

Service policies

- *Code of Conduct Policy*
- *Environmental Sustainability Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Nutrition and Active Play Policy*
- *Participation of Volunteers and Students Policy*
- *Road Safety and Safe Transport Policy*
- *Sun Protection Policy*
- *Supervision of Children Policy*
- *Water Safety Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that the educational program is stimulating and engaging, enhances children's learning and development, and is based on an approved learning framework (refer to *Definitions*) (Section 168)
- ensuring the developmental needs, interests and experiences, and the individual differences of each child are accommodated in the educational program (Section 168) (refer to *Inclusion and Equity Policy*)
- ensuring the educational program contributes to each child:
 - developing a strong sense of identity
 - being connected with, and contributing to, his or her world
 - having a strong sense of wellbeing
 - being a confident and involved learner
 - being an effective communicator (Regulation 73)
- designating a suitably qualified and experienced Educational Leader to direct the development and implementation of educational programs at the service (Regulation 118)
- ensuring the staff record includes the name of the Educational Leader at the service (Regulation 148)
- ensuring that the service's philosophy guides educational program and practice
- ensuring that assessments of the child's developmental needs, interests, experiences and participation in the educational program are documented (Regulation 74(1)(a)(i))
- ensuring that assessments of the child's progress against the outcomes of the educational program are documented (Regulation 74(1)(a)(ii))

- ensuring documentation of assessments includes reflection on the period of time the child is at the service, and how documented information will be used by educators at the service (Regulation 74(2)(a)(i)&(ii))
- ensuring documentation is written in plain language and is easy to understand by both educators and parents/guardians (Regulation 74(2)(b))
- ensuring a copy of the educational program is displayed at the service and accessible to parents/guardians (Regulation 75)
- ensuring that parents/guardians are provided with information about the content and implementation of the educational program, their child's participation in the program and documentation relating to assessments or evaluations of their child (Regulation 76)
- developing and evaluating the educational program in collaboration with the Nominated Supervisor, educators, children and families.

The Nominated Supervisor is responsible for:

- ensuring that the educational program is stimulating and engaging, enhances children's learning and development, and is based on an approved learning framework (refer to *Definitions*) (Section 168)
- ensuring the developmental needs, interests and experiences, and the individual differences of each child are accommodated in the educational program (Section 168) (refer to *Inclusion and Equity Policy*)
- displaying a copy of the educational program at the service in a location accessible to parents/guardians
- ensuring that each child's learning and development is assessed as part of an ongoing cycle of planning, documentation and evaluation
- ensuring that there is a record of learning and development for each child, and that it is updated and maintained on an ongoing basis
- developing and evaluating the educational program in collaboration with the Approved Provider, educators, children and families
- ensuring regular communication is established between the service and parents/guardians in relation to their child's learning and development.

Certified Supervisors and other educators are responsible for:

- delivering an educational program that is stimulating and engaging, enhances children's learning and development, and is based on an approved learning framework (refer to *Definitions*)
- considering the developmental needs, interests and experiences, and the individual differences of each child in the educational program (refer to *Inclusion and Equity Policy*)
- assessing and documenting each child's needs, interests, experiences, participation and progress in relation to the educational program in a way that is easy to understand for parents/guardians

- making information available to parents/guardians about their child's participation in the educational program
- communicating regularly with parents/guardians in relation to their child's learning and development
- developing and evaluating the educational program in collaboration with the Approved Provider, Nominated Supervisor, children and families.

Parents/guardians are responsible for:

- communicating regularly with the service in relation to their child's learning and development
- providing input to the development of the educational program in collaboration with the Approved Provider, Nominated Supervisor, educators and children.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

Review date: 10/SEPTEMBER/2017

INCLUSION AND EQUITY POLICY

Best Practice – Quality Area 1 (and 6)

PURPOSE

This policy will provide guidelines to:

- ensure all adults and children at Rolling Hills Preschool are treated equitably and with respect, regardless of their background, ethnicity, culture, language, beliefs, gender, age, socioeconomic status, level of ability, additional needs, family structure or lifestyle
- promote inclusive practices and ensure the successful participation of all children at Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- acknowledging and respecting the rights of all children to be provided with and participate in a quality early childhood education and care program
- creating an environment that supports, reflects and promotes equitable and inclusive behaviours and practices
- creating a sense of belonging for all children, families and staff, where diverse identities, backgrounds, experiences, skills and interests are respected, valued and given opportunities to be expressed/developed
- ensuring that programs are reflective of, and responsive to, the values and cultural beliefs of families using the service, and of those within the local community and broader society
- working to ensure children are not discriminated against on the basis of background, ethnicity, culture, language, beliefs, gender, age, socioeconomic status, level of ability or additional needs, family structure or lifestyle
- ensuring that no employee, prospective employee, parent/guardian, child, volunteer or student at the service is discriminated against on the basis of having or being suspected of having an infectious disease or blood-borne virus (BBV – refer to *Definitions*)
- upholding the values and principles of Early Childhood Australia (ECA) and Early Childhood Intervention Australia's (ECIA) *Position Statement on the Inclusion of Children with a Disability in Early Childhood Education and Care* (refer to *Sources*)
- providing all children with the opportunity to access programs at the service, and recognising that all families are unique and that children learn in different ways and at different rates
- consistently updating and supporting the knowledge, skills, practices and attitudes of staff to encourage and ensure inclusion and equity

- complying with current legislation including the *Charter of Human Rights and Responsibilities Act 2006*, *Equal Opportunity Act 2010*, *Disability Act 2006* and *Racial and Religious Tolerance Act 2001*.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

It is intended that all Victorian children have access to a year of kindergarten before school. The Victorian Government requires funded organisations to ensure that their policies and procedures promote equality of opportunity for all children. Criteria for access and inclusion are outlined in the current edition of the Department of Education and Early Childhood Development's (DEECD's) *The Kindergarten Guide* (refer to *Sources*) and include the requirement that funded organisations comply with existing legislation.

State and Commonwealth laws prohibit discrimination based on personal characteristics, including race, age, gender, religious belief, disability or illness and parental status. Underpinning the development of this policy are the requirements of the *Equal Opportunity Act 2010*, *Charter of Human Rights and Responsibilities Act 2006*, *Child Wellbeing and Safety Act 2005*, *Disability Discrimination Act 1992*, *Disability Act 2006*, *Education and Care Services National Law Act 2010* and *Education and Care Services National Regulations 2011*.

“An inclusive kindergarten fosters the development of a sense of belonging and respects individuality and diversity, in order to promote learning, development and well-being in a child's early years. Services must ensure their application and enrolment policies:

- promote fair and equitable access to kindergarten programs
- support all eligible children to access a kindergarten program, including those who face barriers to participation
- do not inadvertently present barriers to participation.” (*The Kindergarten Guide*).

“Inclusion involves taking into account all children’s social, cultural and linguistic diversity (including learning styles, abilities, disabilities, gender, family circumstances and geographic location) in curriculum decision-making processes” (*Guide to the National Quality Standard*, Element 1.1.5 – refer to *Sources*). Services need to consider individual circumstances when engaging with parents and supporting children and ensure a coordinated, confidential and sensitive approach is taken and strengthens the capacity of the family unit.

Practice Guide Four: Equity and Diversity is one of a series of *Victorian Early Years Learning and Development Framework Practice Guides* (refer to *Sources*), and includes examples of best practice from a range of early childhood professionals across diverse settings.

In addition to developing and implementing an inclusion and equity policy, values of inclusion and equity should also be incorporated into a service's philosophy statement.

Developing professional knowledge and skills, and using family-centred practice (refer to *Definitions*) to work in partnership with children, families, communities, and other services and agencies, will assist services to identify, include and support children with additional needs and their families.

Early childhood services are obligated by law, service agreements and licensing requirements to comply with the Education and Care Services National Law and National Regulations, and privacy and health records legislation in relation to collecting and storing personal and health information about individuals (refer to *Privacy and Confidentiality Policy*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Age Discrimination Act 2004*
- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- *Children, Youth and Families Act 2005* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic)
- *Dardee Boorai: the Victorian Charter of Safety and Wellbeing for Aboriginal Children and Young People* (Vic)
- *Disability Act 2006* (Vic)
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
- *Equal Opportunity Act 2010* (Vic)
- *Fair Work Act 2009* (Cth)
- *Health Records Act 2001* (Vic)
- *Information Privacy Act 2000* (Vic)
- *National Quality Standard, Quality Area 1: Educational Program and Practice*
 - Standard 1.1: An approved learning framework informs the development of a curriculum that enhances each child's learning and development
 - Element 1.1.5: Every child is supported to participate in the program
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
- *Occupational Health and Safety Act 2004*
- *Privacy Act 1988* (Cth)
- *Racial and Religious Tolerance Act 2001* (Vic)
- *Racial Discrimination Act 1975* (Cth)
- *Sex Discrimination Act 1984* (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Additional needs: A broad term that can include families and children experiencing disability, a medical condition, a developmental concern, an emotional need (resulting from trauma, abuse or grief), family displacement (due to war or refugee status), domestic violence, mental illness, family separation or divorce.

Best Start: A prevention and early intervention project to improve the health, development, learning and wellbeing of all Victorian children from conception through to transition to school. It aims to strengthen the capacity of parents, families, communities and early years services to better provide for the needs of all young children and their families. There are 30 Best Start sites, six of which are Aboriginal Best Start sites. Further information is available in *The Kindergarten Guide* (refer to *Sources*)

Blood-borne virus (BBV): A virus that is spread when blood from an infected person enters another person's bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral haemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risk of contracting a blood-borne virus is negligible.

Culture: The values and traditions of groups of people that are passed from one generation to another.

Culturally and linguistically diverse (CALD): Refers to individuals and groups who are from diverse racial, religious, linguistic and/or ethnic backgrounds.

Developmental delay: A delay in the development of a child under the age of 6 years that:

- a) is attributable to a mental or physical impairment, or a combination of mental and physical impairments, and
- b) is manifested before the child attains the age of 6 years, and
- c) results in substantial functional limitations in one or more of the following areas of major life activity:
 - i) self-care
 - ii) receptive and expressive language
 - iii) cognitive development
 - iv) motor development, and
- d) reflects the child's need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually planned and co-ordinated (*Disability Act 2006* (Vic)).

Disability: In relation to a person, refers to:

- e) a sensory, physical or neurological impairment or acquired brain injury, or any combination thereof, that:
 - i) is, or is likely to be, permanent, and

- ii) causes a substantially reduced capacity in at least one of the areas of self-care, self-management, mobility or communication, and
 - iii) requires significant ongoing or long-term episodic support, and
 - iv) is not related to ageing, or
- f) an intellectual disability, or
- g) a developmental delay (Disability Act 2006 (Vic)).

Diversity: Refers to all characteristics that make individuals different from one another, including race, religion, language, ethnicity, beliefs, age, gender, sexual orientation, level of ability, additional needs, socioeconomic status, educational attainment, personality, marital and/or parental status, family structure, lifestyle and general life/work experience.

Early Childhood Intervention Services (ECIS): These services support families and children experiencing a disability or developmental delay (refer to *Definitions*) from birth to school age. ECIS are funded through the Department of Education and Early Childhood Development (DEECD) and provided by Specialist Children's Services teams and Early Childhood Intervention agencies.

Early Start Kindergarten: A funding program that enables three-year-old Aboriginal and Torres Strait Islander children, and children known to Child Protection, to attend a free kindergarten program that is planned and delivered by an early childhood teacher for a specific number of hours. Details are available at:

<http://www.education.vic.gov.au/about/programs/learningdev/pages/earlystartkinder.aspx>

Equity: (In the context of human rights) is the behaviour of acting in a fair and just manner towards others.

Family-centred practice: Children learn in the context of their families, and families are the primary influence on children's learning and development. Professionals also play a role in advancing children's learning and development and can engage in family-centred practice by respecting the pivotal role of families in children's lives. Early childhood professionals should:

- use families' understanding of their children to support shared decision-making about each child's learning and development
- create a welcoming and culturally-inclusive environment, where all families are encouraged to participate in and contribute to children's learning and development
- actively engage families and children in planning children's learning and development
- provide feedback to families on each child's learning, and provide information about how families can further advance children's learning and development at home and in the community (*Victorian Early Years Learning and Development Framework*, p10).

Inclusion: The incorporation of children and families into the service to ensure that all individuals have an equal opportunity to achieve their maximum potential.

Inclusion support agencies: Funded by the Commonwealth Government to work at a local level with early childhood education and care services. ISAs provide practical advice on inclusive practices and support child care services to build their capacity and to access training. The ISA may also recommend that services access resources, bi-cultural support and specialist equipment, administered by the Professional Support Coordinators (PSCs), to better facilitate a

child's inclusion in a service. Further information and eligibility requirements are available at: <http://education.gov.au/inclusion-and-professional-support-program>

Inclusion support subsidy (ISS) : Assists eligible child care services to improve their capacity to include children with ongoing high support needs, including those with disability, so they can be cared for appropriately within a service. Further details are available at:

<http://education.gov.au/inclusion-and-professional-support-program>

Inclusive practice: The provision of a flexible, innovative and responsive program that supports the learning needs and meaningful participation of all children attending the service.

Indigenous Professional Support Unit (IPSU): Funded by the Commonwealth to provide professional development and support to services with a high proportion of indigenous children. The Victorian Aboriginal Education Association Inc. (VAEAI) is the IPSU in Victoria. VAEAI can also provide support to mainstream education and care services to raise their cultural competency. More information is available at: www.vaeai.org.au

Kindergarten Fee Subsidy (KFS): A state government subsidy paid directly to the funded service to enable eligible families to attend a funded kindergarten program or funded three-year-old place at no cost (or minimal cost) to promote participation. Details are available in *The Kindergarten Guide (refer to Sources)*.

Kindergarten Inclusion Support Services (KISS): A program offering supplementary assistance to early childhood services to support the inclusion of children who have been diagnosed with developmental concerns, a disability or complex medical needs, into a funded kindergarten program. Services include the Preschool Field Officer Program (refer to *Definitions*) and Kindergarten Inclusion Support Packages (refer to *Definitions*). Details are available in *The Kindergarten Guide (refer to Sources)*.

Kindergarten Inclusion Support Packages: Supplementary assistance to build the capacity of funded kindergarten programs to support the access and participation of children with a disability and high support needs and/or with complex medical needs. Details are available at: <http://www.education.vic.gov.au/childhood/providers/needs/Pages/kindersupportpackages.aspx>

Koorie Early Childhood Education Program: Supports Aboriginal children and their families to access and participate in kindergarten programs. The program consists of three components:

- a state-wide co-ordinator who provides support, information and assistance to regional Koorie Engagement Support Officers – Early Childhood Development
- Koorie Engagement Support Officers – Early Childhood Development (refer to *Definitions*)
- the Koorie Preschool Assistants program (refer to *Definitions*).

Koorie Engagement Support Officers (KESOs): Employed by the Department of Education and Early Childhood Development (DEECD) to assist families in accessing the broad range of services and support needed to ensure the best start in life for Aboriginal children from birth through to completion of school. KESOs provide advice and practical support to services that offer funded kindergarten places to ensure the delivery of programs that are respectful of the cultural beliefs and practices of Aboriginal children. Details are available in *The Kindergarten Guide (refer to Sources)*.

Koorie Preschool Assistants (KPSA) program: Implemented by the Department of Education and Early Childhood Development (DEECD) in partnership with local Aboriginal communities that employ KPSAs and administer the program. KPSAs work in kindergartens to assist teachers

to develop and deliver culturally-inclusive and responsive programs for Aboriginal children. Details are available in *The Kindergarten Guide* (refer to *Sources*).

Out-of-Home Care: Is the term used in Victoria when a child or young person is placed in care away from their parents. It includes placement in kinship care, home-based care such as foster care and residential care. For these children, the State of Victoria is legal their parent, and with this comes the responsibilities of a parent to care for and protect them, and to ensure that they have access to all the services they need for their immediate and longer term benefit (from: *Early Childhood Agreement on Out-of-Home Care* – refer to *Sources*).

Preschool Field Officers (PSFOs): Employed by local government authorities or other agencies to assist children with additional needs to access and participate in funded kindergarten programs. The PSFO service is part of the Kindergarten Inclusion Support Services (refer to *Definitions*) program.

Preschool Field Officer Program: An early intervention, outreach service that is universally available within state-funded preschools for any child with developmental concerns. The primary role of the Preschool Field Officer Program is to assist children with additional needs to access and participate in funded kindergarten programs. Further details are available at: <http://www.education.vic.gov.au/childhood/providers/needs/Pages/kinderinclusionsupport.aspx>

SOURCES AND RELATED POLICES

Sources

- Association for Children with a Disability – a Victorian organisation that provides information, support and advocacy for children with a disability and their families. They also provide Kindergarten Inclusion Tip Sheets in English, Arabic, Chinese and Vietnamese: www.acd.org.au
- Building better partnerships – Working with Aboriginal communities and organisations: a communication guide for the Department of Human Services: <http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/plans-and-strategies/children,-youth-and-family-services/building-better-partnerships-communications-guide-2006>
Dardee Boorai: the Victorian Charter of Safety and Wellbeing for Aboriginal Children and Young People: <http://www.education.vic.gov.au/about/programs/aboriginal/Pages/aboriginaldb.aspx>
- *Early Childhood Agreement for Children in Out-of-Home Care* (March 2014). Signed by the Department of Education and Early Childhood Development, the Department of Human Services, Municipal Association of Victoria and Early Learning Association Australia, this agreement aims to ensure children in Out-of-Home Care (refer to *Definitions*) have access to high quality early childhood education and care experiences. Available from: www.education.vic.gov.au/childhood/providers/edcare/Pages/default.aspx
- Early Childhood Australia (ECA) and Early Childhood Intervention Australia's (ECIA) *Position Statement on the Inclusion of Children with a Disability in Early Childhood Education and Care* – available at: www.earlychildhoodaustralia.org.au and www.ecia.org.au
- Early Childhood Intervention Australia Victorian Chapter (ECIA VC) – the peak body for early childhood intervention services in Victoria: www.eciavic.org.au
- *fka* Children's Services – provides services including bicultural support, language services and training to children's services workers in Victoria. *fka* also provides culturally-diverse resources and materials in both English and various community languages. Visit: www.fka.com.au

- *Guide to the National Quality Standard*: www.acecqa.gov.au
- *The Kindergarten Guide* (Department of Education and Early Childhood Development) is available under *early childhood / service providers on the DEECD website*: www.education.vic.gov.au
Koorie Kindergarten Inclusion Kit:
<http://www.education.vic.gov.au/childhood/providers/needs/pages/kooriekinderkit.aspx>
- Language services – organisations offering funded programs are eligible to obtain language services. Two types of language services are available for kindergarten providers: telephone interpreting and on-site interpreting (both spoken languages and Auslan sign language). The provider for language services is Victorian Interpreting and Translating Services (VITS): www.vits.com.au or phone 9280 1941.
- *Using Interpreting Services: Victorian Government Policy and Procedures* (2010):
www.multicultural.vic.gov.au/images/stories/pdf/2383%20vmc%20interpreter%20manual%20web.pdf
- *Victorian Early Years Learning and Development Framework Practice Guides* – provide practical advice for early childhood professionals about each of the Practice Principles in the *Victorian Early Years Learning and Development Framework*. Each guide includes examples of best practice from a range of early childhood professionals across diverse settings. *Practice Guide Four: Equity and Diversity* is available at:
<http://www.education.vic.gov.au/childhood/providers/edcare/pages/profresource.aspx>

Service policies

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Curriculum Development Policy*
- *Dealing with Infectious Diseases Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Enrolment and Orientation Policy*
- *Epilepsy Policy*
- *Excursions and Service Events Policy*
- *Fees Policy*
- *Interactions with Children Policy*
- *Nutrition and Active Play Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that service programs are available and accessible to families from a variety of backgrounds (refer to *Curriculum Development Policy*)
- encouraging collaborative, family-centred practice (refer to *Definitions*) at the service
- providing families with information about the role of inclusive practice in achieving positive outcomes for all children, the key values underpinning inclusive practice and the support options available for children attending Rolling Hills Preschool
- working with individual families to determine the needs of their child and facilitating the inclusion of both the child and the family into the service
- ensuring that educational programs are delivered in accordance with an approved learning framework, are based on the developmental needs, interests and experiences of each child, and take into account the individual differences of each child (*Victorian Early Years Learning and Development Framework Practice Guide Four: Equity and Diversity – refer to Sources*)
- ensuring that the enrolment process is fair and equitable, and facilitates access for all children (refer to *Enrolment and Orientation Policy*)
- tailoring the orientation process to meet the individual needs of children and families (refer to *Enrolment and Orientation Policy*)
- considering barriers to participation in service programs and activities, and developing strategies to overcome these
- considering options to provide appropriate physical infrastructure, staffing and resources to facilitate the inclusion of all children at the service
- ensuring that staff have access to appropriate and accredited professional development activities that promote a positive understanding of diversity, inclusion and equity, and provide skills to assist in implementing this policy (refer to *Staffing Policy*)
- ensuring that the Nominated Supervisor, educators and all staff are aware of the service's expectations regarding positive, respectful and appropriate behaviour when working with children and families (refer to *Code of Conduct Policy* and *Interactions with Children Policy*)
- considering any issues regarding fees that may be a barrier to families enrolling at Rolling Hills Preschool, and removing these barriers wherever possible (refer to *Fees Policy*)
- ensuring that all eligible families are supported to access the Kindergarten Fee Subsidy (refer to *Definitions* and *Fees Policy*), including families with concession cards, Aboriginal and Torres Strait Islander families, and refugee and asylum seeker families
- providing service information in various community languages wherever possible
- using language services (refer to *Sources*) to assist with communication where required, considering the employment of a multilingual worker/s to meet the needs of culturally and linguistically diverse (CALD) families (e.g. *fka* Children's Services Casual Bilingual Program – refer to *Sources*)

- working with the Nominated Supervisor and educators to ensure appropriate program planning and resourcing for children with additional needs (refer to *Definitions*)
- accessing Kindergarten Inclusion Support Services (refer to *Definitions*) and Kindergarten Inclusion Support Packages (refer to *Definitions*) for children with disabilities, complex medical needs and/or developmental concerns, where required
- where practicable, accessing resources, support and professional development to facilitate inclusion of children with additional needs who are ineligible for specific support packages
- working with specialised services and professionals (e.g. Early Childhood Intervention Services and inclusion support agencies – refer to *Definitions* and *Sources*) to provide support and services for families and children experiencing severe disabilities, complex medical needs and/or developmental concerns
- ensuring that all eligible three-year-old Aboriginal and Torres Strait Islander children and children known to Child Protection are supported to access the Early Start Kindergarten program (refer to *Definitions*)
- accessing support from DEECD’s Koorie Engagement Support Officers (refer to *Definitions*), the Koorie Preschool Assistants program (refer to *Definitions*) and the Indigenous Professional Support Unit (refer to *Definitions*), where required
- implementing appropriate programs and practices to support vulnerable children and families, including working co-operatively with relevant services and/or professionals (e.g. Child FIRST), where required (refer to *Child Safe Environment Policy*)
- ensuring that service programs are inclusive of children with medical conditions, including anaphylaxis, asthma, diabetes and epilepsy (refer to *Dealing with Medical Conditions Policy*, *Anaphylaxis Policy*, *Asthma Policy*, *Diabetes Policy* and *Epilepsy Policy*)
- ensuring that no employee, prospective employee, parent/guardian, child, volunteer or student at the service is discriminated against on the basis of having or being suspected of having an infectious disease, blood-borne virus (BBV – refer to *Definitions*), illness or medical condition
- ensuring that any behaviour or circumstances that may constitute discrimination or prejudice are dealt with in an appropriate manner (refer to *Complaints and Grievances Policy*)
- ensuring that all policies of Rolling Hills Preschool, including the *Privacy and Confidentiality Policy*, are adhered to at all times.

The Nominated Supervisor is responsible for:

- being aware of the service’s expectations regarding positive, respectful and appropriate behaviour when working with children and families (refer to *Code of Conduct Policy* and *Interactions with Children Policy*)
- identifying children who may be disadvantaged, have additional needs, or be at risk of discrimination/exclusion, and being aware of the support/resources required to ensure that these children are included in service programs

- consulting with families and liaising with the Approved Provider to access support/resources for individual children, where required
- organising appropriate, accredited professional development for staff to enable all children to be included at the service
- ensuring that parents/guardians are consulted, kept informed and provide written consent, where individualised programs, action, support or intervention are planned and provided for their child (e.g. the Preschool Field Officer Program and Kindergarten Inclusion Support Packages – refer to *Definitions*)
- developing an educational program that is reflective of the service’s values, beliefs and philosophy, and embraces the principles of fairness, equity, diversity and inclusion (*Victorian Early Years Learning and Development Framework Practice Guide Four: Equity and Diversity – refer to Sources*)
- ensuring that the program provides opportunities for all children to participate and interact with one another
- using language services (refer to *Sources*) to assist with communication, where required
- working with the Approved Provider and educators to ensure appropriate program planning and resourcing for children with additional needs (refer to *Definitions*)
- using family-centred practice (refer to *Definitions*) and working collaboratively with staff, parents/guardians, specialist services and other professionals to implement the program at the service and provide individualised support for children, where required
- responding to the needs and concerns of parents/guardians, and providing support and guidance, where appropriate
- providing information to families about the support available to assist children, including:
 - Kindergarten Fee Subsidy
 - Early Start Kindergarten
 - Koorie Early Childhood Education Program
 - Kindergarten Inclusion Support Services
 - language services
- providing support and guidance to educators/staff, where required
- ensuring that service programs are inclusive of children with medical conditions, including anaphylaxis, asthma, diabetes and epilepsy (refer to *Dealing with Medical Conditions Policy, Anaphylaxis Policy, Asthma Policy, Diabetes Policy and Epilepsy Policy*)
- ensuring that individualised programs incorporate opportunities for regular review and evaluation, in consultation with all people involved in the child’s education and care
- providing opportunities for families to contribute to the program
- notifying the Approved Provider of any behaviour or circumstances that may constitute discrimination or prejudice

- advising the Approved Provider if they become aware of discrimination against anyone at the service on the basis of having or being suspected of having an infectious disease, blood-borne virus (BBV – refer to *Definitions*), illness or medical condition
- adhering to the policies of Rolling Hills Preschool, including the *Privacy and Confidentiality Policy*, at all times.

Certified Supervisors, educators and other staff are responsible for:

- being aware of the service’s expectations regarding positive, respectful and appropriate behaviour when working with children and families (refer to *Code of Conduct Policy* and *Interactions with Children Policy*)
- using family-centred practice (refer to *Definitions*) and working collaboratively with other staff, parents/guardians, specialist services and professionals to implement the program at the service and provide individualised support for children, where required
- delivering an educational program that is reflective of the service’s values, beliefs and philosophy, and embraces the principles of fairness, equity, diversity and inclusion (*Victorian Early Years Learning and Development Framework Practice Guide Four: Equity and Diversity – refer to Sources*)
- undertaking appropriate, accredited professional development enable the inclusion of all children at the service
- using language services (refer to *Sources*) to assist with communication, where required
- understanding and respecting different cultural child-rearing and social practices
- working with the Approved Provider and Nominated Supervisor to ensure appropriate program planning and resourcing for children with additional needs (refer to *Definitions*)
- meeting any specialised medical and nutritional needs of children on a day-to-day basis (refer to *Dealing with Medical Conditions Policy* and *Nutrition and Active Play Policy*)
- providing information to families about the support available to assist children, including:
 - Kindergarten Fee Subsidy
 - Early Start Kindergarten
 - Koorie Early Childhood Education Program
 - Kindergarten Inclusion Support Services
 - language services
- discussing any concerns regarding individual children with the Nominated Supervisor or Approved Provider, and parents/guardians
- responding to the needs and concerns of parents/guardians, and providing support and guidance, where appropriate
- reviewing and evaluating individualised support programs in consultation with all people involved in the child’s education and care
- critically reflecting on practice to ensure that interactions and programs embrace an approach in which children and families feel valued and respected, and that their contributions are welcomed

- notifying the Nominated Supervisor or Approved Provider of any behaviour or circumstances that may constitute discrimination or prejudice
- advising the Nominated Supervisor or Approved Provider if they become aware of discrimination against anyone at the service on the basis of having or being suspected of having an infectious disease, blood-borne virus (BBV – refer to *Definitions*), illness or medical condition
- adhering to the policies of Rolling Hills Preschool, including the *Privacy and Confidentiality Policy*, at all times.

Parents/guardians are responsible for:

- adhering to the policies of Rolling Hills Preschool, including this *Inclusion and Equity Policy* and the *Privacy and Confidentiality Policy*, at all times
- communicating with the service to ensure awareness of their child’s specific needs
- raising any issues or concerns regarding their child’s participation in the program
- being involved in, keeping fully informed about, and providing written consent for any individualised intervention or support proposed/provided for their child
- responding to requests from educators for written permission to arrange for an assessment or collect reports on their child.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

ACCEPTANCE AND REFUSAL OF AUTHORISATIONS POLICY

Mandatory – Quality Area 2

PURPOSE

This policy outlines procedures to be followed when:

- obtaining written authorisation from a parent/guardian or person authorised and named in the enrolment record
- refusing written authorisation from a parent/guardian or person authorised and named in the enrolment record.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- ensuring the safety and wellbeing of all children attending the service
- meeting its duty of care obligations under the law.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Under the National Law and Regulations, early childhood services are required to obtain written authorisation from parents/guardians, and/or authorised nominees (refer to *Definitions*) in some circumstances, to ensure that the health, safety, wellbeing and best interests of the child are met. These circumstances include but are not limited to:

- self-administration of medication (Regulation 96)
- children leaving the service premises (Regulation 99)
- children being taken on excursions (Regulation 102).

Specific service policies (including the *Administration of Medication Policy, Delivery and Collection of Children Policy, Enrolment and Orientation Policy* and *Excursions and Service Events Policy*) should include details of the conditions under which written authorisations will be accepted. However, there may be instances when a service refuses to accept a written authorisation. The *Education and Care Services National Regulations 2011* (Regulation 168(2)(m)) specify that services are required to develop a policy in relation to the acceptance

and refusal of authorisations to help educators/staff and parents/guardians understand exactly what they need to do.

This policy outlines procedures to be followed when refusing a written authorisation from a parent/guardian or person authorised and named in the enrolment record. As an example, the National Law does not specify the minimum age of a person who is authorised to collect a child from the service premises. After consulting with parents/guardians and families, the Approved Provider may adopt a policy position accepting authorisations for persons over the age of 16 to collect a child from the service. This decision will then be outlined in the service's *Delivery and Collection of Children Policy*. In the event that the service receives written authorisation for a person under the age specified in its *Delivery and Collection of Children Policy*, to collect a child from the service, the procedures outlined below for refusing this written authorisation would be enacted.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Children, Youth and Families Act 2005* (Vic) *Child Wellbeing and Safety Act 2005* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic) (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2010*: Section 167
- *Education and Care Services National Regulations 2011*: Regulations 96, 99, 102, 160, 161, 168(2)(m), 170
- *Family Law Act 1975* (Cth)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.3: Each child is protected.

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Attendance record: Kept by the service to record details of each child attending the service including name, time of arrival and departure, signature of person delivering and collecting the child or of the Nominated Supervisor or educator (Regulation 158(1)).

Authorised nominee: (In relation to this policy) a person who has been given written authority by the parents/guardians of a child to collect that child from the education and care service. These details will be on the child's enrolment form.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Inappropriate person: A person who may pose a risk to the health, safety or wellbeing of any child attending the education and care service, or whose behaviour or state of mind make it

inappropriate for him/her to be on the premises e.g. a person under the influence of drugs or alcohol (Act 171(3)).

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

SOURCES AND RELATED POLICIES

Sources

- Australian Children's Education and Care Quality Authority (ACECQA): www.cecqa.gov.au

Service policies

- *Administration of Medication Policy*
- *Child Safe Environment Policy*
- *Dealing with Medical Conditions Policy*
- *Delivery and Collection of Children Policy*
- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that parents/guardians are provided with a copy of all service policies
- ensuring that the Nominated Supervisor and all staff follow the policies and procedures of the service
- ensuring that all parents/guardians have completed the authorised nominee section of their child's enrolment form (refer to *Enrolment and Orientation Policy*), and that the form is signed and dated before the child is enrolled at the service
- ensuring that permission forms for excursions are provided to the parent/guardian or authorised nominee prior to the excursion (refer to *Excursions and Service Events Policy*)
- ensuring that an attendance record (refer to *Definitions*) is maintained to account for all children attending the service
- keeping a written record of all visitors to the service, including time of arrival and departure
- ensuring that where children require medication to be administered by educators/staff, this is authorised in writing, signed and dated by a parent/guardian or authorised nominee, and included with the child's medication record (refer to *Definitions*) (refer to *Administration of Medication Policy* and *Dealing with Medical Conditions Policy*)
- ensuring educators/staff do not administer medication without the authorisation of a parent/guardian or authorised nominee, except in the case of an emergency, including an

asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Dealing with Medical Conditions Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Asthma Policy and Anaphylaxis Policy*)

- ensuring educators/staff allow a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee including details required under Regulation 102(4)&(5) (refer to *Excursions and Service Events Policy*)
- ensuring educators/staff allow a child to depart from the service only with a person who is the parent/guardian or authorised nominee, or with the written authorisation of one of these, except in the case of a medical or other emergency (refer to *Delivery and Collection of Children Policy and Child Safe Environment Policy*)
- ensuring that there are procedures in place if an inappropriate person (refer to *Definitions*) attempts to collect a child from the service (refer to *Delivery and Collection of Children Policy and Child Safe Environment Policy*)
- developing and enacting procedures for dealing with a written authorisation that does not meet the requirements outlined in service policies.

The Nominated Supervisor is responsible for:

- following the policy and procedures of the service
- ensuring that medication is not administered to a child without the authorisation of a parent/guardian or authorised nominee, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Dealing with Medical Conditions Policy, Incident, Injury, Trauma and Illness Policy, Emergency and Evacuation Policy, Asthma Policy and Anaphylaxis Policy*)
- ensuring a child only departs from the service with a person who is the parent/guardian or authorised nominee, or with the written authorisation of one of these, except in the case of a medical or other emergency (refer to *Delivery and Collection of Children Policy and Child Safe Environment Policy*)
- ensuring a child is not taken outside the service premises on an excursion except with the written authorisation of a parent/guardian or authorised nominee including details required under Regulation 102(4)&(5) (refer to *Excursions and Service Events Policy*)
- informing the Approved Provider when a written authorisation does not meet the requirements outlined in service policies.

Certified Supervisors and other educators are responsible for:

- following the policies and procedures of the service
- checking that parents/guardians sign and date permission forms for excursions
- checking that parents/guardians or authorised nominees sign the attendance record (refer to *Definitions*) as their child arrives at and departs from the service
- administering medication only with the written authorisation of a parent/guardian or authorised nominee, except in the case of an emergency, including an asthma or anaphylaxis emergency (refer to *Administration of Medication Policy, Dealing with Medical Conditions Policy, Incident, Injury, Trauma and Illness Policy and Emergency and Evacuation Policy*)

- allowing a child to participate in an excursion only with the written authorisation of a parent/guardian or authorised nominee including details required under Regulation 102(4)&(5) (refer to *Excursions and Service Events Policy*)
- allowing a child to depart from the service only with a person who is the parent/guardian or authorised nominee, or with the written authorisation of one of these, except in the case of a medical or other emergency (refer to *Delivery and Collection of Children Policy* and *Child Safe Environment Policy*)
- following procedures if an inappropriate person (refer to *Definitions*) attempts to collect a child from the service (refer to *Delivery and Collection of Children Policy* and *Child Safe Environment Policy*)
- informing the Approved Provider when a written authorisation does not meet the requirements outlined in service policies.

Parents/guardians are responsible for:

- reading and complying with the policies and procedures of the service
- completing and signing the authorised nominee section (refer to *Definitions*) of their child's enrolment form (refer to *Enrolment and Orientation Policy*) before their child commences at the service
- signing and dating permission forms for excursions
- signing the attendance record (refer to *Definitions*) as their child arrives at and departs from the service
- providing written authorisation where children require medication to be administered by educators/staff, and signing and dating it for inclusion in the child's medication record (refer to *Definitions*).

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

ADMINISTRATION OF FIRST AID POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide guidelines for the administration of first aid at Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children, educators, staff and others attending the service
- providing a clear set of guidelines in relation to the administration of first aid at the service
- ensuring that the service has the capacity to deliver current approved first aid, as required.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of [Service Name], including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

First aid can save lives and prevent minor injuries or illnesses from becoming major ones. The capacity to provide prompt basic first aid is particularly important in the context of an early childhood service where staff have a duty of care and obligation to assist children who are injured, become ill or require support with administration of medication.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. The *Education and Care Services National Regulations 2011* state that an Approved Provider must ensure that at least one educator with current approved first aid qualifications is in attendance and immediately available at all times that children are being educated and cared for by the service. Under the *Education and Care Services National Law Act 2010*, the Australian Children's Education and Care Quality Authority (ACECQA) are required to publish lists of approved first aid qualifications. These lists are available at: www.acecqa.gov.au/qualifications/approved-first-aid-qualifications. As a demonstration of duty of care and best practice ELAA recommends **all educators** have current approved first aid qualifications.

It is also a requirement that employers have appropriate first aid arrangements in place, including first aid training, first aid kits and first aid facilities, to meet their obligations under the *Occupational Health and Safety Act 2004*. WorkSafe Victoria has developed a compliance code

First aid in the workplace (refer to *Sources*) that provides guidance on how these obligations can be met.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Child Wellbeing and Safety Act 2005* (Vic) (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2010*: Sections 167, 169
- *Education and Care Services National Regulations 2011*: Regulations 87, 89, 136, 137(1)(e), 168(2)(a), 245
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.3: Each child is protected
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *Occupational Health and Safety Act 2004*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved first aid qualification: A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: www.cecqa.gov.au

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from: <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

First aid: The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website: www.cecqa.gov.au/qualifications/approved-first-aid-qualifications

First aid kit: The Compliance Code *First aid in the workplace*, developed by WorkSafe Victoria, lists the minimum requirements for a first aid kit. *First aid in the workplace* is available at: www.worksafe.vic.gov.au

Incident, Injury, Trauma and Illness Record: Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. Any incident,

injury, trauma or illness must be recorded as soon as is practicable but not later than 24 hours after the occurrence. Details required include the:

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

These details need to be kept for the period of time specified in Regulation 183. A sample *Incident, Injury, Trauma and Illness Record* is available on the ACECQA website.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

Resuscitation flowchart: Outlines the six steps involved in resuscitation: danger, response, airways, breathing, compression and defibrillation. The Australian Resuscitation Council provides flowcharts for the resuscitation of adults and children free of charge at: www.resus.org.au/flowcharts.htm

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

SOURCES AND RELATED POLICIES

Sources

- Ambulance Victoria: www.ambulance.vic.gov.au
- Australian Children's Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- Australian Red Cross: www.redcross.org.au
- St John Ambulance Australia (Vic): www.stjohnvic.com.au
- *First aid in the workplace*: www.worksafe.vic.gov.au

Service policies

- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Dealing with Infectious Diseases Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Emergency and Evacuation Policy*
- *Epilepsy Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that every reasonable precaution is taken to protect children at the service from harm and hazards that are likely to cause injury (Section 167)
- assessing the first aid requirements for the service. A first aid risk assessment can assist with this process
- ensuring that at least one educator with current approved first aid qualifications (refer to *Definitions*) is in attendance and immediately available at all times that children are being educated and cared for by the service (Regulation 136(1)(a)). This can be the same person who has anaphylaxis management training and emergency asthma management training, also required under the Regulations
- appointing an educator to be the **nominated first aid officer**. This is a legislative requirement where there are 10 or more employees but is also considered best practice where there are fewer than 10 employees
- advising families that a list of first aid and other health products used by the service is available for their information, and that first aid kits can be inspected on request
- providing and maintaining an appropriate number of up-to-date, fully-equipped first aid kits that meet Australian Standards (refer to *Definitions*). The appropriate number of kits will depend on the number of children in the service, the number of rooms and their proximity to each other, and distances from outdoor spaces to the nearest kit
- ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101)
- providing and maintaining a portable first aid kit that can be taken offsite for excursions and other activities
- ensuring that first aid training details are recorded on each staff member's record
- ensuring safety signs showing the location of first aid kits are clearly displayed

- ensuring there is an induction process for all new staff, casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements
- ensuring that parents are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at the service and recording details on the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*)
- ensuring that staff are offered support and debriefing following a serious incident requiring the administration of first aid (refer to *Incident, Injury, Trauma and Illness Policy*)
- ensuring a resuscitation flow chart (refer to *Definitions*) is displayed in a prominent position in the indoor and outdoor environments of the service
- keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.

The Nominated Supervisor is responsible for:

- ensuring that every reasonable precaution is taken to protect children at the service from harm and hazards that are likely to cause injury (Section 167)
- ensuring that the prescribed educator-to-child ratios are met at all times (refer to *Supervision of Children Policy*)
- ensuring that all educators' approved first aid qualifications, anaphylaxis management training and emergency asthma management training are current, meet the requirements of the National Act (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA (refer to *Sources*)
- ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101)
- ensuring a portable first aid kit is taken on all excursions and other offsite activities (refer to *Excursions and Service Events Policy*)
- ensuring that the Ambulance Victoria *AV How to Call Card* (refer to *Sources*) is displayed near all telephones.

The nominated first aid officer is responsible for:

- maintaining a current approved first aid qualification (refer to *Definitions*)
- monitoring the contents of all first aid kits and arranging with the Approved Provider for replacement of stock, including when the use-by date has been reached
- disposing of out-of-date materials appropriately
- ensuring a portable first aid kit is taken on all excursions and other offsite activities (refer to *Excursions and Service Events Policy*)
- keeping up to date with any changes in the procedures for the administration of first aid.

Certified Supervisors and other educators are responsible for:

- implementing appropriate first aid procedures when necessary
- maintaining current approved first aid qualifications, and qualifications in anaphylaxis management and emergency asthma management, as required
- practicing CPR and administration of an auto-injector at least annually (in accordance with other service policies)

- ensuring that all children are adequately supervised (refer to the *Supervision of Children Policy*) while providing first aid and comfort for a child involved in an incident or suffering trauma
- ensuring that the details of any incident requiring the administration of first aid are recorded on the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*)
- notifying the Approved Provider or Nominated Supervisor six months prior to the expiration of their first aid, asthma or anaphylaxis accredited training
- conducting a risk assessment prior to an excursion to identify risks to health, safety or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101).

Parents/guardians are responsible for:

- providing the required information for the service’s medication record (refer to *Definitions*)
 - providing written consent (via the enrolment record) for service staff to administer first aid and call an ambulance, if required
 - being contactable, either directly or through emergency contacts listed on the child’s enrolment record, in the event of an incident requiring the administration of first aid.
- Volunteers and students, while at the service, are responsible for following this policy and its procedures.*

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly check staff files to ensure details of approved first aid qualifications have been recorded and are current
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- review the first aid procedures following an incident to determine their effectiveness
- regularly seek feedback from the nominated first aid officer and everyone affected by the policy regarding its effectiveness
- keep the policy up to date with current legislation, research, policy and best practice
- consider the advice of relevant bodies or organisations such as Australian Red Cross and St John Ambulance when reviewing this policy
- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2017

ADMINISTRATION OF MEDICATION POLICY

Best Practice – Quality Area 2

PURPOSE

This policy will clearly define the:

- procedures to be followed when a child requires medication while attending Rolling Hills Preschool
- responsibilities of educators, parents/guardians and the Approved Provider to ensure the safe administration of medication at Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children, educators, staff and other persons attending the service
- responding immediately to the needs of a child who is ill or becomes ill while attending the service
- ensuring safe and appropriate administration of medication in accordance with legislative and regulatory requirements.

SCOPE

This policy covers the administration of both prescribed and non-prescribed medication at Rolling Hills Preschool, including during offsite excursions and activities.

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Medication (including prescription, non-prescription, over-the-counter and homeopathic medications) must not be administered to a child at a service without the authorisation of a parent/guardian or person with the lawful authority to consent to the administration of medical attention to the child. In the case of an emergency, it is acceptable to obtain verbal consent from a parent/guardian, or to obtain consent from a registered medical practitioner or medical emergency services if the child's parent/guardian cannot be contacted. In the case of an anaphylaxis or asthma emergency, medication may be administered to a child without authorisation following the direction of the child's medical management plan. In this

circumstance, the child's parent/guardian and/or emergency services must be contacted as soon as possible (Regulation 94)¹. When educators are required to administer medication, they must abide by specific regulatory requirements, such as written consent, and must follow the guidelines of this policy and the procedures outlined in Procedures for the safe administration of medication.

A medication record² must be completed with the following information:

- h) the name of the child the authorisation to administer medication (including self-administration, if applicable) signed by a parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication
- i) the name of the medication to be administered
- j) the time and date the medication was last administered
- k) the time and date or the circumstances under which the medication should be next administered
- l) the dosage of the medication to be administered
- m) the manner in which the medication is to be administered
- n) if the medication is administered to the child:
 - i) the dosage that was administered
 - ii) the manner in which the medication was administered
 - iii) the time and date the medication was administered
 - iv) the name and signature of the person who administered the medication
 - v) the name and signature of the person who checked the dosage, if another person is required under Regulation 95 to check the dosage and administration of the medication.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
 - Specific Regulations: 92, 93, 94, 95, 96
 - Related Regulations: 90, 91, 160, 161, 162, 168, 177, 178, 181–184
- *Health Records Act 2001 (Vic)*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
 - Standard 2.1: Each child's health is promoted
 - Elements 2.1.1 and 2.1.4
- *Occupational Health and Safety Act 2004 (Vic)*

¹ Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011, p.63

² A template of a medication record can be downloaded from: www.acecqa.gov.au

- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)
- *Therapeutic Goods Act 1989* (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

Approved first aid qualification: A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: www.cecqa.gov.au

Illness: Any sickness and/or associated symptoms that affect the child’s normal participation in the activities or program at the service.

Infectious disease: A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

Injury: Any harm or damage to a person.

Medication (prescribed): Medicine, as defined in the *Therapeutic Goods Act 1989* (Cth), that is:

- authorised by a health care professional
- dispensed by a health care professional with a printed label that includes the name of the child being prescribed the medication, the medication dosage and expiry date.

Medication (non-prescribed): Over-the-counter medication, including vitamins and cultural herbs or homeopathic medications that may have been recommended by an alternative health care professional such as a naturopath.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child’s name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

SOURCES AND RELATED POLICES

Sources

- VMIA Insurance Guide, Community Service Organisations program: www.vmia.vic.gov.au
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* (ACECQA, Oct 2011)
- *Guide to the National Quality Standard* (ACECQA, Oct 2011)

- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition, 2013) National Health and Medical Research Council: <http://www.nhmrc.gov.au/guidelines/publications/ch55>
- Anaphylaxis Australia: <http://www.allergyfacts.org.au/>
- Asthma Australia: www.asthmaaustralia.org.au
- The Asthma Foundation of Victoria: www.asthma.org.au or phone (03) 9326 7088 or 1800 645 130 (toll free)
- Health direct Australia: www.healthdirect.gov.au
- Immunise Australia Program: www.immunise.health.gov.au
- National Health and Medical Research Council (NHMRC): www.nhmrc.gov.au
- NPS Medicine Wise: www.nps.org.au

Service policies

- *Asthma Policy*
- *Dealing with Medical Conditions Policy*
- *Administration of First Aid Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Anaphylaxis Policy*
- *Dealing with Infectious Diseases Policy*
- *Privacy and Confidentiality Policy*
- *Enrolment and Orientation Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that medication is not administered to a child being educated and cared for by the service unless it is authorised, and the medication is administered in accordance with the procedures prescribed in Regulation 95
- ensuring that if a child over preschool age at the service is permitted to self-administer medication (Regulation 96), an authorisation for the child to self-administer medication is recorded in the medication record for the child
- ensuring that a medication record that meets the requirements set out in Regulation 92(3) is available at all times for recording the administration of medication to children at the service (Regulation 92). (Refer to the template *Medication Record* (p.171) in the *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* or visit: www.acecqa.gov.au ensuring that parents/guardians are given written notice as soon as is practicable if medication has been administered in an emergency and where authorisation has been given verbally (Regulation 93(2))
- ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency (Regulation 94(2))

- ensuring that at least one educator on duty has a current approved first aid qualification (Regulation 136). (Note: this is a minimum requirement. As a demonstration of duty of care and best practice, ELAA recommends that **all educators** have current approved first aid qualifications.)
- developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions
- ensuring that all educators are familiar with the procedures for the administration of medication
- ensuring that medication records are kept and stored securely until the end of 3 years after the last date on which the child was educated and cared for by the service (Regulation 183(2)(d))

The Nominated Supervisor is responsible for:

- ensuring that medication is only given to a child where authorisation has been provided, and medication is administered in accordance with legislation and this policy (Regulation 93(3))
- ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency (Regulation 94(2))
- ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)
- being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical management plans are completed and attached to the child's enrolment form, and displayed for use by those caring for children (being sensitive to privacy requirements)
- documenting situations in which an authorised person has provided verbal authorisation but has refused to confirm the authorisation in writing (these notes are to be kept with the child's enrolment record)
- informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose as prescribed in the medication record, staff forgot to administer the medication or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs
- informing parents/guardians that non-prescribed medication (with the exception of sunscreen) will only be administered for a maximum of 48 hours, after which a medical management plan from a doctor will be required for its continued use
- informing parents/guardians that paracetamol is not supplied by Rolling Hills Preschool and that the administration of paracetamol will be in line with the administration of all other medication

Certified Supervisors and other educators are responsible for:

- ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who has lawful authority to request and permit the administration of medication to the child (Regulation 160(3)(iv))
- administering medication in accordance with Regulation 95 and the guidelines set out in Procedures for the safe administration of medication
- communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities when requesting medication be administered to their child, and making the medication record available for parents/guardians to record information during operational hours
- ensuring that all details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- obtaining verbal authorisation for the administration of medication from the child's parents/guardians/authorised person (as recorded in the child's enrolment record), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency (Regulation (93)(5)(b))
- ensuring that two staff members, one of whom must be an educator, are present when verbal permission to administer medication is received, and that details of this verbal authorisation are completed in the medication record
- ensuring that verbal permission is followed up with a written authorisation as soon as is practicable
- ensuring that parents/guardians take all medication home at the end of each session/day.

Parents/guardians are responsible for:

- ensuring that any medication to be administered is recorded in the medication record kept at the service premises
- providing a current medical management plan when their child requires long-term treatment of a condition that includes medication, or their child has been prescribed medication to be used for a diagnosed condition in an emergency
- ensuring that the details of authorised persons are kept up to date in the child's enrolment form
- ensuring that prescribed medications to be administered at the service are provided in their original container with the label intact, bearing the child's name, dosage, instructions and the expiry date (Regulation 95(a)(i))
- ensuring that prescribed medications to be administered at the service are within their expiry date
- physically handing the medication to a staff member and informing them of the appropriate storage and administration instructions for the medication provided
- clearly labelling non-prescription medications and over-the-counter products (for example sun block and nappy cream) with the child's name. The instructions and use-by dates must also be visible

- ensuring that no medication or over-the-counter products are left in their child's bag or locker
- taking all medication home at the end of each session/day
- informing the service if any medication has been administered to the child before bringing them to the service, and if the administration of that medication is relevant to or may affect the care provided to the child at the service
- ensuring that their child's enrolment details are up to date, and providing current details of persons who have lawful authority to request or permit the administration of medication.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2017

ANAPHYLAXIS POLICY

Mandatory – Quality Area 2

Rolling Hills Preschool and ELAA acknowledge the contribution of the Department of Allergy and Immunology at The Royal Children’s Hospital Melbourne, Allergy & Anaphylaxis Australia Inc and Department of Education and Training (DET) in the development of this policy.

PURPOSE

This policy will provide guidelines to:

- minimise the risk of allergic reaction resulting in anaphylaxis occurring while children are in the care of Rolling Hills Preschool
- ensure that service staff respond appropriately to anaphylaxis by following the child’s ASCIA action plan for anaphylaxis
- raise awareness of anaphylaxis and its management amongst all at the service through education and policy implementation.

This policy should be read in conjunction with the Dealing with Medical Conditions Policy.

POLICY STATEMENT

VALUES

Rolling Hills Preschool believes that the safety and wellbeing of children who are at risk of anaphylaxis is a whole-of-community responsibility, and is committed to:

- providing a safe and healthy environment in which children at risk of anaphylaxis can participate fully in all aspects of the program
- raising awareness of families, staff, children and others attending the service about allergies and anaphylaxis
- actively involving the parents/guardians of each child at risk of anaphylaxis in assessing risks, and in developing risk minimisation and risk management strategies for their child
- ensuring all staff members and other adults at the service have adequate knowledge of allergies, anaphylaxis and emergency procedures
- facilitating communication to ensure the safety and wellbeing of children at risk of anaphylaxis.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool. This policy will apply regardless of whether a child diagnosed by a registered medical practitioner as being at risk of anaphylaxis is enrolled at the service.

BACKGROUND AND LEGISLATION

Background

Anaphylaxis is a severe and potentially life-threatening allergic reaction. Up to two per cent of the general population and up to ten per cent of children are at risk. The most common causes of allergic reaction in young children are eggs, peanuts, tree nuts, cow's milk, fish, shellfish, soy, wheat and sesame, bee or other insect stings, and some medications. A reaction can develop within minutes of exposure to the allergen and young children may not be able to identify or articulate the symptoms of anaphylaxis. With planning and training, a reaction can be treated effectively by using an adrenaline autoinjector, often called an EpiPen® or an Anapen®.

In any service that is open to the general community it is not possible to achieve a completely allergen-free environment. A range of procedures and risk minimisation strategies, including strategies to minimise the presence of allergens in the service, can reduce the risk of anaphylactic reactions.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. The Approved Provider will ensure that there is at least one educator on duty at all times who has current approved anaphylaxis management training in accordance with the *Education and Care Services National Regulations 2011* (Regulation 136(1)(b)). As a demonstration of duty of care and best practice, ELAA recommends all educators have current approved anaphylaxis management training (refer to *Definitions*).

Approved anaphylaxis management training is listed on the ACECQA website (refer to *Sources*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 167, 169
- *Education and Care Services National Regulations 2011*: Regulations 90–96, 102, 136, 137, 146, 147, 160–162, 168(2)(d), 173, 177, 181, 183, 184, 246
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted
 - Element 2.1.1: Each child's health needs are supported
 - Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
 - Standard 2.3: Each child is protected
 - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Occupational Health and Safety Act 2004* (Vic)
- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Public Health and Wellbeing Act 2008* (Vic)

- *Public Health and Wellbeing Regulations 2009 (Vic)*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Adrenaline autoinjector: An intramuscular injection device containing a single dose of adrenaline designed to be administered by people who are not medically trained. This device is commonly called an EpiPen® or an Anapen®. As EpiPen® and Anapen® products have different administration techniques, only one brand should be prescribed per individual and their ASCIA action plan for anaphylaxis (refer to *Definitions*) must be specific for the brand they have been prescribed.

Used adrenaline autoinjectors should be placed in a rigid sharps disposal unit or another rigid container if a sharps container is not available.

Adrenaline autoinjector kit: An insulated container with an unused, in-date adrenaline autoinjector, a copy of the child’s ASCIA action plan for anaphylaxis, and telephone contact details for the child’s parents/guardians, doctor/medical personnel and the person to be notified in the event of a reaction if the parents/guardians cannot be contacted. If prescribed, an antihistamine should also be included in the kit. Autoinjectors must be stored away from direct heat and cold.

Allergen: A substance that can cause an allergic reaction.

Allergy: An immune system response to something in the environment which is usually harmless, eg: food, pollen, dust mite. These can be ingested, inhaled, injected or absorbed.

Allergic reaction: A reaction to an allergen. Common signs and symptoms include one or more of the following:

- ***Mild to moderate signs & symptoms:***
 - hives or welts
 - tingling mouth
 - swelling of the face, lips & eyes
 - abdominal pain, vomiting and/or diarrhoea are mild to moderate symptoms, however these are severe reactions to insects.
- ***Signs & symptoms of anaphylaxis are:***
 - difficult/noisy breathing
 - swelling of the tongue
 - swelling/tightness in the throat
 - difficulty talking and/or hoarse voice
 - wheeze or persistent cough

- o persistent dizziness or collapse (child pale or floppy).

Anapen®: A type of adrenaline autoinjector (refer to *Definitions*) containing a single dose of adrenaline. The administration technique in an Anapen® is different to that of the EpiPen®. Two strengths are available: an Anapen® and an Anapen Jr®, and each is prescribed according to a child's weight. The Anapen Jr® is recommended for a child weighing 10–20kg. An AnaPen® is recommended for use when a child weighs more than 20kg. The child's ASCIA action plan for anaphylaxis (refer to *Definitions*) must be specific for the brand they have been prescribed.

Anaphylaxis: A severe, rapid and potentially life threatening allergic reaction that affects normal functioning of the major body systems, particularly the respiratory (breathing) and/or circulation systems.

Anaphylaxis management training: Training that includes recognition of allergic reactions, strategies for risk minimisation and risk management, procedures for emergency treatment and facilitates practise in the administration of treatment using an adrenaline autoinjector (refer to *Definitions*) trainer. Approved training is listed on the ACECQA website (refer to *Sources*).

Approved anaphylaxis management training: Training that is approved by the National Authority in accordance with Regulation 137(e) of the *Education and Care Services National Regulations 2011*, and is listed on the ACECQA website (refer to *Sources*).

ASCIA action plan for anaphylaxis: An individual medical management plan prepared and signed by the child's treating, registered medical practitioner that provides the child's name and confirmed allergies, a photograph of the child, a description of the prescribed anaphylaxis medication for that child and clear instructions on treating an anaphylactic episode. The plan must be specific for the brand of autoinjector prescribed for each child. Examples of plans specific to different adrenaline autoinjector brands are available for download on the Australasian Society of Clinical Immunology and Allergy (ASCIA) website:

www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis

At risk child: A child whose allergies have been medically diagnosed and who is at risk of anaphylaxis.

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned on 000. Once completed, this card should be kept within easy access of all service telephone/s. A sample card can be downloaded from: <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

Communication plan: A plan that forms part of the policy outlining how the service will communicate with parents/guardians and staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of anaphylaxis is enrolled at a service.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

EpiPen®: A type of adrenaline autoinjector (refer to *Definitions*) containing a single dose of adrenaline which is delivered via a spring-activated needle that is concealed until administration is required. Two strengths are available: an EpiPen® and an EpiPen Jr®, and each is prescribed

according to a child's weight. The EpiPen Jr[®] is recommended for a child weighing 10–20kg. An EpiPen[®] is recommended for use when a child weighs more than 20kg. The child's ASCIA action plan for anaphylaxis (refer to *Definitions*) must be specific for the brand they have been prescribed.

First aid management of anaphylaxis course: Accredited training in first aid management of anaphylaxis including competency in the use of an adrenaline autoinjector.

Intolerance: Often confused with allergy, intolerance is an adverse reaction to ingested foods or chemicals experienced by the body but not involving the immune system.

No food sharing: A rule/practice in which a child at risk of anaphylaxis only eats food that is supplied/permitted by their parents/guardians and does not share food with, or accept food from, any other person.

Nominated staff member: (In relation to this policy) a staff member nominated to be the liaison between parents/guardians of a child at risk of anaphylaxis and the Approved Provider. This person also checks regularly to ensure that the adrenaline autoinjector kit is complete and that the device itself is unused and in date, and leads practice sessions for staff who have undertaken anaphylaxis management training.

Risk minimisation: The practice of developing and implementing a range of strategies to reduce hazards for a child at risk of anaphylaxis, by removing, as far as is practicable, major allergen sources from the service.

Risk minimisation plan: A service-specific plan that documents a child's allergy, practical strategies to minimise risk of exposure to allergens at the service and details of the person/s responsible for implementing these strategies. A risk minimisation plan should be developed by the Approved Provider/Nominated Supervisor in consultation with the parents/guardians of the child at risk of anaphylaxis and service staff. The plan should be developed upon a child's enrolment or initial diagnosis, and reviewed at least annually and always on re-enrolment.

Staff record: A record which the Approved Provider of a centre-based service must keep containing information about the Nominated Supervisor, staff, volunteers and students at a service, as set out under Division 9 of the National Regulations.

SOURCES AND RELATED POLICIES

Sources

- ACECQA provides lists of approved first aid training, approved emergency asthma management training and approved anaphylaxis management training on their website: <http://acecqa.gov.au/qualifications/approved-first-aid-qualifications/>
- Allergy & Anaphylaxis Australia Inc is a not-for-profit support organisation for families of children with food-related anaphylaxis. Resources include a telephone support line and items available for sale including storybooks, and EpiPen[®] trainers: www.allergyfacts.org.au
- Australasian Society of Clinical Immunology and Allergy (ASCIA): www.allergy.org.au provides information and resources on allergies. Action plans for anaphylaxis can be downloaded from this site. Also available is a procedure for the First Aid Treatment for anaphylaxis. Contact details of clinical immunologists and allergy specialists are also provided.

- Department of Education and Training (DET) provides information related to anaphylaxis and anaphylaxis training:
<http://www.education.vic.gov.au/childhood/providers/health/Pages/anaphylaxis.aspx>
- Department of Allergy and Immunology at The Royal Children’s Hospital Melbourne (www.rch.org.au/allergy) provides information about allergies and services available at the hospital. This department can evaluate a child’s allergies and provide an adrenaline autoinjector prescription. Kids Health Info fact sheets are also available from the website, including the following:
 - *Allergic and anaphylactic reactions:*
www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=11148
 - *Autoinjectors (EpiPens) for anaphylaxis – an overview:*
www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=11121

The Royal Children's Hospital has been contracted by the Department of Education and Training (DET) to provide an Anaphylaxis Advice & Support Line to central and regional DET staff, school principals and representatives, school staff, children's services staff and parents/guardians wanting support. The Anaphylaxis Advice & Support Line can be contacted on 1300 725 911 or 9345 4235, or by email: carol.whitehead@rch.org.au

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Asthma Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Food Safety Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Nutrition and Active Play Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that an anaphylaxis policy, which meets legislative requirements and includes a risk minimisation plan and communication plan, is developed and displayed at the service, and reviewed regularly
- providing approved anaphylaxis management training (refer to *Definitions*) to staff as required under the National Regulations
- ensuring that at least one educator with current approved anaphylaxis management training (refer to *Definitions*) is in attendance and immediately available at all times the service is in operation (Regulations 136, 137)
- ensuring the Nominated Supervisor, educators, staff members, students and volunteers at the service are provided with a copy of the *Anaphylaxis Policy* and the *Dealing with Medical Conditions Policy*
- ensuring parents/guardians and others at the service are provided with a copy of the *Anaphylaxis Policy* and the *Dealing with Medical Conditions Policy* (Regulation 91)
- ensuring that staff practice administration of treatment for anaphylaxis using an adrenaline autoinjector trainer at least annually, and preferably quarterly, and that participation is documented on the staff record
- ensuring the details of approved anaphylaxis management training (refer to *Definitions*) are included on the staff record (refer to *Definitions*), including details of training in the use of an autoinjector (Regulations 146, 147)
- ensuring that parents/guardians or a person authorised in the enrolment record provide written consent to the medical treatment or ambulance transportation of a child in the event of an emergency (Regulation 161), and that this authorisation is kept in the enrolment record for each child
- ensuring that parents/guardians or a person authorised in the child's enrolment record provide written authorisation for excursions outside the service premises (Regulation 102) (refer to *Excursions and Service Events Policy*)
- identifying children at risk of anaphylaxis during the enrolment process and informing staff
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

In services where a child diagnosed as at risk of anaphylaxis is enrolled, the Approved Provider is also responsible for:

- displaying a notice prominently at the service stating that a child diagnosed as at risk of anaphylaxis is being cared for and/or educated by the service (Regulation 173(2)(f))
- ensuring the *Enrolment checklist for children diagnosed as at risk of anaphylaxis* is completed

- ensuring an ASCIA action plan for anaphylaxis, risk management plan and communications plan are developed for each child at the service who has been medically diagnosed as at risk of anaphylaxis, in consultation with that child's parents/guardians and with a registered medical practitioner
- ensuring that all children diagnosed as at risk of anaphylaxis have details of their allergy, their ASCIA action plan for anaphylaxis and their risk minimisation plan filed with their enrolment record (Regulation 162)
- ensuring a medication record is kept for each child to whom medication is to be administered by the service (Regulation 92)
- ensuring parents/guardians of all children at risk of anaphylaxis provide an unused, in-date adrenaline autoinjector at all times their child is attending the service. Where this is not provided, children will be unable to attend the service
- ensuring that the child's ASCIA action plan for anaphylaxis is specific to the brand of adrenaline autoinjector prescribed by the child's medical practitioner
- implementing a procedure for first aid treatment for anaphylaxis consistent with current national recommendations and ensuring all staff are aware of the procedure
- ensuring adequate provision and maintenance of adrenaline autoinjector kits (refer to *Definitions*)
- ensuring the expiry date of the adrenaline autoinjector is checked regularly and replaced when required and the liquid in the EpiPen/EpiPen Jnr is clear
- ensuring that a sharps disposal unit is available at the service for the safe disposal of used adrenaline autoinjectors
- implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of the child's allergies, this policy and its implementation
- identifying and minimising allergens (refer to *Definitions*) at the service, where possible
- ensuring measures are in place to prevent cross-contamination of any food given to children diagnosed as at risk of anaphylaxis (refer to *Nutrition and Active Play Policy* and *Food Safety Policy*)
- ensuring that children at risk of anaphylaxis are not discriminated against in any way
- ensuring that children at risk of anaphylaxis can participate in all activities safely and to their full potential
- immediately communicating any concerns with parents/guardians regarding the management of children diagnosed as at risk of anaphylaxis attending the service
- ensuring that medication is not administered to a child at the service unless it has been authorised and administered in accordance with Regulations 95 and 96 (refer to *Administration of Medication Policy* and *Dealing with Medical Conditions Policy*)
- ensuring that parents/guardians of a child and emergency services are notified as soon as is practicable if medication has been administered to that child in an anaphylaxis emergency without authorisation from a parent/guardian or authorised nominee (Regulation 94)

- ensuring that a medication record is kept that includes all details required by Regulation 92(3) for each child to whom medication is to be administered
- ensuring that written notice is given to a parent/guardian as soon as is practicable if medication is administered to a child in the case of an emergency
- responding to complaints and notifying Department of Education and Training, in writing and within 24 hours, of any incident or complaint in which the health, safety or wellbeing of a child may have been at risk
- displaying the Australasian Society of Clinical Immunology and Allergy (ASCIA) (refer to *Sources*) generic poster *Action Plan for Anaphylaxis* in key locations at the service
- displaying Ambulance Victoria's *AV How to Call Card* (refer to *Definitions*) near all service telephones
- complying with the risk minimisation procedures
- ensuring that educators/staff who accompany children at risk of anaphylaxis outside the service carry a fully equipped adrenaline autoinjector kit (refer to *Definitions*) along with the ASCIA action plan for anaphylaxis for each child diagnosed as at risk of anaphylaxis.

The Nominated Supervisor is responsible for:

- ensuring the *Enrolment checklist for children diagnosed as at risk of anaphylaxis* is completed
- ensuring that all educators' approved first aid qualifications, anaphylaxis management training and emergency asthma management training are current, meet the requirements of the National Act (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA (refer to *Sources*)
- ensuring that medication is not administered to a child at the service unless it has been authorised and administered in accordance with Regulations 95 and 96 (refer to *Administration of Medication Policy* and *Dealing with Medical Conditions Policy*)
- ensuring that parents/guardians of a child and emergency services are notified as soon as is practicable if medication has been administered to that child in an anaphylaxis emergency without authorisation from a parent/guardian or authorised nominee (Regulation 94)
- ensuring educators and staff are aware of the procedures for first aid treatment for anaphylaxis
- ensuring an adrenaline autoinjector kit (refer to *Definitions*) is taken on all excursions and other offsite activities (refer to *Excursions and Service Events Policy*)
- compiling a list of children at risk of anaphylaxis and placing it in a secure but readily accessible location known to all staff. This should include the ASCIA action plan for anaphylaxis for each child
- ensuring that all staff, including casual and relief staff, are aware of children diagnosed as at risk of anaphylaxis, their allergies and symptoms, and the location of their adrenaline autoinjector kits and ASCIA action plans for anaphylaxis

- ensuring measures are in place to prevent cross-contamination of any food given to children diagnosed as at risk of anaphylaxis (refer to *Nutrition and Active Play Policy* and *Food Safety Policy*)
- organising anaphylaxis management information sessions for parents/guardians of children enrolled at the service, where appropriate
- ensuring that all persons involved in the program, including parents/guardians, volunteers and students on placement are aware of children diagnosed as at risk of anaphylaxis
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including children diagnosed as at risk of anaphylaxis
- following the child's ASCIAS action plan for anaphylaxis in the event of an allergic reaction, which may progress to an anaphylactic episode
- practising the administration of an adrenaline autoinjector using an autoinjector trainer and 'anaphylaxis scenarios' on a regular basis, at least annually and preferably quarterly
- ensuring staff dispose of used adrenaline autoinjectors appropriately in the sharps disposal unit provided at the service by the Approved Provider
- ensuring that the adrenaline autoinjector kit is stored in a location that is known to all staff, including casual and relief staff, is easily accessible to adults both indoors and outdoors (not locked away) but inaccessible to children, and away from direct sources of heat and cold
- ensuring that parents/guardians or an authorised person named in the child's enrolment record provide written authorisation for children to attend excursions outside the service premises (Regulation 102) (refer to *Excursions and Service Events Policy*)
- providing information to the service community about resources and support for managing allergies and anaphylaxis
- complying with the risk minimisation procedures.

Certified Supervisors, other educators and staff are responsible for:

- reading and complying with the *Anaphylaxis Policy* and the *Dealing with Medical Conditions Policy*
- maintaining current approved anaphylaxis management qualifications (refer to *Definitions*)
- practising the administration of an adrenaline autoinjector using an autoinjector trainer and 'anaphylaxis scenarios' on a regular basis, at least annually and preferably quarterly
- ensuring they are aware of the procedures for first aid treatment for anaphylaxis
- completing the *Enrolment checklist for children diagnosed as at risk of anaphylaxis* with parents/guardians
- knowing which children are diagnosed as at risk of anaphylaxis, their allergies and symptoms, and the location of their adrenaline autoinjector kits and medical management action plans
- identifying and, where possible, minimising exposure to allergens (refer to *Definitions*) at the service

- following procedures to prevent the cross-contamination of any food given to children diagnosed as at risk of anaphylaxis (refer to *Nutrition and Active Play Policy* and *Food Safety Policy*)
- assisting with the development of a risk minimisation plan for children diagnosed as at risk of anaphylaxis at the service
- following the child's ASCIA action plan for anaphylaxis in the event of an allergic reaction, which may progress to an anaphylactic episode
- disposing of used adrenaline autoinjectors in the sharps disposal unit provided at the service by the Approved Provider
- following appropriate first aid procedures in the event that a child who has not been diagnosed as at risk of anaphylaxis appears to be having an anaphylactic episode
- informing the Approved Provider and the child's parents/guardians following an anaphylactic episode
- taking the adrenaline autoinjector kit (refer to *Definitions*) for each child at risk of anaphylaxis on excursions or to other offsite service events and activities
- providing information to the service community about resources and support for managing allergies and anaphylaxis
- complying with the risk minimisation procedures
- contacting parents/guardians immediately if an unused, in-date adrenaline autoinjector has not been provided to the service for a child diagnosed as at risk of anaphylaxis. Where this is not provided, children will be unable to attend the service
- discussing with parents/guardians the requirements for completing the enrolment form and medication record for their child
- consulting with the parents/guardians of children diagnosed as at risk of anaphylaxis in relation to the health and safety of their child, and communicating any concerns
- ensuring that children diagnosed as at risk of anaphylaxis are not discriminated against in any way and are able to participate fully in all activities.

Parents/guardians of a child at risk of anaphylaxis are responsible for:

- informing staff, either on enrolment or on initial diagnosis, of their child's allergies
- completing all details on the child's enrolment form, including medical information and written authorisations for medical treatment, ambulance transportation and excursions outside the service premises
- assisting the Approved Provider and staff to develop an anaphylaxis risk minimisation plan
- providing staff with an ASCIA action plan for anaphylaxis signed by a registered medical practitioner and with written consent to use medication prescribed in line with this action plan
- providing staff with an unused, in-date and complete adrenaline autoinjector kit

- ensuring that the child's ASCIA action plan for anaphylaxis is specific to the brand of adrenaline autoinjector prescribed by the child's medical practitioner
- regularly checking the adrenaline autoinjector's expiry date and colour of EpiPen adrenaline
- assisting staff by providing information and answering questions regarding their child's allergies
- notifying staff of any changes to their child's allergy status and providing a new anaphylaxis medical management action plan in accordance with these changes
- communicating all relevant information and concerns to staff, particularly in relation to the health of their child
- complying with the service's policy where a child who has been prescribed an adrenaline autoinjector is not permitted to attend the service or its programs without that device
- complying with the risk minimisation procedures
- ensuring they are aware of the procedures for first aid treatment for anaphylaxis.

Parents/guardians are responsible for:

- reading and complying with this policy and all procedures.
- bringing relevant issues and concerns to the attention of both staff and the Approved Provider

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- selectively audit enrolment checklists (for example, annually) to ensure that documentation is current and complete
- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle or following an anaphylactic episode at the service, or as otherwise required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2017

ACKNOWLEDGEMENT

This policy has been reviewed by the Department of Allergy and Immunology at The Royal Children's Hospital Melbourne on 25 February 2015.

ASTHMA POLICY

Mandatory – Quality Area 2

This policy was written in consultation with The Asthma Foundation of Victoria. The Foundation's *Asthma & the Child in Care Model Policy* has been incorporated into this policy by ELAA. For more detailed information, visit The Asthma Foundation of Victoria's website: www.asthma.org.au

PURPOSE

This policy will outline the procedures to:

- ensure educators, staff and parents/guardians are aware of their obligations and the best practice management of asthma at Rolling Hills Preschool
- ensure that all necessary information for the effective management of children with asthma enrolled at Rolling Hills Preschool is collected and recorded so that these children receive appropriate attention when required
- respond to the needs of children who have not been diagnosed with asthma and who experience breathing difficulties (suspected asthma attack) at the service.

This policy should be read in conjunction with the *Dealing with Medical Conditions Policy*.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children enrolled at the service
- providing an environment in which all children with asthma can participate to their full potential
- providing a clear set of guidelines and procedures to be followed with regard to the management of asthma
- educating and raising awareness about asthma among educators, staff, parents/guardians and any other person(s) dealing with children enrolled at the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

Asthma management should be viewed as a shared responsibility. While Rolling Hills Preschool recognises its duty of care towards children with asthma during their time at the service, the responsibility for ongoing asthma management rests with the child's family and medical practitioner.

BACKGROUND AND LEGISLATION

Background

Asthma is a chronic, treatable health condition that affects approximately one in 10 Australian children and is one of the most common reasons for childhood admission to hospital. With good asthma management, people with asthma need not restrict their daily activities. Community education assists in generating a better understanding of asthma within the community and minimising its impact.

Symptoms of asthma include wheezing, coughing (particularly at night), chest tightness, difficulty in breathing and shortness of breath, and symptoms may vary between children. It is generally accepted that children under six years of age do not have the skills and ability to recognise and manage their own asthma without adult assistance. With this in mind, a service must recognise the need to educate staff and parents/guardians about asthma and promote responsible asthma management strategies.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. The Approved Provider will ensure that there is at least one educator on duty at all times who has current approved emergency asthma management training in accordance with the *Education and Care Services National Regulations 2011* (Regulation 136(c)). As a demonstration of duty of care and best practice, ELAA recommends **all educators** have current approved emergency asthma management training (refer to *Definitions*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 167, 169, 174
- *Education and Care Services National Regulations 2011*: Regulations 90, 92, 93, 94, 95, 96, 136, 137
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted
 - Element 2.1.1: Each child's health needs are supported
 - Standard 2.3: Each child is protected
 - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Privacy Act 1988* (Cth)
- *Privacy and Data Protection Act 2014* (Vic)
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved Emergency Asthma Management (EAM) training: Training that is approved by the National Authority in accordance with Division 7 of the National Regulations, and is listed on the ACECQA website: <http://www.acecqa.gov.au>. EAM training provides knowledge about the underlying causes of asthma, asthma triggers, and the recognition and treatment of an asthma attack.

Asthma Friendly Children's Services Program: A program developed by The Asthma Foundation of Victoria to provide a safer environment for children in kindergarten, childcare, family day care and out-of-school hours care. This program also gives staff the confidence and skills to care for a child with asthma and gives parents/guardians peace of mind. To be recognised as an Asthma Friendly Children's Service, services must address and fulfil five essential criteria, which will be assessed by The Asthma Foundation of Victoria. Upon accreditation, the service will receive a certificate and window sticker. This accreditation is valid for three years.

Asthma Care Plan: A record of information on an individual child's asthma and its management, including contact details, what to do when the child's asthma worsens and the treatment to be administered in an emergency. An Asthma Care Plan template specifically for use in children's services can be downloaded from the *Resources* section of The Asthma Foundation of Victoria website: www.asthma.org.au

Asthma emergency: The onset of unstable or deteriorating asthma symptoms requiring immediate treatment with reliever medication.

Asthma first aid kit: Kits should contain:

- reliever medication
- 2 small volume spacer devices
- 2 compatible children's face masks (for children under the age of four)
- record form
- asthma first aid instruction card.

The Asthma Foundation of Victoria recommends that spacers and face masks are for single-use only. It is essential to have at least two spacers and two face masks in each first aid kit, and these should be replaced once used.

Asthma triggers: Things that may induce asthma symptoms, for example, pollens, colds/viruses, dust mites, smoke and exercise. Asthma triggers will vary from child to child.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the

medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

Metered dose inhaler (puffer): A common device used to administer reliever medication.

Puffer: The common name for a metered dose inhaler.

Reliever medication: This comes in a blue/grey metered dose inhaler containing salbutamol, a chemical used to relax the muscles around the airways to relieve asthma symptoms. This medication is always used in an asthma emergency. Reliever medication is commonly sold by pharmacies as Airomir, Asmol, or Ventolin.

Risk minimisation plan: Provides information about child-specific asthma triggers and strategies to avoid these in the service. A risk minimisation plan template specifically for use in children's services can be downloaded from the *Resources* section of The Asthma Foundation of Victoria website: www.asthma.org.au

Spacer device: A plastic chamber device used to increase the efficiency of delivery of reliever medication from a puffer. It should always be used in conjunction with a puffer device and may be used in conjunction with a face mask.

Staff record: Must be kept by the service and include details of the Nominated Supervisors, the educational leader, other staff members, volunteers and the Responsible Person. The record must include information about qualifications, training and details of the *Working with Children* Check (Regulations 146–149). A sample staff record is available on the ACECQA website: www.acecqa.gov.au

SOURCES AND RELATED POLICIES

Sources

- Asthma Australia: www.asthmaaustralia.org.au
- The Asthma Foundation of Victoria: www.asthma.org.au or phone (03) 9326 7088 or 1800 278 462 (toll free)
- Australian Children's Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*, ACECQA.

Service policies

- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Dealing with Medical Conditions Policy*
- *Emergency and Evacuation Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*.

PROCEDURES

The Approved Provider is responsible for:

- providing the Nominated Supervisor and all staff with a copy of the service's *Asthma Policy*, and ensuring that they are aware of asthma management strategies upon employment at the service
- providing approved Emergency Asthma Management (EAM) training (refer to *Definitions*) to staff as required under the National Regulations
- ensuring at least one staff member with current approved Emergency Asthma Management (EAM) training (refer to *Definitions*) is on duty at all times
- ensuring the details of approved Emergency Asthma Management (EAM) training (refer to *Definitions*) are included on the staff record (refer to *Definitions*)
- providing parents/guardians with a copy of the service's *Asthma Policy* upon enrolment of their child (Regulation 91)
- identifying children with asthma during the enrolment process and informing staff
- providing parents/guardians with an Asthma Care Plan (refer to *Definitions*) to be completed in consultation with, and signed by, a medical practitioner
- developing a Risk Minimisation Plan (refer to *Definitions*) for every child with asthma, in consultation with parents/guardians
- ensuring that all children with asthma have an Asthma Care Plan and Risk Minimisation Plan filed with their enrolment record
- ensuring a medication record is kept for each child to whom medication is to be administered by the service (Regulation 92)
- ensuring parents/guardians of all children with asthma provide reliever medication and a spacer (including a child's face mask, if required) at all times their child is attending the service
- implementing an asthma first aid procedure consistent with current national recommendations
- ensuring that all staff are aware of the asthma first aid procedure
- ensuring adequate provision and maintenance of asthma first aid kits (refer to *Definitions*)
- ensuring the expiry date of reliever medication is checked regularly and replaced when required, and that spacers and face masks are replaced after every use
- facilitating communication between management, educators, staff and parents/guardians regarding the service's *Asthma Policy* and strategies
- identifying and minimising asthma triggers (refer to *Definitions*) for children attending the service, where possible
- ensuring that children with asthma are not discriminated against in any way
- ensuring that children with asthma can participate in all activities safely and to their full potential

- immediately communicating any concerns with parents/guardians regarding the management of children with asthma at the service
- ensuring that the service meets the requirements to be recognised as an Asthma Friendly Children’s Service (refer to *Definitions*) with The Asthma Foundation of Victoria
- displaying Asthma Australia’s *Asthma First Aid* poster (refer to *Sources*) in key locations at the service
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- ensuring that when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable (Regulation 94)
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

The Nominated Supervisor is responsible for:

- ensuring that all educators’ approved first aid qualifications, anaphylaxis management training and Emergency Asthma Management (EAM) training are current, meet the requirements of the National Law (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- ensuring that when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable (Regulation 94)
- ensuring an asthma first aid kit (refer to *Definitions*) is taken on all excursions and other offsite activities (refer to *Excursions and Service Events Policy*)
- compiling a list of children with asthma and placing it in a secure, but readily accessible, location known to all staff. This should include the Asthma Care Plan for each child
- ensuring that induction procedures for casual and relief staff include information about children attending the service who have been diagnosed with asthma, and the location of their medication and action plans
- organising asthma management information sessions for parents/guardians of children enrolled at the service, where appropriate
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with asthma.

Certified Supervisor/s and other educators are responsible for:

- ensuring that they are aware of the service’s *Asthma Policy* and asthma first aid procedure

- ensuring that they can identify children displaying the symptoms of an asthma attack and locate their personal medication, Asthma Care Plans and the asthma first aid kit
- maintaining current approved Emergency Asthma Management (EAM) (refer to *Definitions*) qualifications
- identifying and, where possible, minimising asthma triggers (refer to *Definitions*) as outlined in the child's Asthma Care Plan
- taking the asthma first aid kit, children's personal asthma medication and Asthma Care Plans on excursions or other offsite events
- administering prescribed asthma medication in accordance with the child's Asthma Care Plan and the *Administration of Medication Policy* of the service
- developing a Risk Minimisation Plan (refer to *Definitions*) for every child with asthma in consultation with parents/guardians
- discussing with parents/guardians the requirements for completing the enrolment form and medication record for their child
- consulting with the parents/guardians of children with asthma in relation to the health and safety of their child, and the supervised management of the child's asthma
- communicating any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- ensuring that children with asthma are not discriminated against in any way
- ensuring that children with asthma can participate in all activities safely and to their full potential.

Parents/guardians are responsible for:

- reading the service's *Asthma Policy*
- informing staff, either on enrolment or on initial diagnosis, that their child has asthma
- providing a copy of their child's Asthma Care Plan to the service and ensuring it has been prepared in consultation with, and signed by, a medical practitioner. The Asthma Care Plan should be reviewed and updated at least annually
- ensuring all details on their child's enrolment form and medication record (refer to *Definitions*) are completed prior to commencement at the service
- working with staff to develop a Risk Minimisation Plan (refer to *Definitions*) for their child
- providing an adequate supply of appropriate asthma medication and equipment for their child at all times and ensuring it is appropriately labelled with the child's name
- notifying staff, in writing, of any changes to the information on the Asthma Care Plan, enrolment form or medication record
- communicating regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma
- encouraging their child to learn about their asthma, and to communicate with service staff if they are unwell or experiencing asthma symptoms.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015

REVIEW DATE: 10/SEPTEMBER/2017

CHILD SAFE (FORMERLY CHILD PROTECTION) POLICY

Mandatory – Quality Area 2

PURPOSE

This policy provides a clear set of guidelines and procedures for Rolling Hills Preschool to:

- provide a safe environment for all children which promotes their health, safety and wellbeing
- promote an organisational culture of child safety
- identify, reduce and remove risks of child abuse
- intervene when a child may be at risk of abuse or neglect
- make staff aware of their legal and duty of care obligations in reporting child abuse and neglect
- inform all other policies, procedures and activity planning in addition to general occupational health and safety risks.

POLICY STATEMENT

VALUES

Rolling Hills Preschool:

- is committed to the rights of all children to feel safe, and be safe at all times, including:
 - promoting the cultural safety of Aboriginal children
 - promoting the cultural safety of children from culturally and linguistically diverse backgrounds
 - promoting the safety of children with a disability
- develops and maintain a culture in which children feel valued, respected and cared for
- fosters opportunities for each child to participate, express their views and to learn and develop
- always acts in the best interests of each child and has zero tolerance of child abuse
- takes all reasonable steps for each child's safety and wellbeing at all times
- actively manages the risks of abuse or harm to each child, including fulfilling our duty of care (refer to *Definitions*) and legal obligations to protect children and prevent any reasonable, foreseeable risk of injury or harm
- continuously improves the way our service prevents child abuse, and encourages reporting and improved responses to allegations of abuse.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, staff, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool, including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

The Approved Provider, Nominated Supervisor, staff, contractors and volunteers of early childhood services have legal and moral obligations to protect children under their supervision and care.

Duty of care obligations (refer to *Definitions*) relate to the high level of responsibility to protect children in the care of a service. Duty of care obligations apply to the Approved Provider and all staff members within any early childhood service and require that the Approved Provider and staff to take reasonable steps to protect children from injury that is reasonably foreseeable.

The Children, Youth and Families Act 2005 provides the legislative basis for the provision of services to vulnerable children, young people and their families, and places children's best interests at the heart of decision-making and service delivery.

Any person who forms a reasonable belief (refer to *Definitions*), that a child is in need of protection may report their concerns to the Child Protection (refer to *Definitions*).

Three **criminal offences** have been introduced in Victoria in the *Crimes Amendment (Protection of Children) Act 2014* to protect children from child abuse:

- **Failure to disclose:** All adults (not just those working with children) have a legal duty to report information about child sexual abuse to Victoria Police. The offence applies to any adult who forms a reasonable belief that a sexual offence has been committed by an adult against a child under 16 and fails to report that information to the Victoria Police.
- **Failure to protect:** The offence applies to people within organisations who hold positions of authority within an education and care service, such as the Approved Provider or the Nominated Supervisor, and who know of the substantial risk another adult associated with the organisation may commit a sex offence and they have the power or responsibility to remove or reduce the risk but negligently fail to do so.
- **Grooming offence:** The offence targets predatory conduct by an adult with the intent of committing child sexual abuse. Conduct may include communication, including online communication, with a child under the age of 16 or their parents.

Under section 182 of the *Children, Youth and Families Act 2005*, a person registered under the *Education Training and Reform Act 2006* (as amended in 2014), or who has been granted permission to teach under that Act, is designated as a mandatory reporter. Early childhood teachers are required to be registered with the Victorian Institute of Teaching and are classified as 'mandatory reporters'.

All mandatory reporters must make a report to Victoria Police and/or Child Protection (refer to *Definitions*) as soon as practicable if, during the course of their roles and responsibilities they form a reasonable belief that:

- A child is likely to suffer, or has suffered, significant harm as a result of physical abuse and/or sexual abuse, **and**
- The child's parents have not protected, or are unlikely protect, the child from harm of that type.

Victorian organisations that provide services to children are required under the *Child Safety and Wellbeing Act 2005* to ensure that they implement compulsory minimum Child Safe Standards to protect children from harm. The standards aim to drive continuous improvement in the way services prevent and report child abuse and respond to allegations of child abuse. Standard 2 requires services to have a child safe policy or statement of commitment to child safety.

Under the *Education and Care Services National Regulations 2011*, the Approved Provider must ensure that all educators and staff are familiar with current policies and procedures with regard to child safety and protection, including state and territory legislative responsibilities and their obligations under these laws (Regulation 84).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Children, Youth and Families Act 2005* (Vic)
- *Child Safety and Wellbeing Act 2005* (Vic)
- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- *Child Safe Standards* (Vic)
- *Crimes Amendment (Protection of Children) Act 2014* (Vic)
- *Education and Care Services National Law Act 2010* (Vic): Sections 165, 166, 167
- *Education and Care Services National Regulations 2011* (Vic): Regulations 84, 85, 86, 99, 100, 101, 102, 168(2)(h)
- *Education Training and Reform Act 2006* (Vic) (As amended in 2014)
- *Family Law Act 1975* (Cth)

- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.3: Each child is protected
 - Element 2.3.4: Educators, co-ordinators and staff members are aware of their roles and responsibilities to respond to every child at risk of abuse and neglect
- *Working with Children Act 2005* (Vic)
- *Working with Children Regulations 2006* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au>
- Commonwealth Legislation – Federal Register of Legislation: <https://www.legislation.gov.au>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Abuser: A person who mistreats and/or harms a child or young person.

Abuse: see Child abuse definition below.

Bullying: 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. Bullying occurs when one or more people deliberately and repeatedly upset or hurt another person, damage their property, reputation or social acceptance.

Child: In Victoria, under the *Children, Youth and Families Act 2005*, a child or young person is a person under 18 years of age.

Child abuse: (In the context of this policy) refers to an act or omission by an adult that endangers or impairs a child's physical and/or emotional health or development. Child abuse can be a single incident but often takes place over time. Abuse, neglect and maltreatment (refer to *Definitions*) are generic terms used to describe situations in which a child may need protection. Child abuse includes any and all of the following:

- **Physical abuse:** When a child suffers or is likely to suffer significant harm from an injury inflicted by a parent/guardian, caregiver or other adult. The injury may be inflicted intentionally, or be the consequence of physical punishment or the physically aggressive treatment of a child. Physical injury and significant harm to a child can also result from neglect by a parent/guardian, caregiver or other adult. The injury may take the form of bruises, cuts, burns or fractures, poisoning, internal injuries, shaking injuries or strangulation.
- **Sexual abuse:** When a person uses power or authority over a child, or inducements such as money or special attention, to involve the child in sexual activity. It includes a wide range of sexual behaviour from inappropriate touching/fondling of a child or exposing a child to pornography, to having sex with a child and grooming with the intent of committing child sexual abuse.
- **Emotional and psychological abuse:** When a child's parent or caregiver repeatedly rejects the child or uses threats to frighten the child. This may involve name calling, put downs or continual coldness from the parent or caregiver, to the extent that it significantly damages the child's physical, social, intellectual or emotional development.
- **Neglect:** The failure to provide a child with the basic necessities of life, such as food, clothing, shelter, medical attention or supervision, to the extent that the child's health and development is, or is likely to be, significantly harmed.

- **Domestic/family violence:** When children and young people witness or experience the chronic, repeated domination, coercion, intimidation and victimisation of one person by another through physical, sexual and/or emotional means within intimate relationships. Contrary to popular belief, witnessing episodes of violence between people they love can affect young children as much as if they were the victims of the violence. Children who witness regular acts of violence have greater emotional and behavioural problems than other children.
- **Racial, cultural, religious abuse:** Conduct that demonstrates contempt, ridicule, hatred or negativity towards a child because of their race, culture or religion. It may be overt, such as direct racial vilification or discrimination, or covert, such as demonstrating a lack of cultural respect (attitude and values) and awareness (knowledge and understanding) or failing to provide positive images about another culture.

Child FIRST: A Victorian community-based intake and referral service linked with Family Services. Child FIRST ensures that vulnerable children, young people and their families are effectively linked to relevant services, including Child Protection <http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/family-and-parenting-support/how-to-make-a-referral-to-child-first>.

Child sex offender: Someone who sexually abuses children, and who may or may not have prior convictions.

Child protection: The term used to describe the whole-of-community approach to the prevention of harm to children. It includes strategic action for early intervention, for the protection of those considered most vulnerable and for responses to all forms of abuse.

Child Protection Service (also referred to as Child Protection): The statutory child protection service provided by the Victorian Department of Health and Human Services, to protect children and young people at risk of abuse and neglect. This service also works closely with Family Services (including Child FIRST) to support the assessment and engagement of vulnerable children and families in community-based services. <http://www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-protection>.

Code of conduct: A set of rules or practices that establish a standard of behaviour to be followed by individuals and organisations. A code of conduct defines how individuals should behave towards each other and towards other organisations and individuals in the community (refer to *Code of Conduct Policy*).

Contractor: A person or company that undertakes a contract to provide materials or labour to perform a service or do a job. Examples include photographer, tradesperson, people contracted to provide an incursion.

Disclosure: (In the context of this policy) refers to a statement that a child or young person makes to another person that describes or reveals abuse.

Domestic/family violence: The repeated use of violent, threatening, coercive or controlling behaviour by an individual against a family member(s) or someone with whom they have or have had an intimate relationship, including carers.

Duty of care: A common law concept that refers to the responsibilities of organisations and staff to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury. In the context of this policy, duty of care refers to the responsibility of

education and care services and their staff to provide children with an adequate level of care and protection against foreseeable harm and injury.

Maltreatment: (In the context of this policy) refers to physical and/or emotional mistreatment, and/or lack of care of the child. Examples include sexual abuse, the witnessing of family violence and any non-accidental injury to a child.

Mandatory reporting: The legal obligation of certain professionals and community members to report when they believe, on reasonable grounds, that a child is in need of protection from harm. A broad range of professional groups are identified in the *Children, Youth and Families Act 2005* as 'mandatory reporters'. From 30 September 2015 this list includes early childhood teachers. Mandated staff members must make a report to Victoria Police and/or Child Protection as soon as is practicable if, during the course of acting out their professional roles and responsibilities, they form a belief on reasonable grounds (refer to *Definitions*) that:

- a child has suffered, or is likely to suffer, significant harm as a result of physical and/or sexual abuse (refer to *Definitions*) **and**
- the child's parents/guardians have not protected, or are unlikely to protect, the child from harm of that type.

Mandatory reporters must also follow processes for responding to incidents, disclosures or suspicions of child abuse to fulfil all their legal obligations (refer to Attachment 5: Processes for responding to and reporting suspected child abuse).

Neglect: see Child abuse definition above.

Negligence: Doing, or failing to do something that a reasonable person would, or would not do in a certain situation, and which causes another person damage, injury or loss as a result.

Notifiable complaint: A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DET within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). Written reports to DET must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted via the ACECQA portal using the appropriate forms at <http://acecqa.gov.au/notifications>. If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DET for confirmation.

Offender: A person who mistreats and/or harms a child or young person.

Perpetrator: A person who mistreats and/or harms a child or young person.

Reasonable belief/reasonable grounds: A person may form a belief on reasonable grounds that a child or young person is in need of protection after becoming aware that the child or young

person's health, safety or wellbeing is at risk and the child's parents/guardians are unwilling or unable to protect them. There may be reasonable grounds for forming such a belief if:

- a child or young person states that they have been physically or sexually abused
- a child or young person states that they know someone who has been physically or sexually abused (sometimes the child may be referring to themselves)
- someone who knows the child or young person states that the child or young person has been physically or sexually abused
- a child shows signs of being physically or sexually abused (see details in Appendix 2 of *Protecting the safety and wellbeing of children and young people* – refer to *Sources*)
- the person is aware of persistent family violence or parental substance misuse, psychiatric illness or intellectual disability or other factors that are impacting on the child or young person's safety, stability or development
- the person observes signs or indicators of abuse, including non-accidental or unexplained injury, persistent neglect, poor care or lack of appropriate supervision
- a child's/young person's actions or behaviour may place them at risk of significant harm and the parents/guardians are unwilling or unable to protect the child.

Serious incident: A serious incident is defined as (regulation 12):

- the death of a child -
 - while being 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 (examples include broken limbs or anaphylaxis reaction) attention of a registered medical practitioner; or
 - for which the child attended, or ought reasonably to have attended a hospital
- any incident where the attendance by emergency services at the education and care service premises was sought, or ought reasonably to have been sought
- any circumstances where a child being educated and cared for by an education and care service appears to be missing or cannot be accounted for;
 - appears to have been taken or removed from the education and care services premises in a manner that contravenes National Regulations;
 - is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

The Regulatory Authority must be notified of a serious incident (section 174(2)(a)) **in writing in the case of:**

- the death of a child, as soon as practicable but within 24 hours of the death, or the time that the person becomes aware of the death

- any other serious incident, within 24 hours of the incident or the time that the person becomes aware of the incident.

Written notification of serious incidents must be submitted via the ACECQA portal using the appropriate forms at <http://acecqa.gov.au/notifications>.

Volunteer: Parent/guardian, family member or community member who attends the service to assist the service in some capacity.

Voluntary (non-mandated) notification: A notification to the Child Protection Service by a person who believes that a child is in need of protection and is not mandated to make the notification. Section 183 of the *Children, Youth and Families Act 2005* states that any person who believes, on reasonable grounds, that a child is in need of protection, may notify a protective intervener of that belief and of the reasonable grounds that the belief is based on. Under this part of the Act, notifications are made out of moral obligation, rather than legislative obligation. The person making the notification is not expected to prove the abuse, and the law protects the anonymity of the person making the notification.

Young person: In Victoria, under the *Children, Youth and Families Act 2005*, a child or young person is a person under 18 years of age.

SOURCES AND RELATED POLICIES

Sources

- Australian Human Rights Commission: <https://www.humanrights.gov.au/>
- Betrayal of Trust Implementation: <http://www.justice.vic.gov.au/home/safer+communities/protecting+children+and+families/betrayal+of+trust+implementation>
- Better Health Channel: <https://www.betterhealth.vic.gov.au/>
- *Charter of Human Rights and Responsibilities Act 2006* (Vic): <http://www.legislation.vic.gov.au>
- *Choose With Care: Child Protection* – an information and training program: www.childwise.net
- Commission for Children and Young People (CCYP): <http://www.ccyp.vic.gov.au>
- National Children’s Commissioner: <http://www.dss.gov.au/our-responsibilities/families-and-children/publications-articles/national-children-s-commissioner>
- Palfrey, N & Harris, A. *Information for professionals on supporting children and families after a child has been abused*. Tipsheet produced by the Australian Child & Adolescent Trauma, Loss & Grief Network. Viewed at: <http://earlytraumagriev.anu.edu.au/files/profrespondchildabusetip.pdf>
- *Protecting children and young people from abuse is our responsibility* Department of Education and Training resources: <http://www.education.vic.gov.au/about/programs/health/protect/Pages/default.aspx>
- *Protecting the safety and wellbeing of children and young people* – A joint protocol of the Department of Human Services Child Protection, Department of Education and Training,

early childhood services and Victorian schools:

<http://www.education.vic.gov.au/childhood/providers/regulation/Pages/protectionprotocol.aspx>

- Safe Supportive Schools Community Working Group <http://www.bullyingnoway.gov.au>
- Service Agreement Information Kit for Funded Organisations: <http://www.dhs.vic.gov.au/facs/bdb/fmu/service-agreement>
- The United Nations Convention on the Rights of the Child: www.unicef.org/crc
- Victorian Institute of Teaching : www.vit.vic.edu.au
- *What is Child Abuse?*: www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/child-protection/what-is-child-abuse
- Working with Children (WWC) Check: www.justice.vic.gov.au/workingwithchildren

Service policies

- *Acceptance and Refusal of Authorisations Policy*
- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Delivery and Collection of Children Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Participation of Volunteers and Students Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*
- *Supervision of Children Policy*

RESPONSIBILITIES

The Approved Provider is responsible for:

- providing leadership in the development of an organisational culture of accountability for child safety which is open to scrutiny and is continuously reviewed and improved
- advising staff of current child protection legislation, and their legal and duty of care obligations (Regulation 84)
- undertaking child safety reviews to identify the potential for and respond to signs of child abuse at Rolling Hills Preschool in consultation with staff, parents/guardians and children (refer to Attachment 1 – Child safety review checklist)
- identifying and implementing appropriate programs and practices to support the implementation of the Child Safe Standards in consultation with staff, parents/guardians and children (refer to Attachment 2 – Implementation of Child Safe Standards)

- conducting recruitment and induction processes for staff in line with this policy (refer to Attachment 3 – Guidelines for the incorporation of child safety into staff recruitment and management)
- screening contractors, volunteers and students in line with their roles (refer to Attachment 4 – Guidelines for the incorporation of child safety into recruitment of contractors and volunteers)
- putting processes in place so that contractors, volunteers, students, parents/guardians and other visitors to the service are not left with sole supervision of individual children or groups of children
- developing and implementing procedures to prevent contact from occurring or responding if it has occurred, when the service has been notified of a court order prohibiting an adult from contacting an enrolled child
- ensuring educators, staff, and where appropriate, contractors, volunteers and students undertake appropriate training on child safety, including recognising the signs and symptoms of child abuse (refer to *Definitions*), knowing how to respond, and understanding responsibilities and processes for reporting (refer to Attachment 5 – Processes for responding to and reporting suspected child abuse)
- developing and monitoring procedures for reporting and responding to suspected child abuse or neglect which are promoted across the service and regularly reviewed in partnership with staff and parents/guardians, and where appropriate contractors, volunteers, students and children (refer to Attachment 5: Processes for responding to and reporting suspected child abuse)
- offering support to the child and their family, and to staff in response to concerns or reports relating to the health, safety and wellbeing of a child at Rolling Hills Preschool
- developing co-operative relationships with appropriate services and/or professionals (including Child FIRST) in the best interests of children and their families
- implementing reporting procedures and notifications when there are significant concerns for the health, safety or wellbeing of a child at the service (refer to Attachment 5 – Processes for responding to and reporting suspected child abuse)
- notifying DET within 24 hours of a serious incident (refer to *Definitions*) occurring at the service
- notifying DET within 24 hours in writing of becoming aware of a notifiable complaint (refer to *Definitions*) or allegation regarding the health, safety and/or welfare of a child at the service
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- implementing and reviewing this policy in consultation with staff, volunteers, parents/guardians, and children
- identifying and providing appropriate resources and training to assist staff, contractors, volunteers and students to implement this policy (refer to *Sources*)

- protecting the rights of children and families, and encouraging their participation in decision-making
- keeping staff, contractors, parents/guardian, volunteers and students informed of any relevant changes in legislation and practices in relation to this policy
- ensuring all staff, students, contractors, parents/guardians, volunteers and visitors abide by the *Code of Conduct Policy*
- ensuring an explicit statement of Rolling Hills Preschool's commitment to child safety is included in all advertising promotion for the organisation.

The Nominated Supervisor is responsible for:

- keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy
- supporting the implementation of the Child Safe Standards in Rolling Hills Preschool
- promoting the development of an organisational culture of accountability for child safety which is open to scrutiny and is continuously reviewed and improved
- identifying the potential for child abuse at Rolling Hills Preschool, and developing and implementing effective prevention strategies in consultation with the Approved Provider and staff (refer to Attachment 1 – Child safety review checklist and Attachment 2 – Implementation of Child Safe Standards)
- developing programs and supporting the implementation of the Child Safe Standards in consultation with the Approved Provider and other staff at the service (refer to Attachment 1 – Child safety review checklist and Attachment 2 – Implementation of Child Safe Standards)
- identifying and providing appropriate resources and training to assist staff, contractors, volunteers and students to implement this policy (refer to *Sources*)
- implementing reporting procedures where there are reasonable grounds (refer to *Definitions*) for believing that a child is at risk of child abuse (refer to Attachment 5 – Processes for responding to and reporting suspected child abuse)
- notifying the Approved Provider immediately on becoming aware of a concern, complaint or allegation regarding the health, safety and welfare of a child at Rolling Hills Preschool
- offering support to the child and their family, and to educators and staff in response to concerns or reports relating to the health, safety and wellbeing of a child at Rolling Hills Preschool
- making all staff aware of this policy, the Code of Conduct Policy and the Interactions with Children Policy and holding them to account for the behavioural expectations identified.
- implementing and reviewing this policy in consultation with the Approved Provider, educators, staff, contractors and parents/guardians and children
- planning so that no child is left alone (or is out of sight) with a contractor, volunteer, student, parent/guardian or visitor, at the service.

All staff are responsible for:

- fulfilling their legal responsibilities and duty of care to protect children safe and to maintain children's rights
- keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy
- contributing to an organisational culture of child safety
- identifying the potential for child abuse at Rolling Hills Preschool, and developing and implementing effective prevention strategies in consultation with the Approved Provider and the Nominated Supervisor (refer to Attachment 1 – Child safety review checklist and Attachment 2 – Implementation of Child Safe Standards)
- following processes for responding and reporting suspected child abuse (Attachment 5: Processes for responding to and reporting suspected child abuse)
- undertaking appropriate training on child protection, including recognising the signs and symptoms of child abuse (refer to *Definitions*), knowing how to respond, and understanding responsibilities and processes for reporting (refer to Attachment 5 – Processes for responding to and reporting suspected child abuse)
- identifying and implementing appropriate programs and practices to support the implementation of Child Safe Standards in consultation with the Approved Provider and Nominated Supervisor at the service (refer to Attachment 1 – Child safety review checklist and Attachment 2 – Implementation of Child Safe Standards)
- notifying the Nominated Supervisor or the Approved Provider immediately on becoming aware of any concerns, complaints or allegations regarding the health, safety and welfare of a child at Rolling Hills Preschool
- offering support to the child and their family in response to concerns or reports relating to the health, safety and wellbeing of a child at Rolling Hills Preschool
- co-operating with other services and/or professionals (including Child FIRST) in the best interests of children and their families
- informing families of support services available to them (such as Child FIRST), and of the assistance these services can provide
- conducting activities so that no child is left alone (or is out of sight) with a contractor, visitor, volunteer, student or parent/guardian at the service
- following the Rolling Hills Preschool's processes where the service has been notified of a court order prohibiting an adult from contacting an enrolled child
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- implementing and reviewing this policy in consultation with the Approved Provider and Nominated Supervisor
- educating and empowering children to talk about events and situations that make them feel uncomfortable
- ensuring that children at the service are not subjected to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances

- using appropriate resources and undertaking training to assist with the implementation of this policy (refer to *Sources*)
- abiding by the service's *Code of Conduct Policy* and *Interactions with Children Policy*.

Parents/guardians are responsible for:

- reading and complying with this policy
- reporting any concerns, including in relation to potential child abuse, to the appropriate child protection authorities or the police if immediate police attention is required
- abiding by the service's *Code of Conduct*.

Contactors, volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

To assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to child safety concerns
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures (Regulation 172(2)).

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 30/9/2016.

REVIEW DATE: 30/September/2019

DEALING WITH INFECTIOUS DISEASES POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide clear guidelines and procedures to follow when:

- a child attending Rolling Hills Preschool shows symptoms of an infectious disease
- a child at Rolling Hills Preschool has been diagnosed with an infectious disease
- managing and minimising the spread of infectious diseases, illnesses and infestations (including head lice)
- managing and minimising infections relating to blood-borne viruses.

Note: This policy includes information on child immunisation.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children, staff and any other persons attending the service
- responding to the needs of the child or adult who presents with symptoms of an infectious disease or infestation while attending the service
- complying with current exclusion schedules and guidelines set by the Department of Health
- providing up-to-date information and resources for families and staff regarding protection of all children from infectious diseases and blood-borne viruses, management of infestations and immunisation programs.

Rolling Hills Preschool supports the Immunise Australia Program and National Immunisation Program (NIP), which is currently recommended by the National Health and Medical Research Council (NHMRC) and supported by the Commonwealth Government. All educators/staff at Rolling Hills Preschool are committed to preventing the spread of vaccine-preventable diseases through simple hygiene practices such as hand washing, effective cleaning procedures, monitoring immunisation records and complying with recommended exclusion guidelines and timeframes for children and educators/staff.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others

attending the programs and activities of Rolling Hills Preschool, including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

Infectious diseases are common in children. Children are at a greater risk of exposure to infections in a children's service than at home due to the amount of time spent with a large number of other children. Infectious diseases are divided into four categories (A, B, C, D) on the basis of the method of notification and the information required. The Department of Health has developed a document, *Minimum Period of Exclusion from Primary Schools and Children's Services Centres for Infectious Diseases Cases and Contacts*, to assist in protecting the public by preventing, or containing, outbreaks of infectious conditions common in schools and other children's services and is regulated by the *Public Health and Wellbeing Regulations 2009*. An approved service must take reasonable steps to prevent the spread of infectious diseases at the service, and ensure that the parent/guardian, authorised nominee or emergency contact of each child enrolled at the service is notified of the occurrence of an infectious disease as soon as possible. The service must have policies and procedures in place for dealing with infectious diseases (Regulation 88). The service has a duty of care to ensure that everyone attending the service is provided with a high level of protection during all hours that the service is in operation. Protection can include:

- notifying children, families and educators/staff when an excludable illness/disease is detected at the service
- complying with relevant health department exclusion guidelines
- increasing educator/staff awareness of cross-infection through physical contact with others.

The Victorian Government offers an immunisation program for children to assist in preventing the spread of infectious diseases. A standard immunisation calendar is available at: www.health.vic.gov.au/immunisation/factsheets/schedule-victoria.htm. If an immunisation record cannot be provided at enrolment, the parent/guardian can access this information by requesting an immunisation history statement from:

- the Australian Childhood Immunisation Register, by calling 1800 653 809. This service is free of charge and it takes 7–10 working days to process a request
- any Medicare office.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011: Regulation 88*
- *Health Records Act 2001*
- *Information Privacy Act 2000 (Vic)*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*

- Standard 2.1: Each child’s health is promoted
 - Element 2.1.1: Each child’s health needs are supported
 - Element 2.1.3: Effective hygiene practices are promoted and implemented
 - Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
- Standard 2.3: Each child is protected
 - Element 2.3.1: Children are adequately supervised at all times
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
 - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
 - Standard 6.2: Families are supported in their parenting role and their values and beliefs about child rearing are respected
 - Standard 6.3: The service collaborates with other organisations and service providers to enhance children’s learning and wellbeing
- *Occupational Health and Safety Act 2004*
- *Privacy Act 1988 (Cth)*
- *Public Health and Wellbeing Act 2008*
- *Public Health and Wellbeing Regulations 2009*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Blood-borne virus (BBV): A virus that is spread when blood from an infected person enters another person’s bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral haemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risks of contracting a blood-borne virus are negligible.

Exclusion: Inability to attend or participate in the program at the service.

Illness: Any sickness and/or associated symptoms that affect the child’s normal participation in the program at the service.

Immunisation status: The extent to which a child has been immunised in relation to the recommended immunisation schedule.

Infection: The invasion and multiplication of micro-organisms in bodily tissue.

Infestation: The lodgement, development and reproduction of arthropods (such as head lice), either on the surface of the body of humans or animals, or in clothing.

Infectious disease: A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

Medication: Any substance, as defined in the *Therapeutic Goods Act 1989* (Cth), that is administered for the treatment of an illness or medical condition.

Pediculosis: Infestation of head lice that is transmitted by having head-to-head contact with another person who has head lice. Pediculosis does not contribute to the spread of any infectious diseases, and outbreaks of this condition are common in schools and childcare facilities.

Recommended minimum exclusion period: The period recommended by the Department of Health for excluding any person from attending a children's service to prevent the spread of infectious diseases through interpersonal contact. The exclusion period table, published by the Department of Health, can be accessed at (<http://docs.health.vic.gov.au/docs/doc/Minimum-Period-of-Exclusion-from-Primary-Schools-and-Childrens-Services-Centres-for-Infectious-Diseases-Cases-and-Contacts>)

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

SOURCES AND RELATED POLICIES

Sources

- Communicable Diseases Section, Public Health Group, Victorian Department of Human Services (2005) *The Blue Book: Guidelines for the control of infectious diseases*. Available at: <http://docs.health.vic.gov.au/docs/doc/The-blue-book>
- Communicable Disease and Prevention Control Unit: phone – 1300 651 160: <http://ideas.health.vic.gov.au> and infectious.diseases@health.vic.gov.au
- Communicable Disease Prevention and Control Unit, Department of Health (2010) *A guide for the management and control of gastroenteritis outbreaks in children's centres*. Victorian Government, Melbourne: [http://docs.health.vic.gov.au/docs/doc/412320256B5A9239CA2578A300265C25/\\$FILE/Industry-guide-Childcare-web.pdf](http://docs.health.vic.gov.au/docs/doc/412320256B5A9239CA2578A300265C25/$FILE/Industry-guide-Childcare-web.pdf)
- Department of Health: www.immunise.health.gov.au
- Department of Health, Victoria (2012) *Head lice management guidelines*: <http://docs.health.vic.gov.au/docs/doc/Head-lice-management-guidelines->
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*, ACECQA
- *Guide to the National Quality Standard*, ACECQA

- National Health and Medical Research Council (2013) *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition):
<http://www.nhmrc.gov.au/guidelines/publications/ch55>
- Victorian Department of Health: www.health.vic.gov.au/immunisation
- WorkSafe Victoria: *First aid in the workplace compliance code*

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Dealing with Medical Conditions Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that where there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))
- ensuring that where there is an occurrence of an infectious disease at the service, a parent/guardian or authorised emergency contact of each child at the service is notified of the occurrence as soon as is practicable (Regulation 88(2))
- ensuring that information from the Department of Health about the recommended minimum exclusion periods (refer to *Definitions*) is displayed at the service, is available to all stakeholders and is adhered to in the event of an outbreak of an infectious disease (as designated by the Department of Health – refer to *Definitions*) ensuring that the parent/guardian and Secretary³ are informed within 24 hours of becoming aware that an enrolled child is suffering from:
 - o) Pertussis, or
 - p) Poliomyelitis, or
 - q) Measles, or
 - r) Mumps, or
 - s) Rubella, or
 - t) Meningococcal C,
 as required under Regulation 84(1) of the *Public Health and Wellbeing Regulations 2009*

³ In practice, services should contact the Department of Health's Communicable Disease Prevention and Control Unit.

(Note: The Department of Health recommends that services inform the Communicable Disease Prevention and Control Unit – refer to *Sources* – if there is an outbreak of three or more cases of respiratory illness at the service within a 72 hour period, and/or if there is an outbreak of two or more cases of gastrointestinal illness in a 48 hour period.)

- ensuring that a child who is not immunised against a vaccine-preventable disease does not attend the service when an infectious disease is diagnosed, and does not return until there are no more occurrences of that disease at the service and the recommended minimum exclusion period (refer to *Definitions*) has ceased (Regulation 85(2) of the *Public Health and Wellbeing Regulations 2009*). Refer to the recommendations of the current exclusion period table.
- notifying DEECD within 24 hours of a serious incident (refer to *Definitions*), including when a child becomes ill at the service or medical attention is sought while the child is attending the service
- supporting the Nominated Supervisor and the educators/staff at the service to implement the requirements of the recommended minimum exclusion periods
- ensuring information about the National Immunisation Program (NIP) Schedule is displayed and is available to all stakeholders (refer to: www.health.vic.gov.au/immunisation/factsheets/schedule-victoria.htm)
- conducting a thorough inspection of the service on a regular basis, and consulting with educators/staff to assess any risks by identifying the hazards and potential sources of infection
- ensuring that the Nominated Supervisor, staff and everyone at the service adheres to the *Hygiene Policy* and the procedures for infection control relating to blood-borne viruses
- ensuring that appropriate and current information and resources are provided to educators/staff and parents/guardians regarding the identification and management of infectious diseases, blood-borne viruses and infestations
- keeping informed about current legislation, information, research and best practice
- ensuring that any changes to the exclusion table or immunisation schedule are communicated to educators/staff and parents/guardians in a timely manner.

The Nominated Supervisor is responsible for:

- notifying the Approved Provider immediately on becoming aware that an enrolled child is suffering from:
 - u) Pertussis, or
 - v) Poliomyelitis, or
 - w) Measles, or
 - x) Mumps, or
 - y) Rubella, or
 - z) Meningococcal C
- contacting the parents/guardians of a child suspected of suffering from an infectious or vaccine-preventable disease, or of a child not immunised against a vaccine-preventable

disease that has been detected at the service, and requesting the child be collected as soon as possible

- notifying a parent/guardian or authorised emergency contact person when a symptom of an excludable infectious illness or disease has been observed
- ensuring that a minimum of one educator with current approved first aid qualifications is in attendance and immediately available at all times the service is in operation (refer to *Administration of First Aid Policy*)
- establishing good hygiene and infection control procedures, and ensuring that they are adhered to by everyone at the service (refer to *Hygiene Policy*)
- ensuring the exclusion requirements for infectious diseases are adhered to as per the recommended minimum exclusion periods (refer to *Definitions*), notifying the Approved Provider and parents/guardians of any outbreak of infectious disease at the service, and displaying this information in a prominent position
- advising parents/guardians on enrolment that the recommended minimum exclusion periods will be observed in regard to the outbreak of any infectious diseases or infestations (refer to: <http://docs.health.vic.gov.au/docs/doc/Minimum-Period-of-Exclusion-from-Primary-Schools-and-Childrens-Services-Centres-for-Infectious-Diseases-Cases-and-Contacts>)
- advising the parents/guardians of a child who is not fully immunised on enrolment that they will be required to keep their child at home when an infectious disease is diagnosed at the service, and until there are no more occurrences of that disease and the exclusion period has ceased
- requesting that parents/guardians notify the service if their child has, or is suspected of having, an infectious disease or infestation
- providing information and resources to parents/guardians to assist in the identification and management of infectious diseases and infestations
- ensuring all families have completed a *Consent form to conduct head lice inspections* on enrolment
- conducting regular head lice inspections, at least once per term and whenever an infestation is suspected, which involves visually checking children's hair and notifying the Approved Provider and parents/guardians of the child if an infestation of head lice is suspected
- providing a *Head lice action form* to the parents/guardians of a child suspected of having head lice
- providing a head lice notification letter to all parents/guardians when an infestation of head lice has been detected at the service
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

Certified Supervisors and other educators are responsible for:

- encouraging parents/guardians to notify the service if their child has an infectious disease or infestation
- observing signs and symptoms of children who may appear unwell, and informing the Nominated Supervisor

- providing access to information and resources for parents/guardians to assist in the identification and management of infectious diseases and infestations
- monitoring that all parents/guardians have completed a *Consent form to conduct head lice inspections* on enrolment
- monitoring any symptoms in children that may indicate the presence of an infectious disease and taking appropriate measures to minimise cross-infection
- complying with the *Hygiene Policy* of the service and the procedures for infection control relating to blood-borne viruses
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

Parents/guardians are responsible for:

- keeping their child/ren at home if they are unwell or have an excludable infectious disease
- keeping their child/ren at home when an infectious disease has been diagnosed at the service and their child is not fully immunised against that infectious disease, until there are no more occurrences of that disease and the exclusion period has ceased
- informing the service if their child has an infectious disease or has been in contact with a person who has an infectious disease
- providing accurate and current information regarding the immunisation status of their child/ren when they enrol, and informing the service of any subsequent changes to this while they are enrolled at the service
- complying with the recommended minimum exclusion periods
- regularly checking their child's hair for head lice or lice eggs, regularly inspecting all household members, and treating any infestations as necessary
- notifying the service if head lice or lice eggs have been found in their child's hair and when treatment was commenced
- complying with the *Hygiene Policy* and the procedures for infection control relating to blood-borne viruses when in attendance at the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information related to infectious diseases on display and supplied to parents/guardians is current
- keep the policy up to date with current legislation, research, policy and best practice

- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2017

DEALING WITH MEDICAL CONDITIONS POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide guidelines for Rolling Hills Preschool to ensure that:

- clear procedures exist to support the health, wellbeing and inclusion of all children enrolled at the service
- service practices support the enrolment of children and families with specific health care requirements.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to recognising the importance of providing a safe environment for children with specific medical and health care requirements through implementing and maintaining effective hygiene practices. This will be achieved through:

- fulfilling the service's duty of care requirement under the *Occupational Health and Safety Act 2004*, the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011* to ensure that those involved in the programs and activities of [Service Name] are protected from harm
- informing educators, staff, volunteers, children and families of the importance of adhering to the *Dealing with Medical Conditions Policy* to maintain a safe environment for all users, and communicating the shared responsibility between all involved in the operation of the service
- ensuring that educators have the skills and expertise necessary to support the inclusion of children with additional health needs.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of [Service Name], including during offsite excursions and activities.

This policy should be read in conjunction with:

- Anaphylaxis Policy
- Asthma Policy
- Diabetes Policy
- Epilepsy Policy

BACKGROUND AND LEGISLATION

Background

An approved service must have a policy for managing medical conditions that includes the practices to be followed:

- in the management of medical conditions
- when parents are required to provide a medical management plan if an enrolled child has a specific health care need, allergy or relevant medical condition
- when developing a risk minimisation plan in consultation with the child's parents/guardians
- when developing a communication plan for staff members and parents/guardians.

Staff members and volunteers must be informed about the practices to be followed. If a child enrolled at the service has a specific health care need, allergy or other relevant medical condition, parents/guardians must be provided with a copy of this and other relevant policies.

Medication and medical procedures can only be administered to a child:

- with written authorisation from the parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication (Regulation 92(3)(b))
- with two adults in attendance, one of whom must be an educator. One adult will be responsible for the administration and the other adult will witness the procedure
- if the medication is in its original container bearing the child's name, dose and frequency of administration.

Refer to the *Administration of Medication Policy* for more information.

Staff may need additional information from a medical practitioner where the child requires:

- multiple medications simultaneously
- a specific medical procedure to be followed.

If a child with a chronic illness or medical condition that requires invasive clinical procedures or support is accepted by the service, it is vital that prior arrangements are negotiated with the parent/guardian, authorised nominees or appropriate health care workers to prepare for the event that the child will require a procedure while in attendance at the service. Parents/guardians and the service should liaise with either the child's medical practitioner or other appropriate service providers to establish such an arrangement. Arrangements must be formalised following enrolment and prior to the child commencing at the service.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Section 173
- *Education and Care Services National Regulations 2011*: Regulations 90, 91, 96
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted
 - Element 2.1.1: Each child's health needs are supported

- Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
 - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
 - Element 7.1.2: The induction of educators, co-ordinators and staff members is comprehensive
- *Occupational Health and Safety Act 2004 (Vic)*
- *Public Health and Wellbeing Act 2008 (Vic)*
- *Public Health and Wellbeing Regulations 2009 (Vic)*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from: <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

Communication plan: A plan that forms part of the policy and outlines how the service will communicate with parents/guardians and staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.

Hygiene: The principle of maintaining health and the practices put in place to achieve this.

Medical condition: In accordance with the *Education and Care Services National Regulations 2011*, the term medical condition includes asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis, and the management of such conditions.

Medical management plan: A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCI) Action Plan.

Risk minimisation: The implementation of a range of strategies to reduce the risk of an adverse affect from the mismanagement of a specific medical condition at the service.

Risk minimisation plan: A service-specific plan that details each child's medical condition, and identifies the risks of the medical condition and practical strategies to minimise those risks, and who is responsible for implementing the strategies. The risk minimisation plan should be developed by families of children with specific medical conditions that require medical management plans, in consultation with staff at the service upon enrolment or diagnosis of the condition.

SOURCES AND RELATED POLICIES

Sources

- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition, 2013) National Health and Medical Research Council:
<http://www.nhmrc.gov.au/guidelines/publications/ch55>

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011, p 62: www.acecqa.gov.au

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Dealing with Infectious Diseases Policy*
- *Diabetes Policy*
- *Epilepsy Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that all staff and volunteers are provided with a copy of this policy and have a clear understanding of the procedures and practices outlined within
- developing and implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of the child's specific health care need, allergy or other relevant medical condition, this policy and its implementation
- ensuring educators/staff receive regular training in managing the specific health care needs of children at the service including asthma, anaphylaxis, diabetes, epilepsy and other medical conditions. This includes training in the management of specific procedures that are required to be carried out for the child's wellbeing
- ensuring at least one educator/staff member who has current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times that children are being educated and cared for by the service
- establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy
- ensuring families and educators/staff understand and acknowledge each other's responsibilities under these guidelines

- ensuring families provide information on their child’s health, medications, allergies, their medical practitioner’s name, address and phone number, emergency contact names and phone numbers, and a medical management plan signed by their medical practitioner, following enrolment and prior to the child commencing at the service
- ensuring that a risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually
- ensuring that parents/guardians who are enrolling a child with specific health care needs are provided with a copy of this and other relevant service policies
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

The Nominated Supervisor is responsible for:

- implementing this policy at the service and ensuring that all educators/staff follow the policy and procedures set out within
- informing the Approved Provider of any issues that impact on the implementation of this policy
- ensuring that the *AV How to Call Card* (refer to *Definitions*) is displayed near all telephones
- identifying specific training needs of educators/staff who work with children diagnosed with a medical condition, and ensuring, in consultation with the Approved Provider, that educators/staff access appropriate training
- ensuring children do not swap or share food, food utensils or food containers
- ensuring food preparation, food service and relief staff are informed of children and staff who have specific medical conditions or food allergies, the type of condition or allergies they have, and the service’s procedures for dealing with emergencies involving allergies and anaphylaxis
- ensuring a copy of the child’s medical management plan is visible and known to staff in the service. Prior to displaying the medical management plan, the Nominated Supervisor must explain to parents/guardians the need to display the plan for the purpose of the child’s safety and obtain their consent (refer to *Privacy and Confidentiality Policy*)
- ensuring educators and other staff follow each child’s risk minimisation plan and medical management plan
- ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan
- providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service
- administering medications as required, in accordance with the procedures outlined in the *Administration of Medication Policy*
- maintaining ongoing communication between educators/staff and parents/guardians in accordance with the strategies identified in the communication plan, to ensure current information is shared about specific medical conditions within the service.

Certified Supervisors and other educators are responsible for:

- ensuring that children do not swap or share food, food utensils or food containers
- communicating any relevant information provided by parents/guardians regarding their child's medical condition to the Nominated Supervisor to ensure all information held by the service is current
- undertaking relevant training to assist with the management of specific medical conditions of children at the service
- being aware of individual requirements of children with specific medical conditions and following their risk minimisation plan and medical management plan
- monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated Supervisor
- adequately supervising all children, including those with specific medical conditions
- informing the Nominated Supervisor of any issues that impact on the implementation of this policy.

Parents/guardians are responsible for:

- informing the service of their child's medical conditions, if any, and informing the service of any specific requirements that their child may have in relation to their medical condition
- developing a risk minimisation plan with the Nominated Supervisor and/or other relevant staff members at the service
- providing a medical management plan signed by a medical practitioner, either on enrolment or immediately upon diagnosis of an ongoing medical condition. This medical management plan must include a current photo of the child and must clearly outline procedures to be followed by educators/staff in the event of an incident relating to the child's specific health care needs
- notifying the Nominated Supervisor of any changes to the status of their child's medical condition and providing a new medical management plan in accordance with these changes
- informing the Nominated Supervisor of any issues that impact on the implementation of this policy by the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information on display and supplied to parents/guardians regarding the management of medical conditions is current

- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

DELIVERY AND COLLECTION OF CHILDREN POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide clear guidelines to ensure the safe delivery and collection of children attending Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- ensuring the safe delivery and collection of children being educated and cared for at the service
- meeting its duty of care obligations under the law.’

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

A duty of care exists at all times the child is attending a children’s service. In addition, the service has a duty of care to a child while he/she is on the service’s premises even if he/she hasn’t yet been signed into the service or has been signed out of the service, and is legally under the care and supervision of the parent/guardian (refer to *Supervision of Children Policy*).

The child may only leave the service in the care of a parent/guardian, authorised nominee or a person authorised by one of these parties to collect the child. Should the authorised nominee be under the age of 18 it will need to be put in writing to the Preschool that the parent/guardian wishes someone under 18 years to collect their child, these details will also have to be on the child’s enrolment form. An authorised person does not include a parent who is prohibited by a court order from having contact with the child. An exception is made in the event of a medical or other emergency (refer to *Incident, Injury, Trauma and Illness Policy* and *Emergency and Evacuation Policy*) and for excursions (refer to *Excursions and Service Events Policy*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Children, Youth and Families Act 2005* (Vic)

- *Education and Care Services National Law Act 2010*: Sections 167, 170
- *Education and Care Services National Regulations 2011*: Regulations 99, 168(2)(f)
- *Family Law Act 1975* (Cth)
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.3: Each child is protected

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Attendance record: Kept by the service to record details of each child attending the service including name, time of arrival and departure, signature of person delivering and collecting the child or of the Nominated Supervisor or educator (Regulation 158(1)).

Authorised nominee: (In relation to this policy) a person over the age of 18 who has been given written authority by the parents/guardians of a child to collect that child from the education and care service. These details will be on the child’s enrolment form.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Inappropriate person: A person who may pose a risk to the health, safety or wellbeing of any child attending the education and care service, or whose behaviour or state of mind make it inappropriate for him/her to be on the premises e.g. a person under the influence of drugs or alcohol (Act 171(3)).

Incident, Injury, Trauma and Illness Record: Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. Any incident, injury, trauma or illness must be recorded as soon as is practicable but not later than 24 hours after the occurrence. Details required include the:

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

These details must be kept for the period of time specified in Regulation 183. A sample *Incident, Injury, Trauma and Illness Record* is available on the ACECQA website.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication if required (Regulation 92). A sample medication record is available on the ACECQA website.

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Unauthorised person: (in relation to this policy) is any person who has not been listed as an authorised nominee on the child's enrolment form.

SOURCES AND RELATED POLICIES

Sources

- Australian Children's Education and Care Quality Authority (ACECQA): www.cecqa.gov.au
- Department of Education and Early Childhood Development (DEECD), Licensed Children's Services, phone 1300 307 415 or email licensed.childrens.services@edumail.vic.gov.au

Service policies

- *Acceptance and Refusal of Authorisations Policy*
- *Child Safe Environment Policy*
- *Dealing with Medical Conditions Policy*
- *Emergency and Evacuation Policy*
- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Fees Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Privacy and Confidentiality Policy*
- *Road Safety and Safe Transport Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring parents/guardians have completed the authorised nominee (refer to *Definitions*) section of their child's enrolment form, and that the form is signed and dated (refer to *Enrolment and Orientation Policy*)
- providing an attendance record (refer to *Definitions*) that meets the requirements of Regulation 158(1) and is signed by the parent/guardian or authorised nominee on delivery and collection of their child from the service every day
- ensuring a child does not leave the service except with a parent/guardian or authorised nominee, or with the written authorisation of one of these or in the case of a medical or other emergency (Regulation 99) (refer to *Acceptance and Refusal of Authorisations Policy, Dealing with Medical Conditions Policy, Incident, Injury Trauma and Illness Policy* and *Child Safe Environment Policy*)
- ensuring a child is not taken outside the service premises on an excursion except with the written authorisation of a parent/guardian or authorised nominee (refer to *Excursions and Service Events Policy*)
- ensuring authorisation procedures are in place for excursions and other service events (refer to *Excursions and Service Events Policy*)
- ensuring that there are procedures in place when a child is given into the care of another person, such as for a medical or other emergency (refer to *Emergency and Evacuation Policy* and *Incident, Injury, Trauma and Illness Policy*)
- ensuring that there are procedures in place when a parent/guardian or authorised nominee telephones the service to advise that a person not listed on their child's enrolment form will be collecting their child
- ensuring that parents/guardians or authorised nominees are contacted in the event that an unauthorised person arrives to collect a child from the service, and that appropriate procedures are followed
- ensuring that there are procedures in place if an inappropriate person (refer to *Definitions*) attempts to collect a child from the service
- keeping a written record of all visitors to the service, including time of arrival and departure
- ensuring procedures are in place for the care of a child who has not been collected from the service on time
- ensuring that the educator-to-child ratios are maintained at all times children are in attendance at the service (including when children are collected late from the service) according to the requirements of Regulations 123 and 360 (refer also to *Supervision of Children Policy*)
- notifying DEECD in writing within 24 hours, and the parents as soon as is practicable, in the event of a serious incident (refer to *Definitions*), including when a child has left the service unattended by an adult or with an unauthorised person (Regulations 12, 86, 176)
- providing parents/guardians with information regarding procedures for delivery and collection of children prior to their child's commencement at the service

- ensuring that educators and staff comply with the service's *Road Safety and Safe Transport Policy*
- encouraging parents/guardians to comply with the service's *Road Safety and Safe Transport Policy*.

The Nominated Supervisor is responsible for:

- ensuring a child does not leave the service except with a parent/guardian or authorised nominee, or with the written authorisation of one of these or in the case of a medical or other emergency (refer to *Acceptance and Refusal of Authorisations Policy, Dealing with Medical Conditions Policy, Incident, Injury Trauma and Illness Policy* and *Child Safe Environment Policy*)
- ensuring a child is not taken outside the service premises on an excursion except with the written authorisation of a parent/guardian or authorised nominee (refer to *Excursions and Service Events Policy*)
- ensuring that educator-to-child ratios are maintained at all times children are in attendance at the service (including when children are collected late from the service) according to the requirements of Regulations 123 and 360 (refer also to *Supervision of Children Policy*)
- ensuring children are adequately supervised at all times (refer to *Supervision of Children Policy*)
- following the authorisation procedures
- following the procedures to ensure the safe collection of children
- following the procedures for late collection of children
- ensuring that educators and staff comply with the service's *Road Safety and Safe Transport Policy*
- encouraging parents/guardians to comply with the service's *Road Safety and Safe Transport Policy*.

Certified Supervisors and other educators are responsible for:

- ensuring the attendance record is signed by the parent/guardian, authorised nominee, Nominated Supervisor or an educator, detailing the child's time of arrival and departure from the service (Regulation 158(1))
- developing safety procedures for the mass arrival and departure of children from the service
- refusing to allow a child to depart from the service with a person who is not the parent/guardian or authorised nominee, or where there is not written authorisation of one of these (refer also to *Acceptance and Refusal of Authorisations Policy*)
- implementing the authorisation procedures in the event that a parent/guardian or authorised nominee telephones the service to advise that a person not listed on their child's enrolment form will be collecting their child
- following the authorisation procedures and contacting the parents/guardians or authorised nominees if an unauthorised person arrives to collect a child from the service

- following procedures in the event that an inappropriate person (refer to *Definitions*) attempts to collect a child from the service
- informing the Approved Provider as soon as is practicable, but within 24 hours, if a child has left the service unattended by an adult or with an unauthorised person (refer to *Definitions*)
- following procedures for the late collection of children
- maintaining educator-to-child ratios at all times children are in attendance at the service (including when children are collected late from the service)
- ensuring the entry/exit doors and gates are kept closed during program hours
- displaying an up-to-date list of the telephone numbers of the Approved Provider, DEECD, Child FIRST, DHS Child Protection Service and the local police station
- complying with the service's *Road Safety and Safe Transport Policy*.

Parents/guardians are responsible for:

- completing and signing the authorised nominee section of their child's enrolment form before their child attends the service
- signing and dating permission forms for excursions
- signing the attendance record as their child arrives at and departs from the service
- ensuring educators are aware that their child has arrived at/been collected from the service
- collecting their child on time at the end of each session/day
- alerting educators if they are likely to be late collecting their child
- providing written authorisation where children require medication to be administered by educators/staff, and signing and dating it for inclusion in the child's medication record (refer to *Definitions*)
- supervising their own child before signing them into the program and after they have signed them out of the program
- familiarising themselves with the service's *Road Safety and Safe Transport Policy*
- supervising other children in their care, including siblings, while attending or assisting at the service
- paying a late-collection fee if required by the service's *Fees Policy*.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice

- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2019

DIABETES POLICY

Mandatory – Quality Area 2

The content of this policy was developed for ELAA by advocacy and diabetes educators at Diabetes Australia – Vic and the Royal Children’s Hospital Melbourne’s manager of diabetes education in Australia, in August 2012. It was fully revised in February 2015.

PURPOSE

To ensure that enrolled children with type 1 diabetes and their families are supported, while children are being educated and cared for by the service.

This *Diabetes Policy* should be read in conjunction with the *Dealing with Medical Conditions Policy* of Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool believes in ensuring the safety and wellbeing of children who are diagnosed with diabetes, and is committed to:

- providing a safe and healthy environment in which children can participate fully in all aspects of the program
- actively involving the parents/guardians of each child diagnosed with diabetes in assessing risks, and developing risk minimisation and risk management strategies for their child
- ensuring that all staff members and other adults at the service have adequate knowledge of diabetes and procedures to be followed in the event of a diabetes-related emergency
- facilitating communication to ensure the safety and wellbeing of children diagnosed with diabetes.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Services that are subject to the National Quality Framework must have a policy for managing medical conditions in accordance with the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*. This policy must define practices in relation to:

- the management of medical conditions
- procedures requiring parents/guardians to provide a medical management plan if an enrolled child has a relevant medical condition (including diabetes)
- development of a risk minimisation plan in consultation with a child's parents/guardians
- development of a communication plan for staff members and parents/guardians.

Staff members and volunteers must be informed about the practices to be followed in the management of specific medical conditions at the service. Parents/guardians of an enrolled child with a specific health care need, allergy or other relevant medical condition must be provided with a copy of the *Dealing with Medical Conditions Policy* (in addition to any other relevant service policies).

Services must ensure that each child with diabetes has a current diabetes action and management plan prepared specifically for that child by their diabetes medical specialist team, at or prior to enrolment, and must implement strategies to assist children with type 1 diabetes. A child's diabetes action and management plan provides staff members with all required information about that child's diabetes care needs while attending the service.

The following lists key points to assist service staff to support children with type 1 diabetes:

- Follow the service's *Dealing with Medical Conditions Policy* (and this *Diabetes Policy*) and procedures for medical emergencies involving children with type 1 diabetes.
- Parents/guardians should notify the service immediately about any changes to the child's individual diabetes action and management plan.
- The child's diabetes medical specialist team may include an endocrinologist, diabetes nurse educator and other allied health professionals. This team will provide parents/guardians with a diabetes action and management plan to supply to the service. Examples can be found here: <http://www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents/diabetes-and-school>
- Contact Diabetes Australia – Vic for further support, information and professional development sessions.

Most children with type 1 diabetes can enjoy and participate in service programs and activities to their full potential, but are likely to require additional support from service staff to manage their diabetes. While attendance at the service should not be an issue for children with type 1 diabetes, they may require time away to attend medical appointments.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 167, 169
- *Education and Care Services National Regulations 2011*: Regulations 90–96, 102, 136, 137, 146, 147, 160–162, 168(2)(d), 173, 177, 181, 183, 184, 246
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted

- Element 2.1.1: Each child’s health needs are supported
- Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
- Standard 2.3: Each child is protected
 - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Occupational Health and Safety Act 2004* (Vic)
- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Public Health and Wellbeing Act 2008*
- *Public Health and Wellbeing Regulations 2009* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Type 1 diabetes: An autoimmune condition that occurs when the immune system damages the insulin producing cells in the pancreas. Type 1 diabetes is treated with insulin replacement via injections or a continuous infusion of insulin via a pump. Without insulin treatment, type 1 diabetes is life threatening.

Type 2 diabetes: Occurs when either insulin is not working effectively (insulin resistance) or the pancreas does not produce sufficient insulin (or a combination of both). Type 2 diabetes accounts for 85 to 90 per cent of all cases of diabetes and usually develops in adults over the age of 45 years, but is increasingly occurring in individuals at a younger age. Type 2 diabetes is unlikely to be seen in children under the age of 4 years.

Hypoglycaemia or hypo (low blood glucose): Hypoglycaemia refers to having a blood glucose level that is lower than normal i.e. below 4 mmol/L, even if there are no symptoms. Neurological symptoms can occur at blood glucose levels below 4 mmol/L and can include sweating, tremors, headache, pallor, poor co-ordination and mood changes. Hypoglycaemia can also impair concentration, behaviour and attention, and symptoms can include a vague manner and slurred speech.

Hypoglycaemia is often referred to as a ‘hypo’. Common causes include but are not limited to:

- taking too much insulin
- delaying a meal
- consuming an insufficient quantity of carbohydrate
- undertaking unplanned or unusual exercise.

It is important to treat hypoglycaemia promptly and appropriately to prevent the blood glucose level from falling even lower, as very low levels can lead to loss of consciousness and possibly convulsions.

The child's diabetes action and management plan will provide specific guidance for services in preventing and treating a hypo.

Hyperglycaemia (high blood glucose): Hyperglycaemia occurs when the blood glucose level rises above 15 mmol/L. Hyperglycaemia symptoms can include increased thirst, tiredness, irritability and urinating more frequently. High blood glucose levels can also affect thinking, concentration, memory, problem-solving and reasoning. Common causes include but are not limited to:

- taking insufficient insulin
- consuming too much carbohydrate
- common illnesses such as a cold
- stress.

Insulin: Medication prescribed and administered by injection or continuously by a pump device to lower the blood glucose level. In the body, insulin allows glucose from food (carbohydrates) to be used as energy, and is essential for life.

Blood glucose meter: A compact device used to check a small blood drop sample to determine the blood glucose level.

Insulin pump: A small, computerised device to deliver insulin constantly, connected to an individual via an infusion line inserted under the skin.

Ketones: Occur when there is insufficient insulin in the body. High levels of ketones can make children very sick. Extra insulin is required (given to children by parents/guardians) when ketone levels are >0.6 mmol/L if insulin is delivered via a pump, or >1.0 mmol/L if on injected insulin.

SOURCES AND RELATED POLICIES

Sources

- Caring for Diabetes in Children and Adolescents, Royal Children's Hospital Melbourne: <http://www.rch.org.au/diabetesmanual/>
- Diabetes Australia – Vic: www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents
 - Information about professional learning for teachers (i.e. *Diabetes in Schools* one day seminars for teachers and early childhood staff), sample management plans and online resources.

Examples of current action and management plans can be found here:

<http://www.diabetesvic.org.au/type-1-diabetes/children-a-adolescents/diabetes-and-school>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Dealing with Medical Conditions Policy*

- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Food Safety Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Nutrition and Active Play Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that a diabetes policy is developed and implemented at the service
- ensuring that the Nominated Supervisor, educators, staff, students and volunteers at the service are provided with a copy of the *Diabetes Policy*, including the section on management strategies, and the *Dealing with Medical Conditions Policy*
- ensuring that the programs delivered at the service are inclusive of children diagnosed with diabetes (refer to *Inclusion and Equity Policy*), and that children with diabetes can participate in all activities safely and to their full potential
- ensuring that the parents/guardians of an enrolled child who is diagnosed with diabetes are provided with a copy of the *Diabetes Policy* (including procedures) and the *Dealing with Medical Conditions Policy* (Regulation 91)
- ensuring that the Nominated Supervisor, staff and volunteers at the service are aware of the strategies to be implemented for the management of diabetes at the service
- ensuring that staff have access to appropriate training and professional development opportunities and are adequately resourced to work with children with Type 1 Diabetes and their families
- ensuring that each enrolled child who is diagnosed with diabetes has a current diabetes action and management plan prepared specifically for that child by their diabetes medical specialist team, at or prior to enrolment and signed off by all relevant parties
- ensuring that the Nominated Supervisor, educators, staff, students, volunteers and others at the service follow the child's diabetes action and management plan in the event of an incident at the service relating to their diabetes
- ensuring that a risk minimisation plan is developed for each enrolled child diagnosed with diabetes in consultation with the child's parents/guardians, in accordance with Regulation 90(iii)

- ensuring that a communication plan is developed for staff and parents/guardians in accordance with Regulation 90(iv), and encouraging ongoing communication between parents/guardians and staff regarding the management of the child's medical condition
- ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

The Nominated Supervisor is responsible for:

- ensuring that the *Diabetes Policy* is implemented at the service
- compiling a list of children with diabetes and placing it in a secure but readily accessible location known to all staff. This should include the diabetes action and management plan for each child
- following the strategies developed for the management of diabetes at the
- organising appropriate training and professional development for educators and staff to enable them to work effectively with children with Type 1 Diabetes and their families
- ensuring that all staff, including casual and relief staff, are aware of children diagnosed with diabetes, symptoms of low blood sugar levels, and the location of medication and diabetes action and management plans
- following the child's diabetes action and management plan in the event of an incident at the service relating to their diabetes
- following the risk minimisation plan for each enrolled child diagnosed with diabetes
- ensuring that programmed activities and experiences take into consideration the individual needs of all children, including children diagnosed with diabetes
- communicating daily with parents/guardians regarding the management of their child's diabetes
- ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

Certified Supervisors and other educators/staff are responsible for:

- reading and complying with this *Diabetes Policy* and the *Dealing with Medical Conditions Policy*
- following the strategies developed for the management of diabetes at the service
- working with individual parents/guardians to determine the most appropriate support for their child
- following the risk minimisation plan for each enrolled child diagnosed with diabetes
- knowing which children are diagnosed with diabetes, and the location of their medication and diabetes action and management plans
- following the child's diabetes action and management plan in the event of an incident at the service relating to their diabetes

- communicating daily with parents/guardians regarding the management of their child's medical condition
- ensuring that children diagnosed with diabetes are not discriminated against in any way and are able to participate fully in all programs and activities at the service.

All parents/guardians are responsible for:

- reading and complying with this *Diabetes Policy*, diabetes management strategies, and the *Dealing with Medical Conditions Policy*.

Parents/guardians of children diagnosed with type 1 diabetes are responsible for:

- providing the service with a current diabetes action and management plan prepared specifically for their child by their diabetes medical specialist team and signed off by all relevant parties
- working with the Approved Provider to develop a risk minimisation plan for their child
- working with the Approved Provider to develop a communication plan
- working with educators and staff to assist them to provide the most appropriate support for their child
- ensuring that they provide the service with any equipment, medication or treatment, as specified in the child's individual diabetes action and management plan.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- selectively audit enrolment checklists (for example, annually) to ensure that documentation is current and complete
- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or following a hypo emergency at the service, to identify any changes required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 14/SEPTEMBER/2018

EMERGENCY AND EVACUATION POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide a framework for:

- the development of specific emergency and evacuation procedures, practices and guidelines at Rolling Hills Preschool
- raising the awareness of everyone attending Rolling Hills Preschool about potential emergency situations and appropriate responses.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe environment for all children, staff and persons participating in programs at Rolling Hills Preschool
- having a plan to manage emergency situations in a way that reduces risk to those present on the premises
- ensuring effective procedures are in place to manage emergency incidents at the service
- ensuring an appropriate response during and following emergency incidents to meet the needs of the children, their families, staff and others at the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool, including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

The *Education and Care Services National Regulations 2011* define an emergency in relation to an education and care service as any situation or event that poses an imminent or severe risk to the persons at the service premises e.g. flood, fire or a situation that requires the service premises to be locked down.

Comprehensive emergency management includes prevention, preparedness, response and recovery.

Services are required to have policies and procedures in place detailing what needs to be done in an emergency, including an emergency and evacuation floor plan. These policies and

procedures must be based on a risk assessment that identifies potential emergencies relevant to the service (Regulation 97).

Early childhood services have a duty of care to the children, staff, volunteers, students, visitors and all attending the facility. It is also a requirement under the *Occupational Health and Safety Act 2004* that employers provide a healthy and safe environment for all persons who access the service's facilities and/or programs.

All services in Victoria are required to have an *Emergency Management Plan* (EMP) as part of their everyday 'best practice' operations. All education and care services listed on the Department of Education and Early Childhood Development's Bushfire At-Risk Register (BARR) are required as a condition of their service approval to submit their EMP to their regional office. The Department provides *Emergency Management Plan Guidelines* and an *Emergency Management Plan* template to assist services develop and review their EMP (refer to *Sources* below for the link). All services must complete the required sections of the plan and lodge it with the relevant DEECD regional office. A copy should also be attached to this policy.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 97, 98, 168(2)(e)
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.3: Each child is protected
 - Element 2.3.3 – Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Occupational Health and Safety Act 2004*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Attendance record: Kept by the service to record details of each child attending the service including name, time of arrival and departure, signature of person delivering and collecting the child or of the Nominated Supervisor or educator (Regulation 158(1)).

Country Fire Authority (CFA): CFA respond to a variety of fire and emergency incidents. They are also involved in a range of other activities including:

- fire safety building inspections
- delivering community awareness, education and safety programs
- post-incident analysis and fire investigation
- fire prevention planning and land use planning at a municipal level.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Emergency: Includes any situation or event that poses an imminent or severe risk to the persons at the education and care service premises e.g. flood, fire or a situation that requires the service premises to be locked down (National Regulations, page 5).

Emergency Management Plan (EMP): A written set of instructions to assist the Approved Provider, Nominated Supervisor, educators and staff to deal with incidents or situations that could pose a threat to life, health or property. *Emergency Management Plan Guidelines* and an *Emergency Management Plan* template are available on the DEECD website (refer to *Sources* below).

Hazard: A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

Incident, Injury, Trauma and Illness Record: Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by the service. Any incident, injury, trauma or illness must be recorded as soon as is practicable but not later than 24 hours after the occurrence. Details required include the:

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

These details must be kept for the period of time specified in Regulation 183. A sample *Incident, Injury, Trauma and Illness Record* is available on the ACECQA website.

Mandatory closure: When services identified as being at high bushfire risk are directed by DEECD to close on days declared a Code Red Fire Danger Rating day.

Metropolitan Fire Brigade (MFB): provide a fire and rescue service and are the first to respond to specific medical emergencies. The MFB aims to reduce the incidence and impact of fire and other emergencies on the community. This is achieved through the delivery of educational strategies that assist the community to become more self-reliant, including:

- fire safety building inspections, and checking fire fighting equipment
- delivering community awareness, education and safety programs.

Notifiable incident: An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be

reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website: www.worksafe.vic.gov.au

Risk management: A structured approach to managing uncertainty related to a threat; a sequence of activities including the identification, assessment and prioritisation of risks followed by co-ordinated and economical application of resources to minimise, monitor and control the probability and/or impact of those risks.

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

State Emergency Service (SES): Volunteer-based organisation responding to emergencies and working to ensure the safety of communities around Victoria.

State of emergency: A situation in which the government is granted special powers, by constitutional or legal provision, to deal with a perceived threat to law and order, or public safety.

WorkSafe Victoria: The manager of Victoria's workplace safety system. WorkSafe Victoria's responsibilities are to:

- help avoid workplace injuries occurring
- enforce Victoria's occupational health and safety laws
- provide reasonably priced workplace injury insurance for employers.

SOURCES AND RELATED POLICIES

Sources

- Australian Standards: Emergency control organisation for buildings, structures and workplaces (AS 3745–2002)
- Department of Education and Early Childhood Development, *Emergency Management Plan Guidelines* and *Emergency Management Plan*: <http://www.education.vic.gov.au/childhood/providers/support/Pages/emergency.aspx>
- Metropolitan Fire Brigade: www.mfb.vic.gov.au
- Country Fire Authority: www.cfa.vic.gov.au
- State Emergency Service: www.ses.vic.gov.au
- WorkSafe Victoria: www.worksafe.vic.gov.au

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Delivery and Collection of Children Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Occupational Health and Safety Policy*
- *Staffing Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- completing the DEECD *Emergency Management Plan* (refer to *Sources* for the link), lodging this with the relevant DEECD regional office and attaching a copy to this policy
- conducting a risk assessment to identify potential emergencies that the service may encounter (Regulation 97(2)) (refer to attached *Emergency Management Plan*)
- developing instructions for what must be done in the event of an emergency (Regulation 97(1)(a)) (refer to attached *Emergency Management Plan*)
- appointing an Incident Management Team (IMT) to oversee safety at the service in the event of an emergency (refer to attached *Emergency Management Plan*)
- developing an emergency and evacuation floor plan (Regulation 97(1)(b)) (refer to attached *Emergency Management Plan*)
- ensuring that the emergency and evacuation procedures are rehearsed at least once every 3 months by all at the service (Regulation 97(3)(a))
- ensuring that the rehearsals of the emergency and evacuation procedures are documented (Regulation 97(3)(b)) (refer to attached *Emergency Management Plan*)
- ensuring that a copy of the emergency and evacuation floor plan and instructions are displayed in a prominent position near each exit at the service premises (Regulation 97(4))
- ensuring that those working at, or attending the service, have access to a phone or similar for immediate communication with parents/guardians and emergency services (Regulation 98), and that phone numbers of emergency services are displayed
- identifying potential onsite hazards and taking action to manage and minimise risk (refer to attached *Emergency Management Plan*)
- ensuring all infrastructure and service equipment are regularly checked for condition and maintenance, including emergency exit lighting
- ensuring the location of first aid kits, fire extinguishers and other emergency equipment are clearly signposted
- ensuring all emergency equipment is maintained on a regular basis in accordance with requirements specified by regulations, such as the Australian Standards Building Code e.g.

fire extinguishers, smoke detectors, evacuation kits, sprinkler systems and alarm or duress systems

- providing a fully-equipped portable first aid kit (refer to *Administration of First Aid Policy*)
- developing a regular training schedule for staff to ensure that they are able to deal with emergency situations e.g. first aid, emergency management and OHS training
- regularly reviewing, evaluating and updating emergency management plans, manuals and procedures (at least annually or following an emergency incident)
- developing procedures to debrief staff following emergency incidents
- conducting spot checks of documentation and practices to ensure all requirements of this policy are being complied with
- notifying DEECD in writing within 24 hours of a serious incident (refer to *Definitions*)
- completing the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*) where required
- notifying DEECD within 7 days of an incident that required the service to be closed, or a circumstance that posed a significant risk to the health, safety or wellbeing of a child attending the service (National Law: Section 174(2)(c); Regulations: 175(2)(b)&(c), 176)
- reporting notifiable incidents (refer to *Definitions*) in the workplace to WorkSafe Victoria
- engaging with the Metropolitan Fire Brigade and/or Country Fire Authority regarding fire safety awareness and training for the service, including demonstrations of fire equipment, basic fire safety, smoke alarm, fire blankets and escape plans
- identifying staff and children requiring additional assistance in the event of an emergency (refer to attached *Emergency Management Plan*)
- ensuring that emergency contact details are provided on each child's enrolment form and that these are kept up to date
- ensuring that an attendance record (refer to *Definitions*) is maintained to account for all children attending the service
- keeping a written record of all visitors to the service, including time of arrival and departure
- ensuring all staff, parents/guardians, children, volunteers and students on placement understand the procedures to follow in the event of an emergency
- ensuring there are induction procedures in place to inform new staff, including casual or relief staff, of the emergency and evacuation policy and procedures
- ensuring all staff, parents/guardians, children, volunteers, students on placement and others attending the service are accounted for in the event of an evacuation
- developing procedures to deal with loss of critical functions, such as power/water shut off.

The Nominated Supervisor is responsible for:

- ensuring that the emergency and evacuation floor plan is displayed in prominent positions and that all parents/guardians, volunteers, contract staff and relief staff are briefed and aware of the procedures

- ensuring that children are adequately supervised at all times and protected from hazards and harm (refer to *Supervision of Children Policy*)
- ensuring that the *Emergency Management Plan* (attached) is followed in the event of an emergency
- testing alarms and communication systems regularly, such as on a monthly basis
- informing the Approved Provider of any serious or notifiable incidents (refer to *Definitions*) that must be reported to DEECD or WorkSafe Victoria.

Certified Supervisors and other educators are responsible for:

- implementing the procedures and responsibilities in this policy and the service's *Emergency Management Plan* (attached)
- supervising the children in their care and protecting them from hazards and harm (refer to *Supervision of Children Policy*)
- providing support to children before, during and after emergencies
- checking that the attendance record (refer to *Definitions*) is completed at the beginning and end of each session
- checking that the emergency evacuation procedure is displayed in prominent positions and that all attending the service are made aware of these (refer to attached *Emergency Management Plan*)
- rehearsing emergency evacuation procedures with the children at least once every 3 months (or more often, as required) and ensuring that these are documented (refer to attached *Emergency Management Plan*)
- providing feedback regarding the effectiveness of emergency and evacuation procedures to inform policy, procedures and manuals etc.
- completing the *Incident, Injury, Trauma and Illness Record*, as required
- informing the Approved Provider about any serious incidents or notifiable incidents (refer to *Definitions*) at the service
- attending first aid, emergency management and OHS training, as required
- communicating with parents about emergency procedures
- raising children's awareness about potential emergency situations and appropriate responses.

Parents/guardians are responsible for:

- familiarising themselves with the service's emergency and evacuation policy and procedures and the service's *Emergency Management Plan* (attached)
- ensuring they complete the attendance record (refer to *Definitions*) on delivery and collection of their children (refer to *Delivery and Collection of Children Policy*)
- providing emergency contact details on their child's enrolment form and ensuring that this is kept up to date

- reinforcing the service's emergency and evacuation procedures with their child
- following the directions of staff in the event of an emergency or when rehearsing emergency procedures.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- review the policy to determine whether it adequately addresses a range of potential emergency situations
- regularly seek feedback from everyone affected by the policy regarding its effectiveness particularly following an emergency
- assess the ability of the Nominated Supervisor, Certified Supervisor, educators, staff, children and others to follow the policy and procedures in the event of an emergency
- review procedures, including evacuation procedures, to determine their effectiveness, including timing and processes
- use information gained from spot checks and the *Incident, Injury, Trauma and Illness Record* to inform proposed changes to this policy
- revise the policy and procedures as part of the service's policy review cycle, or as required by legislation, research, policy and best practice
- consult with emergency services such as the MFB and CFA, to ensure the policy and procedures meet current best practices
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHOTISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

EPILEPSY POLICY

Best Practice – Quality Area 2

This policy was written in consultation with The Epilepsy Foundation. The Epilepsy Foundation provides training, support and resources to any individual affected by epilepsy. For more detailed information, visit The Epilepsy Foundation's website: www.epinet.org.au

PURPOSE

This policy will outline the procedures to:

- ensure that educators, staff and parents/guardians are aware of their obligations and required strategies in supporting children with epilepsy to safely and fully participate in the program and activities of Rolling Hills Preschool
- ensure that all necessary information for the effective management of children with epilepsy enrolled at Rolling Hills Preschool is collected and recorded so that these children receive appropriate attention when required.

This policy should be read in conjunction with the *Dealing with Medical Conditions Policy*.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children enrolled at the service
- providing an environment in which all children with epilepsy can participate to their full potential
- providing a clear set of guidelines and procedures to be followed with regard to supporting children with epilepsy and the management of seizures
- educating and raising awareness about epilepsy, its effects and strategies for appropriate management, among educators, staff, parents/guardians and others involved in the education and care of children enrolled at the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Epilepsy is a common, serious neurological condition characterised by recurrent seizures due to abnormal electrical activity in the brain. While about 1 in 200 children live with epilepsy, the impact is variable – some children are greatly affected while others are not.

“Epilepsy is unique: There are virtually no generalisations that can be made about how epilepsy may affect a child. There is often no way to accurately predict how a child’s abilities, learning and skills will be affected by seizures. Because the child’s brain is still developing, the child, their family and doctor will be discovering more about the condition as they develop. The most important thing to do when working with a child with epilepsy is to get to know the individual child and their condition. All children with epilepsy should have an Epilepsy Management Plan” (*Children with epilepsy: A Teacher’s Guide*, Epilepsy Foundation– refer to *Sources*).

Most people living with epilepsy have good control of their seizures through medication, however it is important that all those working with children living with epilepsy have a good understanding of the effects of seizures, required medication and appropriate first aid for seizures.

The Epilepsy Foundation (refer to *Sources*) has a range of resources and can assist with the development of an Epilepsy Management Plan. The foundation also provides training and support to families and educators in the management of epilepsy, and in the emergency administration of midazolam or rectal Valium.

Legislation that governs the operation of approved children’s services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. Regulation 136 of the *Education and Care Services National Regulations 2011* requires the Approved Provider to ensure that there is at least one educator on duty at all times who has a current approved first aid qualification. As a demonstration of duty of care and best practice, ELAA recommends **all educators** have current approved first aid qualifications.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 167, 169, 174
- *Education and Care Services National Regulations 2011*: Regulations 79, 85, 86, 87, 90, 91, 92, 93, 95, 98, 101, 136, 137
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.1: Each child’s health is promoted
 - Element 2.1.1: Each child’s health needs are supported
 - Standard 2.3: Each child is protected
 - Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic).

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Absence seizure: Occurring mostly in children, this consists of brief periods of loss of awareness, most often for less than 10 seconds. Some children can experience these types of seizures multiple times during the day which may compromise learning. Absence seizures can be mistaken for day-dreaming. They are no longer called 'petit mals'.

AEDs: Antiepileptic drugs used for the treatment of many epilepsy syndromes. AEDs do not cure epilepsy but most seizures can be prevented by taking medication regularly one or more times a day. For many people, medication makes it possible to live a normal, active life, free of seizures. Others may continue to have seizures, but less frequently.

Approved First Aid Qualifications: First aid qualifications that meet the requirements of Regulation 136(1) and have been approved by the National Authority.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Emergency epilepsy medication: Medication that has been prescribed for the treatment of prolonged seizures or a cluster of seizures. The most common type of emergency medication prescribed is buccal or nasal midazolam. Rectal Valium has been used in the past, but is not often prescribed for use as an emergency epilepsy medication. Medication information is included in a child's Emergency Medication Management Plan, and this must be kept up to date. Only staff who have received child-specific training in the emergency administration of midazolam can administer this medication.

Emergency Medication Management Plan (EMMP): Completed by the prescribing doctor in consultation with the individual and/or their family/carer. This medication plan must be attached to the individual's Epilepsy Management Plan which has been signed by the child's treating doctor. The preferred template to be used by the prescribing doctor can be found at: www.epinet.org.au

Epilepsy: Recurrent seizures (abnormal burst of electrical activity in the brain that scrambles messages) that are unprovoked.

Epilepsy Management Plan (EMP): Designed to help people recognise when seizures are occurring, and gives clear directions about appropriate first aid. The plan is developed by the person who has the most knowledge and experience of the individual's epilepsy and seizures, and should be less than 12 months old. The management of epilepsy requires a team approach and the plan should be reviewed and signed by the individual's treating doctor. An Epilepsy Management Plan and Support Package has been designed by The Epilepsy Foundation: www.epinet.org.au

Focal (previously called simple or complex partial) seizures: Focal seizures (previously called partial seizures) start in one part of the brain and affect the area of the body controlled by that part of the brain. The symptoms experienced will depend on the function that the focal point controls (or is associated with). Focal seizures may or may not cause an alteration of awareness.

Symptoms are highly variable and may include lip smacking, wandering behaviour, fiddling with clothes and feeling sick, 'edgy' or strange.

Focal seizures where a person has full awareness were previously called simple partial seizures. Focal seizures where a person has an altered sense of awareness were previously called complex partial seizures. Focal seizures can progress into a generalised seizure.

Generalised seizure: Both sides of the brain are involved and the person will lose consciousness. A Tonic Clonic seizure is one type of generalised seizure.

Ketogenic diet: A high fat, low carbohydrate, restricted-calorie diet that may be prescribed as additional therapy. This is an effective therapy for some children, although its mechanisms are not well understood. When introducing this diet, a child is usually hospitalised, as such radical dietary changes have the potential to cause serious problems for the child. Once the child is stabilised on a ketogenic diet, they can return home, with the diet managed by the parents/guardians or carers.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

Midazolam: Also known as Hypnovel, midazolam belongs to a group of pharmaceuticals called benzodiazepines. Its main purpose is as a sedative or hypnotic, and it is used for medical and surgical procedures. In epilepsy, midazolam is used for emergency management of seizures, as it has the ability to stop the seizures quickly. Once absorbed into the blood, midazolam travels to the brain, attaching to brain receptors that control electrical impulses that are firing at an unusually rapid rate. Midazolam also works by relaxing muscles, which is particularly beneficial in many types of seizures. The effect of midazolam should occur rapidly.

Not all individuals living with epilepsy require emergency medication, but for a small group of people whose seizures are difficult to control, or for people who are isolated from emergency care, midazolam is an excellent medication. It is most commonly administered buccally or nasally. Midazolam is fast-acting and can be easily administered by family and carers in a variety of settings. Only staff specifically trained to the requirements of a child's Emergency Medication Management Plan can administer midazolam.

Midazolam kit: An insulated container with an unused, in-date midazolam ampoule/s, a copy of the child's Emergency Medication Management Plan and Epilepsy Management Plan (which includes a picture of the child), and telephone contact details for the child's parents/guardians, doctor/medical personnel and the person to be notified in the event of a seizure requiring administration of midazolam if parents/guardians cannot be contacted. Midazolam must be stored away from light (cover with aluminium foil) and in temperatures of less than 25°C. EFV Administration flyer – e.g. buccal, gloves, tissues, pen and paper, +/- stopwatch.

Seizure record: An accurate record of seizure activity, which is important for identifying any seizure patterns and changes in response to treatment.

Seizure triggers: Seizures may occur for no apparent reason, but common triggers include: forgetting to take medication, lack of sleep, other illness, heat, stress/boredom, missing meals

and dehydration. Flashing or flickering lights can trigger seizures in about 5% of people living with epilepsy.

Staff record: Must be kept by the service and include details of the Nominated Supervisor, the Educational Leader, other staff members, volunteers and the Responsible Person. The record must include information about qualifications, training and details of the *Working with Children* Check (Regulations 146–149). A sample staff record is available on the ACECQA website: www.acecqa.gov.au

Tonic Clonic seizure: A convulsive seizure with loss of consciousness, muscle stiffening, falling, followed by jerking movements. These types of seizures are no longer called ‘grand mals’.

SOURCES AND RELATED POLICIES

Sources

- The Epilepsy Foundation: www.epinet.org.au or phone (03) 9805 9111 or 1300 852 853
- Australian Children’s Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*, ACECQA
- *Epilepsy Smart Schools initiative and resources*: www.epilepsysmartschools.org.au

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Dealing with Medical Conditions Policy*
- *Emergency and Evacuation Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*.

PROCEDURES

The Approved Provider is responsible for:

- providing all staff with a copy of the service’s *Epilepsy Policy* and ensuring that they are aware of all enrolled children living with epilepsy
- ensuring that all staff have current CPR training and are aware of seizure first aid procedures when a child with epilepsy is enrolled at the service
- ensuring that all staff attend training conducted by The Epilepsy Foundation on the management of epilepsy and, where appropriate, emergency management of seizures using emergency epileptic medication, when a child with epilepsy is enrolled at the service
- providing parents/guardians of children with epilepsy with a copy of the service’s *Epilepsy Policy* (Regulation 91) and *Administration of Medication Policy*, upon enrolment/diagnosis of their child

- ensuring that all children with epilepsy have an Epilepsy Management Plan, seizure record and, where relevant, an Emergency Medical Management Plan, filed with their enrolment record. Records must be no more than 12 months old
- ensuring a medication record is kept for each child to who medication is to be administered by the service (Regulation 92)
- facilitating communication between management, educators, staff and parents/guardians regarding the *service's Epilepsy Policy*
- ensuring that children with epilepsy are not discriminated against in any way
- ensuring that children living with epilepsy can participate in all activities safely and to their full potential
- immediately communicating any concerns with parents/guardians regarding the management of children with epilepsy at the service
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

The Nominated Supervisor is responsible for:

- ensuring that all educators' first aid qualifications, including CPR training, are current, meet the requirements of the National Law (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA
- ensuring that only staff who have received child-specific training in the administration of emergency medications are permitted to administer that medication
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- compiling a list of children with epilepsy and placing it in a secure, but readily accessible, location known to all staff. This should include the Epilepsy Management Plan, seizure record and Emergency Medical Management Plan for each child with epilepsy
- ensuring that induction procedures for casual and relief staff include information about children attending the service who have been diagnosed with epilepsy, and the location of their medication and management plans
- organising epilepsy management information sessions for parents/guardians of children enrolled at the service, where appropriate
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with epilepsy.

Certified Supervisor/s and other educators are responsible for:

- ensuring that they are aware of the *service's Epilepsy Policy* and seizure first aid procedures
- ensuring that they can identify children displaying the symptoms of a seizure, and locate their personal medication and Epilepsy Management Plan

- maintaining current approved first aid qualifications (refer to *Definitions*)
- identifying and, where possible, minimising possible seizure triggers (refer to *Definitions*) as outlined in the child's Epilepsy Management Plan
- taking all personal Epilepsy Management Plans, seizure records, medication records, Emergency Medication Plans and any prescribed medication on excursions and to other offsite events
- administering prescribed medication in accordance with the service's *Administration of Medication Policy*
- ensuring that emergency medication is stored correctly and that it remains within its expiration date
- developing a risk minimisation plan for every child with epilepsy, in consultation with parents/guardians/The Epilepsy Foundation
- being aware of, and sensitive to, possible side effects and behavioural changes following a seizure or changes to the child's medication regime
- assisting parents/guardians to complete the enrolment form and medication record for their child
- consulting with the parents/guardians of children with epilepsy in relation to the health and safety of their child, and the supervised management of the child's epilepsy
- communicating any concerns to parents/guardians if a child's epilepsy is limiting his/her ability to participate fully in all activities
- ensuring that children with epilepsy are not discriminated against in any way
- ensuring that children with epilepsy can participate in all activities safely and to their full potential.

Parents/guardians are responsible for:

- reading the service's *Epilepsy Policy*
- informing staff, either on enrolment or on initial diagnosis, that their child has epilepsy
- providing a copy of their child's Epilepsy Management Plan (including an Emergency Medication Management Plan where relevant) to the service. This plan should be reviewed and updated at least annually
- ensuring the medication record (refer to *Definitions*) is completed in accordance with the *Administration of Medication Policy* of the service
- working with staff to develop a risk minimisation plan for their child
- where emergency medication has been prescribed, providing an adequate supply of emergency medication for their child at all times
- notifying staff, in writing, of any changes to the information on the Epilepsy Management Plan, enrolment form or medication record
- communicating regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's epilepsy

- encouraging their child to learn about their epilepsy, and to communicate with service staff if they are unwell or experiencing symptoms of a potential seizure.

Volunteers and students, while at the service, are responsible for following this policy and its procedures

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

EXCURSIONS AND SERVICE EVENTS POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will provide guidelines for Rolling Hills Preschool to plan and conduct safe and appropriate excursions and service events

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing opportunities through the educational program for children to explore and experience the wider environment and broader society
- ensuring that all excursions and service events are accessible, affordable and contribute to children’s learning and development
- ensuring the health, safety and wellbeing of children at all times, including during excursions and service events
- providing adequate supervision of all children during excursions and service events.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisors, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool, including during offsite excursions and events.

BACKGROUND AND LEGISLATION

Background

Excursions and service events are planned to extend the educational program and further develop the current interests of children. “Participating in their communities strengthens children’s sense of identity and wellbeing” (Outcome 2: Children are connected with and contribute to their world, *Victorian Early Years Learning and Development Framework* – refer to *Sources*). The purpose and educational value of each excursion or service event should be clearly communicated to parents/guardians.

When planning excursions and service events, it is important to ensure that they are inclusive of all members of the service community. Consideration must be given to any extra costs involved and the ability of families to pay these costs. Consideration must also be given to ensuring that all children can attend regardless of their abilities, additional needs or medical conditions (refer to *Inclusion and Equity Policy, Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis*

Policy, Diabetes Policy and Epilepsy Policy). Clear procedures must be developed and followed, and these should be communicated to parents/guardians.

A risk assessment must be carried out for each excursion to determine any risks to children's health, safety or wellbeing before permission is sought from parents/guardians (Regulations 100, 101). The risk assessment must identify each risk and specify how the risk will be managed and/or minimised (Regulation 101). Written authorisation for the child to attend the excursion must be obtained from a parent/guardian or person named in the child's enrolment record before the child can be taken outside the service premises. For details regarding information to be included in the written authorisation.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 98, 99, 100, 101, 102, 123, 355, 357, 360
- *National Quality Standard, Quality Area 1: Educational Program and Practice*
 - Standard 1.1: An approved learning framework informs the development of a curriculum that enhances each child's learning and development
 - Element 1.1.3: The program, including routines, is organised in ways that maximise opportunities for each child's learning
 - Element 1.1.5: Every child is supported to participate in the program
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
 - Standard 2.3: Each child is protected
 - Element 2.3.1: Children are adequately supervised at all times
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Adequate supervision: (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

Attendance Record: Kept by the service to record details of each child attending the service including name, time of arrival and departure, signature of person delivering and collecting the child or of the Nominated Supervisor or educator (Regulation 158(1)).

Excursion: An outing organised by the education and care service. The written permission of parents/guardians or a person named on the child's enrolment record as having lawful authority must be obtained before educators/staff take children outside the service premises.

Under the National Regulations, the definition of 'excursion' does not include an outing organised by services operating from a school site, where the child/ren leave the service premises with an educator/staff member, but do not leave the school site.

Service event: A special activity, event, visitor or entertainment organised by the education and care service that may be conducted as part of a regular session at the service premises or as an excursion.

Risk assessment: (In the context of this policy) a risk assessment must identify and assess any hazard that poses a risk to a child's health, safety and/or wellbeing while on an excursion, and specify how these risks will be managed and/or minimised (Regulation 101). Risk assessments must consider:

- the proposed route and location of the excursion
- any water hazards (refer to *Water Safety Policy*)
- any risks associated with water-based activities (refer to *Water Safety Policy*)
- transport to and from the proposed location of the excursion (refer to *Occupational Health and Safety Policy*)
- the number of adults and children participating in the excursion
- the number of educators or other responsible adults who will be providing supervision given the level of risk, and whether or not specialised skills are required (e.g. lifesaving skills)
- the proposed activities, and the impact of this on children with varying levels of ability, additional needs or medical conditions
- the proposed duration of the excursion, and the impact of this on children with varying levels of ability, additional needs or medical conditions

- any items/information that should be taken on the excursion e.g. first aid kit, emergency contact details for children, medication for children with known medical conditions (such as asthma, anaphylaxis and diabetes) and a mobile phone.

A sample Excursion Risk Management Plan is provided on the ACECQA website at: www.acecqa.gov.au

Regular outing: (In relation to education and care services) means a walk, drive or trip to/from a location that the service visits regularly as part of its educational program, and where the circumstances covered by the risk assessment are the same on each trip. If the excursion is a regular outing, an authorisation from parents/guardians is only required to be obtained once every 12 months. A new authorisation is required if there is any change to the circumstances of the regular outing.

Supervision: refer to **adequate supervision** in *Definitions* above.

SOURCES AND RELATED POLICIES

Sources

- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia:* <http://education.gov.au/early-years-learning-framework>
- *Guide to the National Quality Standard, ACECQA:* www.acecqa.gov.au
- *Victorian Early Years Learning and Development Framework:* www.education.vic.gov.au/earlylearning/eyldf/default.htm

Service policies

- *Acceptance and Refusal of Authorisations Policy*
- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Code of Conduct Policy*
- *Curriculum Development Policy*
- *Dealing with Medical Conditions Policy*
- *Delivery and Collection of Children Policy*
- *Diabetes Policy*
- *Emergency and Evacuation Policy*
- *Enrolment and Orientation Policy*
- *Epilepsy Policy*
- *Fees Policy*
- *Food Safety Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*

- *Nutrition and Active Play Policy*
- *Occupational Health and Safety Policy*
- *Participation of Volunteers and Students Policy*
- *Road Safety and Safe Transport Policy*
- *Sun Protection Policy*
- *Supervision of Children Policy*
- *Water Safety Policy*

PROCEDURES

The Approved Provider is responsible for:

- developing an *Excursions and Service Events Policy* in consultation with the Nominated Supervisor, Certified Supervisor, educators, staff and parents/guardians at the service
- ensuring educators, staff, parents/guardians, volunteers, students and others at the service are provided with a copy of the *Excursions and Service Events Policy* and comply with its requirements
- ensuring that all parents/guardians have completed, signed and dated their child's enrolment form (refer to *Enrolment and Orientation Policy*) including details of persons able to authorise an educator to take their child outside the service premises (Regulation 160)
- ensuring that parents/guardians or persons named in the enrolment record have provided written authorisation within the past 12 months where the service is to take the child on regular outings (refer to *Definitions*), and that this authorisation is kept in the child's enrolment record (Regulation 161)
- ensuring that a child does not leave the service premises on an excursion unless prior written authorisation has been provided by the parent/guardian or person named in the child's enrolment record, and that the authorisation includes all details required under Regulation 102(4)
- ensuring that the number of children attending an excursion does not exceed the number for which service approval has been granted on that day
- ensuring that children are adequately supervised (refer to *Definitions*) at all times
- ensuring that educator-to-child ratios are maintained at all times, including during excursions and service events (Regulations 123, 355, 357, 360)
- ensuring only educators who are working directly with children are included in educator-to-child ratios
- ensuring that parents/guardians, volunteers, students and all adults participating in an excursion are adequately supervised at all times and are not left with sole supervision of individual children or groups of children (refer to *Participation of Volunteers and Students Policy*)

- ensuring that a risk assessment (refer to *Definitions*) is carried out for an excursion (in accordance with Regulation 101) before authorisation is sought from parents/guardians (Regulation 100)
- ensuring the risk assessment (refer to *Definitions*) identifies and assesses the risks, specifies how these will be managed and/or minimised, and includes all details required by Regulation 101
- developing strategies to improve children's safety in high risk situations such as excursions near water or near a road (refer to *Supervision of Children Policy, Water Safety Policy and Road Safety and Safe Transport Policy*)
- ensuring that educators and staff comply with the service's *Road Safety and Safe Transport Policy*
- encouraging parents/guardians to comply with the service's *Road Safety and Safe Transport Policy*
- ensuring that excursions and service events are based on the educational program and meet the needs and interests of children and families at the service (refer to *Curriculum Development Policy*)
- ensuring that there is a clear purpose and educational value to each excursion or service event, and that this is communicated to parents/guardians
- considering the financial ability of families before deciding on an excursion/service event that would require an additional charge. Events that can be planned ahead of time should be included as an expenditure item in the service's budget and, as a result, will not incur additional charges (refer to *Fees Policy*)
- ensuring that proposed excursions/service events are inclusive of all children regardless of their abilities, additional needs or medical conditions (refer to *Inclusion and Equity Policy, Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- ensuring strategies are in place to provide an accurate attendance record (refer to *Definitions*) for children attending an excursion, and for children remaining at the service while an excursion is happening
- ensuring that there is an accurate list of all adults participating in an excursion, including parents/guardians, volunteers and students, with contact details for each individual
- ensuring that each child's personal medication and current medical management plan is taken on excursions and other offsite activities (refer to *Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- providing and maintaining a portable first aid kit that can be taken on excursions and other offsite activities
- providing portable first aid kits that contain the required medication for dealing with medical conditions
- providing a mobile phone to enable contact with parents/guardians and emergency services in the event of an incident, injury, trauma or illness (Regulation 98)

- ensuring emergency contact details for each child and the contact details of their medical practitioner are taken on excursions for notification in the event of an incident, injury, trauma or illness.

The Nominated Supervisor is responsible for:

- developing an *Excursions and Service Events Policy* in consultation with the Approved Provider, Certified Supervisor, educators, staff and parents/guardians at the service
- ensuring educators, staff, parents/guardians, volunteers, students and others at the service are provided with a copy of the *Excursions and Service Events Policy* and comply with its requirements
- ensuring that a child does not leave the service premises on an excursion unless prior written authorisation has been provided by the parent/guardian or person named in the child's enrolment record, and that the authorisation includes all details required under Regulation 102(4)
- ensuring that children are adequately supervised (refer to *Definitions*) at all times
- ensuring that educator-to-child ratios are maintained at all times, including during excursions and service events (Regulations 123, 355, 357, 360)
- ensuring only educators who are working directly with children are included in educator-to-child ratios
- ensuring that parents/guardians, volunteers, students and all adults participating in an excursion are adequately supervised at all times and are not left with sole supervision of individual children or groups of children (refer to *Participation of Volunteers and Students Policy*)
- ensuring that a risk assessment (refer to *Definitions*) is carried out for an excursion (in accordance with Regulation 101) before authorisation is sought from parents/guardians (Regulation 100)
- ensuring the risk assessment (refer to *Definitions*) identifies and assesses the risks, specifies how these will be managed and/or minimised, and includes all details required by Regulation 101
- developing strategies to improve children's safety in high risk situations such as excursions near water or near a road (refer to *Supervision of Children Policy, Water Safety Policy and Road Safety and Safe Transport Policy*)
- ensuring that educators and staff comply with the service's *Road Safety and Safe Transport Policy*
- encouraging parents/guardians to comply with the service's *Road Safety and Safe Transport Policy*
- ensuring that excursions and service events are based on an approved learning framework, the developmental needs, interests and experiences of each child, and take into account the individual differences of each child (refer to *Curriculum Development Policy*)
- ensuring the purpose and educational value of each excursion or service event is communicated to parents/guardians

- considering the financial ability of families before deciding on an excursion/service event that would require an additional charge. Events that can be planned ahead of time should be included as an expenditure item in the service's budget and, as a result, will not incur additional charges (refer to *Fees Policy*)
- ensuring that proposed excursions/service events are inclusive of all children regardless of their abilities, additional needs or medical conditions (refer to *Inclusion and Equity Policy, Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- ensuring an accurate attendance record (refer to *Definitions*) is kept for children attending an excursion, and for children remaining at the service while an excursion is happening
- ensuring that there is an accurate list of all adults participating in an excursion, including parents/guardians, volunteers and students, with contact details for each individual
- ensuring that each child's personal medication and current medical management plan is taken on excursions and other offsite activities (refer to *Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- ensuring that a portable first aid kit (including required medication for dealing with medical conditions) is taken on excursions and other offsite activities
- ensuring a mobile phone, the emergency contact details for each child and the contact details of their medical practitioner are taken on excursions for notification in the event of an incident, injury, trauma or illness
- ensuring sunscreen (if required) is taken on excursions/service events
- displaying a notice at the service indicating that children are on an excursion, and including the location of the excursion and expected time of return to the service.

Certified Supervisors and other educators are responsible for:

- developing an *Excursions and Service Events Policy* in consultation with the Approved Provider, Nominated Supervisor and parents/guardians at the service
- reading and complying with the requirements of the *Excursions and Service Events Policy*
- providing parents/guardians or a person named in the child's enrolment record with an excursion/service event authorisation form
- checking that a parent/guardian or person named in the child's enrolment record has completed, signed and dated the excursion/service event authorisation form prior to the excursion
- allowing a child to participate in an excursion or service event only with the written authorisation of a parent/guardian or person named in the child's enrolment record
- maintaining the required educator-to-child ratios at all times, and adequately supervising (refer to *Definitions*) children during excursions and service events
- adequately supervising parents/guardians, volunteers, students and all adults participating in an excursion, and ensuring that they are not left with sole supervision of individual children or groups of children (refer to *Participation of Volunteers and Students Policy*)

- undertaking a risk assessment (refer to *Definitions*) for an excursion or service event prior to obtaining written authorisation from parents/guardians
- ensuring the risk assessment (refer to *Definitions*) identifies and assesses the risks, specifies how they will be managed and/or minimised, and includes all details required by Regulation 101
- implementing strategies to improve children's safety in high risk situations such as excursions near water or near a road (refer to *Supervision of Children Policy, Water Safety Policy and Road Safety and Safe Transport Policy*)
- complying with the service's *Road Safety and Safe Transport Policy*
- developing excursions and service events based on an approved learning framework, the developmental needs, interests and experiences of each child, and the individual differences of each child (refer to *Curriculum Development Policy*)
- communicating the purpose and educational value of each excursion or service event to parents/guardians
- including all children in excursions and service events regardless of their abilities, additional needs or medical conditions (refer to *Inclusion and Equity Policy, Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- taking each child's personal medication and current medical management plan on excursions and other offsite activities (refer to *Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*)
- taking a portable first aid kit (including required medication for dealing with medical conditions) on excursions and other offsite activities
- keeping an accurate attendance record (refer to *Definitions*) of children attending excursions, and for children remaining at the service while an excursion is happening
- keeping an accurate list of all adults participating in an excursion, including parents/guardians, volunteers and students, with contact details for each individual
- taking a mobile phone, a copy of the attendance record, emergency contact details for each child and the contact details of the child's medical practitioner on excursions for notification in the event of an incident, injury, trauma or illness
- taking sunscreen (if required) on excursions/service events
- discussing the aims and objectives of the excursion or service event, and items of special interest, with children prior to undertaking the activity
- informing parents/guardians of items required by children for the excursion or service event e.g. snack/lunch, sunscreen, coat etc.

Parents/guardians are responsible for:

- reading and complying with the requirements of this *Excursions and Service Events Policy*
- completing and signing the authorised nominee section (refer to *Definitions*) of their child's enrolment form (refer to *Enrolment and Orientation Policy*) before their child commences at the service

- completing, signing and dating excursion/service event authorisation forms
- providing written authorisation for their child to leave the service premises on routine outings
- reading the details of the excursion or service event provided by the service and asking for additional information if required
- providing items required by their child for the excursion or service event e.g. snack/lunch, sunscreen, coat etc.
- understanding that, if they participate in an excursion or service event as a volunteer, they will be under the immediate supervision of an educator or the Approved Provider at all times
- if participating in an excursion or service event, informing an educator immediately if a child appears to be missing from the group
- supervising and caring for siblings and other children in their care who are not enrolled in the program
- complying with all service policies while participating in an excursion or service event including the *Code of Conduct Policy, Road Safety and Safe Transport Policy, Sun Protection Policy and Hygiene Policy*.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2017

HYGIENE POLICY

Best Practice – Quality Area 2

PURPOSE

This policy will provide guidelines for procedures to be implemented at Rolling Hills Preschool to ensure:

- effective and up-to-date control of the spread of infection
- the provision of an environment that is safe, clean and hygienic.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to protecting all persons from disease and illness by minimising the potential for infection through:

- implementing and following effective hygiene practices
- implementing infection control procedures to minimise the likelihood of cross-infection and the spread of infectious diseases and illnesses to children, staff and any other persons in attendance at the service
- fulfilling the service's duty of care requirement under the *Occupational Health and Safety Act 2004*, the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011* to ensure that those involved with the service are protected from harm
- informing educators, staff, volunteers, children and families about the importance of adhering to the *Hygiene Policy* to maintain a safe environment for all users, and communicating the shared responsibility between all involved in the operation of the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool, including during excursions and offsite activities.

BACKGROUND AND LEGISLATION

Background

Infections are common in children and often lead to illness. A person with an infection may or may not show signs of illness and, in many instances, the infectious phase of the illness may be in the period before symptoms become apparent, or during the recovery phase. While it is not

possible to prevent all infections in education and care environments, services can prevent or control the spread of many infectious diseases by adopting simple hygiene practices.

An infection can be spread when an infected person attends the service premises and contamination occurs. A service can contribute to the spread of an infection through poor hygiene practices that allow infectious organisms to survive or thrive in the service environment.

The implementation of appropriate hygiene and infection control procedures aims to break the cycle and prevent the spread of infections at every stage. The National Health and Medical Research Council (NHMRC) suggest that to reduce illness in education and care services, the three most effective methods of infection control are:

- effective hand washing
- exclusion of sick children, staff and visitors
- immunisation.

Other strategies to prevent infection include:

- cough etiquette
- appropriate use of gloves
- effective cleaning of the service environment.

The NHMRC suggests that if these strategies are not implemented, all other procedures described in the service's *Hygiene Policy* will have reduced effectiveness in preventing the spread of infection and illness.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 77, 106, 109, 112, 168
- Food Act 1990
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted
 - Element 2.1.3: Effective hygiene practices are promoted and implemented
 - Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
- *Occupational Health and Safety Act 2004*
- *Public Health and Wellbeing Act 2008*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Cleaning: A process that removes visible contamination such as food waste, dirt and grease from a surface. This process is usually achieved by the use of water and detergent. During this process, micro-organisms will be removed but not destroyed.

Communicable disease: A disease capable of being transmitted from an infected person or species to a susceptible host, either directly or indirectly.

Cough etiquette: The correct way to prevent the spread of infectious organisms that are carried in droplets of saliva is to cough or sneeze into the inner elbow or to use a tissue to cover the mouth and nose. Place all tissues in the rubbish bin immediately and clean hands with either soap and water or a disinfectant hand rub.

Hygiene: The principle of maintaining health and the practices put in place to achieve this.

Infectious disease: A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service (refer to *Dealing with Infectious Diseases Policy*).

Neutral detergent: A cleaning agent available commercially and labelled as 'neutral' or 'neutral pH'.

Sanitising: A process that destroys micro-organisms. Sanitising a surface can reduce the number of micro-organisms present. The process of sanitisation usually involves ensuring a surface is thoroughly cleaned with both heat and water, followed by the use of chemicals.

SOURCES AND RELATED POLICIES

Sources

- Department of Health, Victoria, Food Safety: <http://www.health.vic.gov.au/foodsafety/>
- Communicable Diseases Section, Public Health Group, Victorian Department of Human Services (2005) *The Blue Book: Guidelines for the control of infectious diseases*. Available at: <http://docs.health.vic.gov.au/docs/doc/The-blue-book>
- National Health and Medical Research Council (2013) *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition): <http://www.nhmrc.gov.au/guidelines/publications/ch55>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Dealing with Infectious Diseases Policy*
- *Dealing with Medical Conditions Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that all staff and volunteers are provided with a copy of this policy and have a clear understanding of the procedures and practices outlined within
- ensuring the Nominated Supervisor, educators, staff and volunteers at the service implement adequate health and hygiene practices, and safe practices for handling, preparing and storing food (Regulation 77(1))
- establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy
- developing an appropriate cleaning and sanitising schedule that outlines daily, weekly, monthly, quarterly and annual cleaning and sanitising requirements and responsibilities
- arranging for the service to be cleaned and sanitised regularly, including floors and other surfaces, as per the cleaning contract and schedule
- reviewing the cleaner's contract and schedule on an annual basis
- contacting the local council's Environmental Health Officer for information about obtaining a needle/syringe/sharps disposal unit and instructions for its use
- ensuring the service has laundry facilities or access to laundry facilities, or other arrangements for dealing with soiled clothing, nappies and linen, including hygienic facilities for storage prior to their disposal or laundering (Regulation 106(1))
- ensuring that the laundry and hygiene facilities are located and maintained in a way that does not pose a risk to children (Regulation 106(2))
- ensuring that there are adequate and appropriate hygiene facilities provided for nappy changing which are designed, located and maintained in such a way that prevents unsupervised access by children (Regulations 112(2)&(4))
- ensuring that adequate, developmental and age-appropriate toilet, washing and drying facilities are provided for use by children, and that these are safe and accessible (Regulation 109)
- reviewing staff training needs in relation to understanding and implementing effective hygiene practices in early childhood settings
- providing a copy of the NHMRC guidelines for the prevention of infectious diseases in child care for the service
- providing hand washing guidelines for display at each hand washing location
- ensuring there is an adequate supply of non-toxic cleaning and hygiene products, including gloves, at all times.

The Nominated Supervisor is responsible for:

- implementing and ensuring that all staff members and volunteers at the service follow adequate health and hygiene practices, and safe practices for preparing, handling and storing food to minimise risks to children (Regulation 77(2))

- developing effective hygienic systems for cleaning, such as using colour-coded sponges/cloths in each area
- ensuring sponges are cleaned, rinsed and stored separately, and replaced regularly
- ensuring that an inspection of the outdoor areas, in particular the sand and soft-fall areas, are conducted daily to ensure they are maintained in a safe and hygienic manner
- informing the Approved Provider of any issues that impact on the implementation of this policy
- actively encouraging parents/guardians to keep children who are unwell at home to prevent the spread of infection to other children and educators
- storing or presenting items, such as beds, bedding and sunhats, in such a way as to prevent cross-contamination
- ensuring that there is a regular and thorough cleaning and disinfecting schedule for all equipment and toys
- ensuring any chemicals and cleaning agents are non-toxic and stored out of reach of children
- ensuring that all educators/staff wear disposable gloves when changing nappies or dealing with open wounds or other body fluids, and dispose of those gloves and soiled materials in a sealed container or plastic bag
- maintaining the service in a clean and hygienic manner throughout the day, such as wiping benches and tables before and after eating, and cleaning up spills
- actively encouraging educators and staff who have, or are suspected of having an infectious disease to not attend the service in order to prevent the spread of infection to others attending the service.

Certified Supervisors and other educators are responsible for:

- implementing and promoting correct hand washing and hygiene practices, as outlined in this policy
- maintaining the service in a clean and hygienic manner throughout the day, such as wiping benches and tables before and after eating, and cleaning up spills
- conducting a daily inspection of the outdoor areas, in particular the sand and soft-fall areas, to ensure they are maintained in a safe and hygienic manner
- informing the Approved Provider of any issues that impact on the implementation of this policy
- actively encouraging parents/guardians to keep children who are unwell at home to prevent the spread of infection to other children and educators
- being conscious of their responsibility to not attend the service when they have or suspect they have an infectious disease.

In relation to the toileting of children:

- ensuring soap and drying facilities are available at all times when children are in attendance at the service, including ensuring paper towels are available if hand-dryers are not working

- ensuring children do not share the use of items related to personal care, such as hand towels for drying hands, toothbrushes and hairbrushes
- encouraging children to flush the toilet after use
- encouraging and assisting (where required) children to wash their hands according to hand washing guidelines after toileting
- encouraging children to tell a staff member if they have had a toileting accident
- monitoring and maintaining toileting facilities in a safe, clean and hygienic manner while children are in attendance; this requires periodic checking of the bathroom area
- respecting diverse styles of toileting children due to cultural or religious practices
- respecting the possible need to maintain privacy of toileting and dressing.

In relation to cleaning toys, clothing and the service in general:

- removing toys that a child has sneezed or coughed on (place in a 'toys-to-be-cleaned' box)
- wearing gloves when cleaning (general purpose gloves are sufficient; wash and hang outside to dry when finished)
- washing mouthed toys daily using warm water and detergent and, if possible, drying in the sun
- wiping over books with a moist cloth treated with detergent
- ensuring washable toys and equipment are cleaned term by term or annually, as required
- washing and disinfecting mattress covers and linen, where applicable.

In relation to children's contact with one another:

- educating and encouraging children in good personal hygiene practices, such as:
 - washing their hands after blowing and wiping their nose
 - not touching one another when they are cut or bleeding
 - disposing of used tissues promptly and appropriately, and not lending them to other children
 - using their own equipment for personal care, such as toothbrushes, hats, brushes and combs
 - only touching the food they are going to eat
 - using their own drink bottles or cups.

In relation to indoor and outdoor environments:

- keeping the indoor and outdoor environments as clean and hygienic as possible at all times, including the safe disposal of discarded needles/syringes/sharps
- promptly removing blood, urine and faeces (including animal) either indoors or outdoors, using the appropriate cleaning procedures
- covering the sandpit when not in use to prevent contamination
- emptying water containers, such as water trays, each day (refer to *Water Safety Policy*)

- disposing of any dead animals/insects found on the premises in an appropriate manner.

In relation to the safe handling of body fluids or materials in contact with body fluids:

- avoid direct contact with blood or other fluids
- not be at eye level when cleaning/treating a child's face that has blood on it, as a child's blood can enter the mouth/nose of a staff member when a child cries or coughs
- wear gloves wherever possible
- cover any cuts/abrasions on their own hands with a waterproof dressing.

In relation to effective environmental cleaning:

- clean with detergent and warm water followed by rinsing and drying to remove the bulk of infectious organisms from a surface. Particular attention should be paid to the following:
 - toilets/sinks must be cleaned daily and separate cleaning cloths/sponges must be used for each task
 - mouthed toys must be washed immediately or placed in a separate container for washing at a later time
 - all bench tops and floors must be washed regularly
 - children's cups/drink bottles used for water must be washed daily
 - when washing at the child care premises, staff are to consider washing items separately to minimise cross-contamination, for example, tea towels washed separately from sheets, face washers washed separately to play mats/rugs
 - if used nappy change areas/mats must be washed with detergent and warm water after use.

Parents/guardians are responsible for:

- keeping their child/ren home if they are unwell or have an infectious disease that requires their exclusion from the education and care service
- informing the service if their child has an infectious disease
- supporting this policy by complying with the hygiene practices when attending the service or when assisting with a service program or activity
- encouraging their child/ren to develop and follow effective hygiene practices at all times, including handwashing on arrival at the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness

- monitor the implementation, compliance, complaints and incidents in relation to this policy and ensure satisfactory resolutions have been achieved
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2019

INCIDENT, INJURY, TRAUMA AND ILLNESS POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will define the:

- procedures to be followed if a person is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma
- responsibilities of staff, parents/guardians and the Approved Provider when a person is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma
- practices to be followed to reduce the risk of an incident occurring at the service.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing a safe and healthy environment for all children, staff, volunteers, students on placement and any other persons participating in or visiting the service
- responding to the needs of an injured, ill or traumatised person at the service
- preventing injuries and trauma
- preventing the spread of illness through simple hygiene practices, monitoring immunisation records and complying with recommended exclusion guidelines
- maintaining a duty of care to children and users of Rolling Hills Preschool.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities at Rolling Hills Preschool, including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

People responsible for managing early childhood services and caring for children have a duty of care towards those children. All service staff have a responsibility and a duty of care to act to prevent accidents and emergencies at the service.

An approved service must have policies and procedures in place in the event that a child is injured, becomes ill or suffers trauma. These procedures should be followed and must include

the requirement that a parent/guardian be notified in the event of an incident, injury, illness or trauma relating to their child as soon as possible and within 24 hours of the occurrence.

The National Regulations require an accurate *Incident, Injury, Trauma and Illness Record* to be kept and stored confidentially until the child is 25 years old (Regulation 183(2)).

Under the national legislation, each service must ensure that an entry is recorded in the *Incident, Injury, Trauma and Illness Record* for the following occurrences:

- an incident in relation to a child, an injury received by a child or trauma to which a child has been subjected
- an illness that becomes apparent.

Details that must be entered in the *Incident, Injury, Trauma and Illness Record* include the following:

- the name and age of the child
- the circumstances leading to the incident, injury or trauma, or relevant circumstances surrounding the child becoming ill (including any symptoms)
- the time and date the incident occurred, the injury was received or the child was subjected to the trauma, or the apparent onset of the illness
- the action taken by the service, including any medication administered, first aid provided or medical personnel contacted
- details of any person who witnessed the incident, injury or trauma, or the apparent onset of illness
- the name of any person the service notified, or attempted to notify, of any incident, injury, trauma or illness that a child suffered while being educated and cared for by the service, and the time and date of the notifications/attempted notifications
- the name and signature of the person making an entry in the record, and the time and date that the entry was made
- signature of a parent/guardian to verify that they have been informed of the occurrence.

All information will be included in the *Incident, Injury, Trauma and Illness Record* as soon as is practicable, but not later than 24 hours after the incident, injury or trauma, or the onset of the illness.

Medical emergencies may include serious health issues such as asthma, anaphylaxis, diabetes, fractures, choking and seizures. Such emergencies generally involve only one child, however they can affect everyone in the children's service. In some cases it will be appropriate to refer to specific policies for guidance, such as the *Dealing with Medical Conditions Policy, Asthma Policy, Anaphylaxis Policy, Diabetes Policy and Epilepsy Policy*.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- Australian Standards AS3745–2002, Emergency control procedures for buildings, structures and workplaces
- *Education and Care Services National Law Act 2010*: Section 174(2)

- *Education and Care Services National Regulations 2011*: Regulations 77, 85–87, 103, 177, 183
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)
- *Occupational Health and Safety Act 2004* (Vic)
- *Occupational Health and Safety Regulations 2007*
- WorkSafe Victoria Compliance Code: *First aid in the workplace* (2008)
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.1: Each child’s health is promoted
 - Element 2.1.1: Each child’s health needs are supported
 - Element 2.1.3: Effective hygiene practices are promoted and implemented
 - Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
- *National Quality Standard*, Quality Area 3: Physical Environment
 - Standard 3.1: The design and location of the premises is appropriate for the operation of a service
 - Element 3.1.2: Premises, furniture and equipment are safe, clean and well maintained
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
 - Standard 7.3: Administrative systems enable the effective management of a quality service
 - Element 7.3.1: Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements
 - Element 7.3.2: Administrative systems are established and maintained to ensure effective operation of the service
- Therapeutic Goods Act 1989 (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from: <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

Emergency services: Includes ambulance, fire brigade, police and state emergency services.

First aid: The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website:

www.acecqa.gov.au/qualifications/approved-first-aid-qualifications

Hazard: A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

Incident: Any unplanned event resulting in or having potential for injury, ill health, damage or other loss.

Incident, Injury, Trauma and Illness Record: The Approved Provider must ensure an *Incident, Injury, Trauma and Illness Record* is kept in accordance with Regulation 87 of the *Education and Care Services National Regulations 2011*. A sample is available on the ACECQA website at: <http://www.acecqa.gov.au/sample-forms-and-templates-now-available>

Injury: Any physical damage to the body caused by violence or an incident.

Medication: Any substance, as defined in the *Therapeutic Goods Act 1989* (Cth), that is administered for the treatment of an illness or medical condition.

Medical management plan: A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCIA) action plan for anaphylaxis.

Medical attention: Includes a visit to a registered medical practitioner or attendance at a hospital.

Medical emergency: An injury or illness that is acute and poses an immediate risk to a person's life or long-term health.

Minor incident: An incident that results in an injury that is small and does not require medical attention.

Notifiable incident: An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website. This website also contains online reporting forms: www.worksafe.vic.gov.au

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Trauma: An emotional wound or shock that often has long-lasting effects or any physical damage to the body caused by violence or an incident.

SOURCES AND RELATED POLICIES

Sources

- ACECQA sample forms and templates:
<http://www.acecqa.gov.au/sample-forms-and-templates-now-available>

- *AV How to Call Card* (Ambulance Victoria): <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>
- Building Code of Australia: <http://www.abcb.gov.au/about-the-national-construction-code/the-building-code-of-australia>
- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition, 2013) National Health and Medical Research Council: <http://www.nhmrc.gov.au/guidelines/publications/ch55>
- VMIA Insurance Guide, Community Service Organisations program: www.vmia.vic.gov.au
- WorkSafe Victoria: *Guide to Incident Notification*: <http://www.worksafe.vic.gov.au/forms-and-publications/forms-and-publications/guide-to-incident-notification>
- WorkSafe Victoria: Online notification forms: <http://www.worksafe.vic.gov.au/safety-and-prevention/health-and-safety-topics/incident-notification>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Dealing with Infectious Diseases Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Emergency and Evacuation Policy*
- *Epilepsy Policy*
- *Excursions and Service Events Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Road Safety and Safe Transport Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that the premises are kept clean and in good repair
- ensuring that staff have access to medication, Incident, Injury, Trauma and Illness forms (available from ACECQA – refer to *Sources*) and WorkSafe Victoria incident report forms (refer to *Sources*)
- ensuring that the service has an occupational health and safety policy and procedures that outline the process for effectively identifying, managing and reviewing risks and hazards that are likely to cause injury, and reporting notifiable incidents to appropriate authorities (refer to *Occupational Health and Safety Policy*)

- ensuring that completed medication records are kept until the end of 3 years after the child's last attendance (Regulation 92, 183)
- ensuring that a parent/guardian of the child is notified as soon as is practicable, but not later than 24 hours after the occurrence, if the child is involved in any incident, injury, trauma or illness while at the service (Regulation 86)
- ensuring that Incident, Injury, Trauma and Illness Records are kept and stored securely until the child is 25 years old (Regulations 87, 183)
- ensuring that there is a minimum of one educator with a current approved first aid qualification on the premises at all times (refer to *Administration of First Aid Policy*)
- ensuring that there are an appropriate number of up-to-date, fully equipped first aid kits that are accessible at all times (refer to *Administration of First Aid Policy*)
- ensuring that the orientation and induction of new and relief staff include an overview of their responsibilities in the event of an incident or medical emergency
- ensuring that children's enrolment forms provide authorisation for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service
- ensuring that an incident report (SI01) is completed and a copy forwarded to the regional DEECD office as soon as is practicable but not later than 24 hours after the occurrence.

The Nominated Supervisor, Certified Supervisors and other educators are responsible for:

- ensuring that the *AV How to Call Card* (refer to *Sources*) is displayed near all telephones
- ensuring that volunteers and parents on duty are aware of children's medical management plans (refer to *Definitions*) and their responsibilities in the event of an incident, injury or medical emergency
- responding immediately to any incident, injury or medical emergency
- implementing individual children's medical management plans, where relevant
- notifying parents/guardians immediately after an incident, injury, trauma or medical emergency, or as soon as is practicable
- requesting the parents/guardians make arrangements for the child or children involved in an incident or medical emergency to be collected from the service, or informing parents/guardians if an ambulance has been called
- notifying other person/s as authorised on the child's enrolment form when the parents/guardians are not contactable
- recording details of any incident, injury or illness in the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*) as soon as is practicable but not later than 24 hours after the occurrence
- ensuring that regulatory and legislative responsibilities are met in relation to any incident, injury or medical emergency
- maintaining all enrolment and other medical records in a confidential manner (refer to *Privacy and Confidentiality Policy*)

- regularly checking equipment in both indoor and outdoor areas for hazards, and taking the appropriate action to ensure the safety of the children when a hazard is identified
- assisting the Approved Provider with regular hazard inspections
- reviewing the cause of any incident, injury or illness and taking appropriate action to remove the cause if required, for example, removing a nail found protruding from climbing equipment or retraining staff to adhere more closely to the service's *Hygiene Policy*
- notifying DEECD in writing within 24 hours of an incident involving the death of a child, or any incident, illness or trauma that requires treatment by a registered medical practitioner or admission to a hospital
- ensuring that the following contact numbers are displayed in close proximity of each telephone:
 - 000 (also keep an *AV How to Call Card* close to each telephone – refer to *Sources*)
 - DEECD regional office
 - Approved Provider
 - Asthma Victoria: (03) 9326 7055 or toll free 1800 645 130
 - Victorian Poisons Information Centre: 13 11 26
 - local council or shire.

When there is a medical emergency, educators will:

- call an ambulance, where necessary
- administer first aid, and provide care and comfort to the child prior to the parents/guardians or ambulance arriving
- implement the child's current medical management plan, where appropriate
- notify parents/guardians as soon as is practicable of any serious medical emergency, incident or injury concerning the child, and request the parents/guardians make arrangements for the child to be collected from the service and/or inform the parents/guardians that an ambulance has been called
- notify other person/s as authorised on the child's enrolment form, if the parents/guardians are not contactable
- ensure ongoing supervision of all children in attendance at the service
- accompany the child in the ambulance when the parents/guardians are not present, provided that staff-to-child ratios can be maintained at the service
- notify the Approved Provider of the medical emergency, incident or injury as soon as is practicable
- complete and submit an incident report to DEECD, the Approved Provider and the service's public liability insurer following a serious incident.

When a child develops symptoms of illness while at the service, educators will:

- ensure that the Nominated Supervisor, or person in day-to-day care of the service, contacts the parents/guardians or authorised emergency contact for the child to outline the signs and symptoms observed
- request that the child is collected from the service if the child is not well enough to participate in the program
- ensure that they separate the child from the group and have a staff member remain with the child until the child recovers, a parent/guardian arrives or another responsible person takes charge
- call an ambulance (refer to definition of *medical emergency*) if a child appears very unwell or has a serious injury that needs urgent medical attention
- ensure that the child is returned to the care of the parent/guardian or authorised emergency contact person as soon as is practicable
- ensure that, where medication, medical or dental treatment is obtained, the parents/guardians are notified as soon as is practicable and within 24 hours, and are provided with details of the illness and subsequent treatment administered to the child
- ensure that the Approved Provider is notified of the incident
- ensure that the *Incident, Injury, Trauma and Illness Record* is completed as soon as is practicable and within 24 hours of the occurrence.

Parents/guardians are responsible for:

- providing authorisation in their child's enrolment record for the service to seek emergency medical treatment by a medical practitioner, hospital or ambulance service (Regulation 161(1))
- payment of all costs incurred when an ambulance service is called to attend to their child at the service
- notifying the service, upon enrolment or diagnosis, of any medical conditions and/or needs, and any management procedure to be followed with respect to that condition or need (Regulation 162)
- ensuring that they provide the service with a current medical management plan, if applicable (Regulation 162(d))
- collecting their child as soon as possible when notified of an incident, injury or medical emergency involving their child
- informing the service of an infectious disease or illness that has been identified while the child has not attended the service, and that may impact on the health and wellbeing of other children, staff and parents/guardians attending the service
- being contactable, either directly or through emergency contacts listed on the child's enrolment form, in the event of an incident requiring medical attention
- signing the *Incident, Injury, Trauma and Illness Record*, thereby acknowledging that they have been made aware of the incident
- notifying the service by telephone when their child will be absent from their regular program

- notifying staff/educators if there is a change in the condition of their child's health, or if there have been any recent accidents or incidents that may impact on the child's care e.g. any bruising or head injuries.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider of Rolling Hills Preschool will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- review and analyse information gathered from the *Incident, Injury, Trauma and Illness Record* and staff first aid records regarding incidents at the service
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

NUTRITION AND ACTIVE PLAY POLICY

Mandatory – Quality Area 2

PURPOSE

Rolling Hills Preschool acknowledges the importance of healthy eating, oral health and physical activity and its contribution to good health and overall wellbeing.

This policy will provide guidelines to:

- promote a healthy lifestyle to children, educators and families at the service, including eating nutritious food, the importance of oral health and participating in physical activity
- provide opportunities for active play
- encourage children to make healthy lifestyle choices consistent with national and state guidelines and recommendations
- ensure that the dietary and cultural needs of children and families are taken into consideration when planning menus for service events and activities.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- promoting nutritious food and eating habits that will contribute to healthy growth and development in children
- providing a safe, supportive and social environment in which children can enjoy eating
- consulting and working collaboratively with families in regard to their child's nutrition and dietary requirements, including responding appropriately to food allergies and recognising cultural and religious practices and lifestyle choices
- ensuring that food and drink items provided by the service are consistent with national and state guidelines and recommendations
- providing children and families with opportunities to learn about food, nutrition, oral health and healthy lifestyles
- ensuring adequate health and hygiene procedures, including safe practices for handling, preparing, storing and serving food
- encouraging physical activity by providing a range of active play experiences for all children at the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisors, educators, staff, students on placement, volunteers, families, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

There are many benefits to promoting a healthy lifestyle in early childhood education and care settings, including the positive impact this has on each child's learning and development. Being made aware of positive eating behaviour, oral hygiene practices and the importance of physical activity from an early age can instil good habits that will remain throughout a person's life. Educators/staff are well placed to build this awareness among children and their families, while respecting lifestyle choices, and cultural and religious values.

The foods we eat provide our body with the nutrients we need to stay healthy. Good nutrition is the balanced eating of a variety of foods, and is especially important for children as they require a large amount of nutrients for growth and development. Research has shown that, when offered a variety of healthy foods, children can and do make good choices. It is also important to provide preschool children with a good foundation in healthy eating, as most children have formed lifelong eating habits before they reach school age. Tooth decay is Australia's most prevalent health problem despite being preventable. It is important to note that oral health promotion is complementary to promoting healthy eating. Education and care settings provide many opportunities for children to experience a range of healthy food, and to learn about food choices from educators and other children (*Belonging, Being & Becoming – The Early Years Learning Framework for Australia*, p30 – refer to *Sources*).

Active play (play that involves using the large muscles in the body) develops a strong and healthy body, builds motor and co-ordination skills, creates a sense of wellbeing and helps protect from disease. Active play is about moving, being and doing.

A strong sense of health and wellbeing, supported by good nutrition and an active lifestyle, can provide children with confidence, energy and optimism that will contribute to their ability to concentrate, co-operate and learn (*Belonging, Being & Becoming – The Early Years Learning Framework for Australia*, p30 – refer to *Sources*). Learning about healthy lifestyles, including nutrition and active play, links directly to Outcome 3 in both the *Early Years Learning Framework* and the *Victorian Early Years Learning and Development Framework* (refer to *Sources*).

The Australian Government has produced guidelines, recommendations and resources for healthy eating and physical activity in early childhood settings, including the National Health and Medical Research Council's *Australian Dietary Guidelines* and *Infant Feeding Guidelines* (refer to *Sources*) and the *Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood* resources (refer to *Sources*). Practical, healthy eating advice is also available to early childhood services and schools via a telephone advice line: the Victorian Healthy Eating Advisory Service (Healthy Together Healthy Eating Advisory Service – refer to *Sources*), run by Nutrition Australia. Early childhood education and care services can also register for the *Victorian Prevention and Health Promotion Achievement Program* (refer to *Sources*). This program is designed to create

safe, healthy and friendly environments for learning, by promoting physical, mental and social health and wellbeing.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Australia New Zealand Food Standards Code*
- *Child Wellbeing and Safety Act 2005*
- *Disability Discrimination Act 1992 (Cth)*
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011: Regulations 77–78, 79–80 (if the service provides food), 168*
- *Equal Opportunity Act 2010 (Vic)*
- *Food Act 1984 (Vic)*
- *National Quality Standard, Quality Area 2: Children’s Health and Safety*
 - Standard 2.2: Healthy eating and physical activity are embedded in the program for children
 - Element 2.2.1: Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child
 - Element 2.2.2: Physical activity is promoted through planned and spontaneous experiences and is appropriate for each child
- *Occupational Health and Safety Act 2004*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – Comlaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Active play: Large muscle-based activities that are essential for a child’s social, emotional, cognitive and physical growth and development.

Adequate supervision: (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

Healthy eating: Describes eating patterns that provide all the recommended nutrients for growth and development, and good health and wellbeing, now and in the future. It also refers to preparing, serving and eating food in a way that recognises its importance as a social and cultural activity.

Nutrition: The process of providing or receiving nourishing substances.

Oral health: The absence of active disease in the mouth. It affects overall well-being and enables people to participate and socialise without discomfort or embarrassment.

‘Sometimes’ foods and drinks: Food and drink items that are high in fat, sugar and salt, and that contain minimal vitamins, minerals or fibre.

SOURCES AND RELATED POLICIES

Sources

- *Australian Dietary Guidelines* (2013) National Health and Medical Research Council: <http://www.nhmrc.gov.au/guidelines/publications/n55>
- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia:* <http://education.gov.au/early-years-learning-framework>
- Better Health Channel: www.betterhealth.vic.gov.au
- Cancer Council Australia – for information on sun safety: www.cancer.org.au/sunsmart
- Cavallini, I and Tedeschi, M (eds) (2008), *The Languages of Food: recipes, experiences, thoughts*. Reggio Children Publications
- Dental Health Services Victoria – includes resources on oral health: www.dhsv.org.au
- Early Learning Association Australia – Road Safety Education: https://elaa.org.au/services_resources/our_services
- Food Safety Victoria, Department of Health – Food Safety and Regulation: 1300 364 352
- Food Standards Australia New Zealand – for information on food safety and food handling: www.foodstandards.gov.au
- *Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood:* www.health.gov.au/internet/main/publishing.nsf/Content/phd-early-childhood-nutrition-resources

- *Healthy Together Healthy Eating Advisory Service (HEAS)* provides advice for Victorian early childhood education and care services, primary and secondary schools, hospitals and workplaces on healthy eating, including:
 - over-the-phone advice from nutrition experts on providing healthy food and drink to children
 - menu assessments
 - direct contact through an easy-to-access email address (Nutrition Australia).
 Contact HEAS: <http://heas.healthytogether.vic.gov.au/>
 phone 1300 225 288 or email: heas@nutritionaustralia.org
- *Infant Feeding Guidelines* (2013) National Health and Medical Research Council: <http://www.nhmrc.gov.au/guidelines/publications/n56>
- Kids and Traffic – Early Childhood Road Safety Education Program: www.kidsandtraffic.mq.edu.au
- Kidsafe: the Child Accident Prevention Foundation of Australia – for information on preventing childhood accidents in children under the age of 15 years: www.kidsafe.org.au
- Murdoch Childrens Research Institute, Royal Children’s Hospital Melbourne, *Limit ‘Sometimes’ Foods* Background Paper: [http://www.goforyourlife.vic.gov.au/hav/admin.nsf/Images/Limit_sometimes_foods_background_paper.pdf/\\$File/Limit_sometimes_foods_background_paper.pdf](http://www.goforyourlife.vic.gov.au/hav/admin.nsf/Images/Limit_sometimes_foods_background_paper.pdf/$File/Limit_sometimes_foods_background_paper.pdf)
- Nitzke, S, Riley, D, Ramminger, A and Jacobs, G (2010), *Rethinking Nutrition: Connecting Science and Practice in Early Childhood Settings*. Redleaf Press, St Paul, USA
- Oberklaid, F (2004), *Health in Early Childhood Settings: From Emergencies to the Common Cold*. Pademelon Press, NSW
- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition, 2013) National Health and Medical Research Council: <http://www.nhmrc.gov.au/guidelines/publications/ch55>
- SNAC – a website that provides activities, recipes, fact sheets and discussion boards to support early childhood educators. Developed by Edith Cowan University: <http://snacwa.com.au/>
- *Victorian Early Years Learning and Development Framework*: <http://www.education.vic.gov.au/Documents/childhood/providers/edcare/veyldframework.pdf>
- *Victorian Prevention and Health Promotion Achievement Program*: <http://www.health.vic.gov.au/prevention/achievementprogram.htm>

Service policies

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Curriculum Development Policy*

- *Dealing with Infectious Diseases Policy*
- *Diabetes Policy*
- *Excursions and Service Events Policy*
- *Food Safety Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Road Safety and Safe Transport Policy*
- *Sun Protection Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that the service environment and educational program supports children and families to make healthy choices for eating and active play
- providing ongoing information, resources and support to families, to assist in the promotion of optimum health, including oral health, for young children (refer to *Sources*)
- ensuring the implementation of adequate health and hygiene procedures, and safe practices for handling, preparing and storing food, to minimise risks to children being educated and cared for by the service (Regulation 77) (refer to *Hygiene Policy* and *Food Safety Policy*)
- ensuring that all educators/staff comply with the *Food Safety Act*
- ensuring that all educators/staff are aware of a child's food allergies and/or other medical conditions on enrolment or on initial diagnosis
- ensuring measures are in place to prevent cross-contamination of any food given to children with diagnosed food allergies and/or diabetes (refer to *Anaphylaxis Policy*, *Asthma Policy*, *Diabetes Policy* and *Food Safety Policy*)
- ensuring that all educators/staff are aware of, and plan for, the dietary needs of children diagnosed with diabetes (refer to *Diabetes Policy*)
- providing healthy suggestions for morning/afternoon tea and/or lunchboxes for children
- ensuring that fresh drinking water (preferably tap water) is readily available at all times, and reminding children to drink water throughout the day, including at snack/lunch times (Regulation 78(1)(a))
- ensuring that food and drinks are available to children at frequent and regular intervals throughout the day (Regulation 78(1)(b))
- ensuring that celebrations, fundraising activities and other service events are consistent with the purposes and values of this policy and service procedures.

The Nominated Supervisor is responsible for:

- ensuring that the service environment and the educational program supports children and families to make healthy choices for eating and active play

- ensuring the implementation of adequate health and hygiene procedures, and safe practices for handling, preparing and storing food, to minimise risks to children being educated and cared for by the service (Regulation 77) (refer to *Hygiene Policy* and *Food Safety Policy*)
- ensuring that all educators/staff comply with the *Food Safety Act*
- ensuring that all educators/staff are aware of a child's food allergies and/or other medical conditions on enrolment or on initial diagnosis
- ensuring measures are in place to prevent cross-contamination of any food given to children with diagnosed food allergies and/or diabetes (refer to *Anaphylaxis Policy*, *Asthma Policy*, *Diabetes Policy* and *Food Safety Policy*)
- ensuring that all educators/staff are aware of, and plan for, the dietary needs of children diagnosed with diabetes (refer to *Diabetes Policy*)
- ensuring that fresh drinking water (preferably tap water) is readily available at all times, and reminding children to drink water throughout the day, including at snack/lunch times (Regulation 78(1)(a)).
- ensuring that food and drinks are available to children at frequent and regular intervals throughout the day (Regulation 78(1)(b))
- registering the service with the *Victorian Prevention and Health Promotion Achievement Program* (refer to *Sources*)
- ensuring that cultural and religious practices/requirements of families are accommodated to support children's learning and development
- developing and reviewing guidelines for celebrations, fundraising activities and other service events in consultation with educators, staff, parents/guardians and families
- developing links with local and regional health services, community organisations and businesses that provide expertise, resources and support for healthy eating, oral health and active play.

Certified Supervisors and other educators/staff are responsible for:

- complying with the service's *Nutrition and Active Play Policy* and with the *Food Safety Act*
- implementing adequate health and hygiene procedures, and safe practices for handling, preparing and storing food, to minimise risks to children (refer to *Hygiene Policy* and *Food Safety Policy*)
- being aware of a child's food allergies and/or other medical conditions on enrolment at the service or on initial diagnosis
- implementing measures to prevent cross-contamination of any food given to children with diagnosed food allergies and/or diabetes (refer to *Anaphylaxis Policy*, *Asthma Policy*, *Diabetes Policy* and *Food Safety Policy*)
- being aware of, and planning for, the dietary needs of children diagnosed with diabetes (refer to *Diabetes Policy*)
- ensuring that the service environment and the educational program supports children and families to make healthy choices for eating, oral health and active play

- discussing healthy eating choices with children, introducing the concept of ‘sometimes’ foods and drinks, and role-modelling positive behaviours exploring and discussing diverse cultural, religious, social and family lifestyles
- considering this policy when organising excursions and service events
- supporting students and volunteers to comply with this policy while at the service
- keeping parents/guardians informed of current information relating to healthy eating, oral health and active play
- ensuring that fresh drinking water (preferably tap water) is readily available at all times, and reminding children to drink regularly throughout the day, including at snack/meal times
- ensuring that children can readily access their own clearly labelled drink containers (where this is a service practice)
- providing food and drinks at regular intervals, and encouraging children to actively participate in, and enjoy, snack/meal times without feeling rushed
- providing opportunities for children to learn about, and develop skills for oral health through the educational program
- providing adequate supervision (refer to *Definitions*) for all children during meal/snack times
- encouraging children to be independent at snack/meal times e.g. opening lunchboxes, pouring drinks, self-feeding, serving and using utensils in a culturally-sensitive way
- planning and providing outdoor, active play that is stimulating, promotes skill development, considers safety issues and provides adequate supervision (refer to *Definitions*)
- considering opportunities for children to be physically active indoors, particularly in adverse weather conditions
- providing daily opportunities for all children to participate in age-appropriate active play
- acting as positive role models by engaging in physical activity
- minimising and closely supervising screen-based activities, in line with recommended guidelines
- providing age-appropriate traffic safety education, including pedestrian and passenger safety to both children and parents/guardians at the service
- promoting safe behaviour through daily practice as part of the program.

Parents/guardians are responsible for:

- complying with the requirements of this policy
- providing details of specific nutritional/dietary requirements, including the need to accommodate cultural or religious practices or food allergies, on their child’s enrolment form, and discussing these with the Nominated Supervisor prior to the child’s commencement at the service, and if requirements change over time (refer to *Anaphylaxis Policy, Asthma Policy and Diabetes Policy*)
- communicating regularly with educators/staff regarding children’s specific nutritional requirements and dietary needs, including food preferences
- encouraging their child/ren to drink an adequate amount of water (preferably tap water)

- providing healthy, nutritious food for snacks/meals, including fruits and vegetables where applicable
- providing healthy, nutritious food, including fruits or vegetables for sharing at morning or afternoon tea, where applicable
- providing nutritious food and drinks for celebrations, fundraising activities and service events, consistent with service policy
- encouraging children to exercise by engaging in active play, and walking or riding a bike to the service where appropriate
- discussing appropriate road traffic safety and car safety practices, and role-modelling this behaviour.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2017

SUN PROTECTION POLICY

Mandatory – Quality Area 2

This policy was written in consultation with Cancer Council Victoria's SunSmart Program. The SunSmart Sample Sun Protection Policy was last updated in December 2013 and is incorporated into the Rolling Hills Preschool policy. For more detailed information visit the SunSmart website: sunsmart.com.au

PURPOSE

This policy will provide:

- guidelines to ensure children, educators, volunteers and others participating in Rolling Hills Preschool programs and activities maintain a healthy balance of ultraviolet (UV) radiation exposure
- information for parents/guardians, educators, volunteers and children attending Rolling Hills Preschool regarding a healthy balance of UV radiation exposure.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- promoting sun protection strategies for children, families, staff and visitors to minimise the harmful effects of over exposure to UV radiation, while allowing some UV exposure for vitamin D requirements
- ensuring that curriculum planning will minimise over exposure to UV radiation and also promote an awareness of sun protection and sun safe strategies
- providing information to children, educators, staff, volunteers, parents/guardians and others at the service about the harmful and beneficial effects of exposure to the sun's UV radiation.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

This policy will apply from the beginning of September until the end of April each year. During this period a combination of sun protection measures are to be used for all outdoor activities.

Sun protection may also be required at other times of the year when the UV Index level is at 3 or above. Information about the UV Index level is available in the weather section of the daily newspaper, on the SunSmart website at: www.sunsmart.com.au, as a free SunSmart app and as a free widget that can be added to websites.

BACKGROUND AND LEGISLATION

Background

Balanced exposure to UV radiation is important for health. Australia has one of the highest rates of skin cancer in the world. Research suggests that young children and babies have sensitive skin and are therefore more vulnerable to sunburn and skin damage. Exposure to the sun in the first 15 years plays a major role in the risk of developing skin cancer in later life.

It is also important to have a healthy balance of UV radiation exposure. Too little UV from the sun can lead to low vitamin D levels. Vitamin D is necessary for the development and maintenance of healthy bones and muscles, and for general health. Appropriate levels of sun exposure can vary from child to child. According to the World Health Organization and SunSmart recommendations, children with naturally very dark skin may not be required to wear sunscreen to help with vitamin D requirements. This should be discussed with parents/guardians prior to the child commencing at the service.

From May put sun gear away

Vitamin D is essential for healthy bones, muscles and general wellbeing. The best natural source of vitamin D is the sun's UV. From May to August when UV levels are low (below 3), Victorian services are advised to put sunhats and other sun protection gear away and ensure staff and children get some sun for vitamin D. At this time of the year, most people need to expose their face, arms and hands (or equivalent area of skin) to midday winter sun for 2-3 hours spread over the week. Those with naturally very dark skin may need 3-6 times this amount. Sun protection is not normally required at this time of year, unless near highly reflective surfaces such as snow, outside for extended periods or when the UV reaches 3 and above.

SunSmart's tips to help your service get some sun exposure for vitamin D:

- Physical activity assists with production of vitamin D, so get the children outside and active in the middle of the day
- Clothing acts as a barrier to vitamin D absorption, so put away the hat and roll up the sleeves when you're outdoors
- Upload [SunSmart's UV Alert widget](#) to your service's website to know the times when sun protection is or isn't required
- Share the vitamin D message with families using SunSmart's vitamin D information sheets available in 12 [different languages](#)
- Visit the SunSmart website at sunsmart.com.au where children can [create a personalised vitamin D poster](#).

It is a requirement under the *Occupational Health and Safety Act 2004* that employers provide a healthy and safe environment for all persons who access the service's facilities and/or programs.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of the children and requires that children are protected from hazards and harm.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Child Wellbeing and Safety Act 2005* (Vic) (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2010*: Section 167
- *Education and Care Services National Regulations 2011*: Regulations 113, 114, 168(2)(a)(ii)
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.3: Each child is protected
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *Occupational Health and Safety Act 2004*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au//>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Clothing for sun protection: Clothing that is loose-fitting, made from cool, densely woven fabric and covers as much skin as possible: tops with elbow-length sleeves and, if possible, collars and knee-length or longer-style shorts and skirts. Singlet tops and shoestring tops/dresses do not provide adequate protection in the sun.

Shade: An area sheltered from direct and indirect sun, such as a large tree, canopy, verandah or artificial cover. Shade can be built, natural or temporary and can reduce overall exposure to the sun’s UV by 75%. When combined with appropriate clothing, hats and sunscreen, children can be well protected from UV overexposure when outdoors. Research shows that spacious preschool environments with trees, shrubbery, and broken ground not only provides better sun protection in outdoor play but also triggers more physical activity.

Sunglasses: Sunglasses are optional. If worn, it is recommended that glasses are a close fitting, wrap-around style that meet the Australian Standard 1067 (Sunglasses: Category 2, 3 or 4) and cover as much of the eye area as possible. Wearing a hat with a brim that shades the eyes can also reduce UV radiation to the eyes by 50%. **Sunscreen:** SPF 30 or higher, broad-spectrum, water-resistant sunscreen. Sunscreen should be reapplied every two hours, even when labelled 4 hours water resistance. Monitor the expiry date and store in a cool, dry place. From 3 years of age, children are encouraged to apply their own sunscreen under supervision of staff.

SunSmart: The name of the program conducted by Cancer Council Victoria to promote a healthy UV exposure balance to help prevent skin cancer and maintain vitamin D: www.sunsmart.com.au

Sunhat: To help protect the neck, ears, temples, face and nose, SunSmart recommends broad-brimmed, legionnaire or bucket-style hats. Baseball caps and visors offer little protection to the cheeks, ears and neck, and are not recommended.

SOURCES AND RELATED POLICIES

Sources

- AS/NZS 4486.1:1997 – Playgrounds and Playground Equipment Part 1: Development, installation, inspection, maintenance and operation Shade/Sun Protection
- Australian Safety and Compensation Council (ASCC) 2008, *Guidance Note for the Protection of Workers from the Ultraviolet Radiation in Sunlight 2008*
- Cancer Council Australia: www.cancer.org.au/sunsmart
- *Get Up & Grow: Healthy eating and physical activity for early childhood*. Department of Health resources. Particularly Section 2 of the Director/Coordinator Book and the Staff Book: <http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-early-childhood-nutrition-resources>
- SunSmart: www.sunsmart.com.au

Service policies

- *Excursions and Service Events Policy*
- *Nutrition and Active Play Policy*
- *Occupational Health and Safety Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- maintaining membership of the SunSmart early childhood program
- ensuring that this policy is up to date with current SunSmart recommendations: www.sunsmart.com.au
- ensuring parents/guardians are informed about the *Sun Protection Policy* on enrolment, including the need to provide an appropriate sunhat and clothing for sun protection (refer to *Definitions*) for their child when attending the service
- providing a supply of sunscreen for use on all persons to whom this policy applies
- ensuring parents/guardians provide an authority for staff to apply sunscreen prior to their child commencing at the service and that this is stored with each child's enrolment record (refer to *General Definitions*)
- ensuring children wear appropriate sunhats, clothing for sun protection and sunscreen when attending the service
- providing appropriate spare sunhats for children and adults that will be laundered after each use
- ensuring there is adequate shade in the service grounds to protect children from overexposure to UV radiation (Regulation 114)
- ensuring that program planning includes the application of a combination of sun protection measures for outdoor activities during the times specified in the *Scope* of this policy
- ensuring that the availability of shade is considered in a risk assessment prior to conducting excursions and other outdoor events (Regulations 100, 101)

- ensuring that information on sun protection is incorporated into the educational program (refer to the SunSmart website)
- ensuring educators, staff, children and other participants at the service wear sunhats, clothing for sun protection and sunglasses (optional) when outside, apply sunscreen and seek shade during the times specified in the *Scope* of this policy
- ensuring educators and staff are aware of the special needs of infants including the need to keep babies under 12 months out of direct sun whenever UV levels are three and above
- reinforcing this policy by providing information on sun protection (available on the SunSmart website) to service users via newsletters, noticeboards, meetings and websites etc.

The Nominated Supervisor is responsible for:

- ensuring parents/guardians are informed of the *Sun Protection Policy* on enrolment, including the need to provide an appropriate sunhat and clothing for sun protection (refer to *Definitions*) for their child when attending the service
- obtaining a parent's/guardian's authority for staff to apply sunscreen prior to their child commencing at the service and storing this with each child's enrolment record (refer to *General Definitions*)
- ensuring program planning includes the application of a combination of sun protection measures for outdoor activities during the times specified in the *Scope* of this policy
- ensuring educators and staff are aware of the need to keep babies under 12 months out of direct sun whenever UV levels are three and above
- ensuring the SunSmart UV Alert on the SunSmart website is accessed to check the daily local sun protection times to assist with the implementation of this policy
- ensuring information on sun protection is incorporated into the educational program (refer to the SunSmart website)
- ensuring that the availability of shade is considered in a risk assessment prior to conducting excursions and other outdoor events (Regulations 100, 101).

Certified Supervisors and other educators are responsible for:

- accessing the SunSmart UV Alert on the SunSmart website to check the daily local sun protection times to assist with the implementation of this policy
- wearing sunhats, clothing for sun protection (refer to *Definitions*) and sunglasses (optional) when outside, applying sunscreen and seeking shade during the times specified in the *Scope* of this policy
- ensuring each child, and any other participant at the service, wears an appropriate sunhat, clothing for sun protection and sunscreen for all outdoor activities during the times specified in the *Scope* of this policy
- keeping babies under 12 months out of direct sun whenever UV levels are three and above
- checking that all sunhats brought to the service meet the SunSmart recommendation for adequate protection, are named and stored individually
- ensuring spare sunhats are laundered after each use

- applying sunscreen (refer to *Definitions*) to children's exposed skin – except in cases where parents/guardians have not given authority. Where possible this should be done 20 minutes before going outdoors. Children, where appropriate, will be encouraged to apply sunscreen with the assistance of an educator (sunscreen is to be reapplied every two hours)
- storing sunscreen in a cool place and monitoring the expiry date – including for sunscreen supplied by parents/guardians
- ensuring that children without appropriate sunhats or clothing for sun protection play in the shade or in a suitable area protected from the sun
- encouraging children to seek shade when playing outside and utilise shaded areas for outdoor equipment that is not fixed during the times specified in the *Scope* of this policy
- encouraging children to wear sunhats when travelling to and from the service
- ensuring that sun protection strategies are a priority when planning excursions
- co-operating with their employer with respect to any action taken by the employer to comply with the *Occupational Health and Safety Act 2004*.

Parents/guardians are responsible for:

- providing a named, SunSmart approved sunhat (refer to *Definitions*) for their child's use at the service
- applying sunscreen to their child before the commencement of each session during the times specified in the *Scope* of this policy
- providing written authority for staff to apply sunscreen to their child. Parents/guardians of children with naturally very dark skin may decide not to provide this authority to ensure their child receives adequate levels of vitamin D. This should also be discussed with educators at the service
- providing, at their own expense, an alternative sunscreen to be left at the service if their child has a particular sensitivity to the sunscreen provided by the service
- wearing a sunhat, clothing for sun protection (refer to *Definitions*) and sunglasses (optional) when outside at the service, applying sunscreen and seeking shade during the times specified in the *Scope* of this policy.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required

- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

ACKNOWLEDGEMENTS

This policy has been reviewed and approved by Cancer Council Victoria on 27 November 2013.

WATER SAFETY POLICY

Mandatory – Quality Area 2

PURPOSE

This policy will outline the procedures that apply to managing water safety, including safety during any water-based activities at Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing opportunities for children to explore their natural environment including through water play
- ensuring that children are protected from the risks associated with drowning or non-fatal drowning experiences
- ensuring that curriculum planning incorporates water safety awareness
- providing information to educators, staff, parents/guardians, volunteers and others at the service about water safety.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool, including during offsite excursions and activities.

BACKGROUND AND LEGISLATION

Background

The supervision and safety of children with and around water is of paramount importance. Learning spaces and environments should offer an array of possibilities and connect children with natural materials. Water is one experience that offers children sensory-rich, open-ended experiences that engage children's curiosity and imagination. Children may encounter these resources in the service environment and/or when on excursions. These experiences, especially those conducted with and near water, will be carefully supervised ensuring the safety of children and adults.

Water safety relates to access to water in the building, the playground or on excursions, and also to the availability of drinking water for children.

It is imperative that educators remain vigilant in their supervision of children in and around water, and are alert to potential risks in everyday practice in the learning environment.

Drowning is a leading cause of death for children in Victoria, with infants and toddlers the group most at risk. Non-fatal drowning incidents can result in permanent brain damage and disability. Knowledge of potential hazards associated with water will assist educators to provide a safe, stimulating environment for preschool children.

Drowning hazards include large bodies of water such as swimming pools, rivers, creeks, dams and ponds. Smaller bodies of water, including nappy buckets, water containers, pet water bowls and poor drainage which allows water to collect can also present drowning hazards for young children. Children can drown in as little as a few centimetres of water.

Keep Watch is a public education program of Royal Life Saving Society – Australia, aimed at preventing the drowning deaths of children under 5 years of age in all aquatic locations. The program has four key actions:

- **supervise** children constantly around water
- **restrict access** to water hazards by using child-proof barriers and fences
- provide **water awareness** training to children
- **resuscitation** saves lives – ensure that staff have completed current first aid training.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Child Wellbeing and Safety Act 2005* (Vic) (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2010*: Section 167
- *Education and Care Services National Regulations 2011*: Regulations 101(2), 168(2)(a)(iii)
- *National Quality Standard*, Quality Area 2: Children’s Health and Safety
 - Standard 2.3: Each child is protected
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Adequate supervision: (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate Supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

Approved first aid qualification: A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: www.acecqa.gov.au

Hazard: A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

Notifiable incident: An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website: www.worksafe.vic.gov.au

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Water hazard: (in relation to this policy) can lead to drowning or non-fatal drowning incidences. Drowning hazards include large bodies of water such as swimming pools, rivers, creeks, dams and ponds. Smaller bodies of water, including nappy buckets, water containers, pet water bowls and poor drainage which allows water to collect can also present drowning hazards for young children.

SOURCES AND RELATED POLICIES

Sources

- Royal Life Saving Society – Australia: www.royallifesaving.com.au
- Water Safety Victoria – Water Safety Guide: *Play it Safe by the Water*: www.watersafety.vic.gov.au

- Kidsafe – Water Safety Fact Sheet: www.kidsafevic.com.au

Service policies

- *Administration of First Aid Policy*
- *Emergency and Evacuation Policy*
- *Excursions and Service Events Policy*
- *Nutrition and Active Play Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Occupational Health and Safety Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that children are adequately supervised (refer to *Definitions*) at all times when near water hazards (refer to *Definitions*)
- ensuring that educator-to-child ratios are maintained at all times (*Education and Care Services National Law Act 2010: Sections 169(1)&(3), Education and Care Services National Regulations 2011: Regulations 123, 355, 357, 360*)
- conducting a risk assessment in relation to any water hazards on or near the premises that may be accessible to children
- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions and Service Events Policy*)
- ensuring that water hazards and risks associated with water-based activities are considered in a risk assessment prior to conducting excursions and other offsite events (Regulation 101)
- ensuring increased levels of supervision for an excursion to a location where there is a water hazard (refer to *Supervision of Children Policy*)
- conducting a regular safety check of the service premises (refer to *Occupational Health and Safety Policy*)
- ensuring any water hazards that are not able to be adequately supervised at all times are isolated from children by a child-resistant barrier or fence (particularly large bodies of water including swimming pools, rivers, ponds etc.)
- ensuring that an educator with a current approved first aid qualification (refer to *Definitions*) is in attendance and immediately available at all times children are being educated and cared for by the service (Regulation 136)
- ensuring that details of current approved first aid qualifications (refer to *Definitions*) are filed with each staff member's record
- reporting serious incidents (refer to *Definitions*) to DEECD
- reporting notifiable incidents (refer to *Definitions*) to WorkSafe Victoria

- ensuring that water safety awareness is embedded in the curriculum
- providing current information to parents about water safety.

The Nominated Supervisor is responsible for:

- assisting the Approved Provider to implement the *Water Safety Policy*
- ensuring parents/guardians are informed of the *Water Safety Policy* on enrolment
- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions and Service Events Policy*)
- ensuring information on water safety (refer to *Sources*) is incorporated into the educational program
- ensuring that children are adequately supervised (refer to *Definitions*) and protected from hazards and harm at all times
- ensuring that water hazards and risks associated with water-based activities are considered in a risk assessment prior to conducting excursions and other offsite events (Regulations 100, 101)
- ensuring permission is obtained from parents/guardians for an excursion to a location where there is a water hazard (refer to *Excursions and Service Events Policy*)
- ensuring increased levels of supervision for an excursion to a location where there is a water hazard (refer to *Supervision of Children Policy*)
- ensuring that an educator with a current approved first aid qualification (refer to *Definitions*) is in attendance and immediately available at all times children are being educated and cared for by the service
- ensuring that all educators' current approved first aid qualifications meet the requirements of the National Regulations and are approved by ACECQA (refer to *Administration of First Aid Policy*)
- informing the Approved Provider immediately if any serious or notifiable incidents (refer to *Definitions*) occur at the service.

Certified Supervisors and other educators are responsible for:

- providing adequate supervision (refer to *Definitions*) at all times
- undertaking a risk assessment prior to an excursion to a location where there is a significant water hazard (refer to *Excursions and Service Events Policy*)
- adjusting supervision strategies to suit the activities being undertaken (refer to *Supervision of Children Policy*)
- obtaining parental permission for an excursion to a location where there is a water hazard (refer to *Excursions and Service Events Policy*)
- maintaining a current approved first aid qualification (refer to *Definitions*)
- ensuring gates and other barriers restricting access to water hazards are closed at all times and that fences are kept clear at all times
- ensuring that containers of water (including nappy buckets and cleaning buckets) are sealed with child-proof lids

- ensuring wading/paddling pools, water play containers and portable water courses are emptied immediately after each use and stored in a manner that prevents the collection of water when not in use
- checking the outdoor learning environment at the beginning and end of each day for puddles or filled containers that could pose a potential risk to small children after heavy rain
- providing water safety education as a part of the service's program
- informing the Approved Provider immediately if any serious or notifiable incidents (refer to *Definitions*) occur at the service.

Parents/guardians are responsible for:

- supervising children in their care, including siblings, while attending or assisting at the service
- ensuring that doors, gates and barriers, including playground gates, are closed after entry or exit to prevent access to water hazards
- informing themselves about water safety
- ensuring their children understand the risks associated with water
- recognising when resuscitation is required and obtaining assistance
- considering undertaking approved first aid qualifications, as resuscitation skills save lives.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

OCCUPATIONAL HEALTH AND SAFETY POLICY

Mandatory – Quality Area 3

PURPOSE

This policy will provide guidelines and procedures to ensure that:

- all people who attend the premises of Rolling Hills Preschool, including employees, children, parents/guardians, students, volunteers, contractors and visitors, are provided with a safe and healthy environment
- all reasonable steps are taken by the Approved Provider, as the employer of staff, to ensure the health, safety and wellbeing of employees at the service.

POLICY STATEMENT

VALUES

Rolling Hills Preschool has a moral and legal responsibility to provide a safe and healthy environment for employees, children, parents/guardians, students, volunteers, contractors and visitors. This policy reflects the importance Rolling Hills Preschool places on the wellbeing of employees, children, parents/guardians, students, volunteers, contractors and visitors, by endeavouring to protect their health, safety and welfare, and integrating this commitment into all of its activities.

Rolling Hills Preschool is committed to ensuring that:

- the management group, staff and volunteers are aware of their health and safety responsibilities as employers, employees and volunteers
- systematic identification, assessment and control of hazards is undertaken at the service
- effective communication and consultation form a fundamental part of the management process to encourage innovative ways of reducing risk in the service environment
- training is provided to assist staff to identify health and safety hazards which, when addressed, will lead to safer work practices at the service
- it fulfils its obligations under current and future laws (in particular, the *Occupational Health and Safety Act 2004*), and that all relevant codes of practice are adopted and accepted as a minimum standard.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, children, parents/guardians, students on placement, volunteers, contractors and visitors attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Everyone involved in an early childhood education and care service has a role to play in ensuring the service's operations are safe and without risk to the health and safety of all parties. In Victoria, health and safety in the workplace is governed by a system of laws, regulations and compliance codes that set out the responsibilities of employers and employees to ensure safety is maintained at work.

The *Occupational Health and Safety Act 2004* (OHS Act) sets out the key principles, duties and rights in relation to workplace health and safety. The *Occupational Health and Safety Regulations 2007* specifies the ways duties imposed by the OHS Act must be undertaken and prescribes procedural/administrative matters to support the OHS Act, such as requiring licenses for specific activities, or the need to keep records or notify authorities on certain matters.

The legal duties of an **employer** under the OHS Act are:

- to provide and maintain a workplace that is safe and without risk to the health of employees. This responsibility extends to contractors for routine tasks over which the employer has management. For contractors completing non-routine tasks, the employer must ensure that the service's daily operations and layout do not pose unreasonable risks
- to ensure other individuals, such as families and visitors, are not exposed to health and safety risks arising from the organisation's activities
- to consult with employees about OHS matters that will, or will likely, affect employees directly, including identifying hazards and assessing risks, and making decisions about risk control measures.

The OHS Act places the responsibility on **employees** for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the employer, including following guidelines, attending OHS-related training, reporting incidents, co-operating with OHS investigations, encouraging good OHS practice with fellow employees and others at the service, and assisting the employer with conducting OHS inspections during operating hours
- not interfering with safety equipment provided at the service, such as fire extinguishers.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Accident Compensation Act 1985* (Vic)
- *AS/NZS 4804:2001 and 4801:2001 Occupational health and safety systems*
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
 - Standard 2.3: Each child is protected
 - Element 2.3.1: Children are adequately supervised at all times

- Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *National Quality Standard, Quality Area 3: Physical Environment*
 - Standard 3.1: The design and location of the premises is appropriate for the operation of a service
 - Element 3.1.1: Outdoor and indoor spaces, buildings, furniture, equipment, facilities and resources are suitable for their purpose
 - Element 3.1.2: Premises, furniture and equipment are safe, clean and well maintained
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
 - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2007*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury. In the context of this policy, duty of care refers to the responsibility of education and care services to provide children, staff, students, volunteers, contractors and anyone visiting the service with an adequate level of care and protection against reasonable foreseeable harm and injury.

Hazard: An element with the potential to cause death, injury, illness or disease.

Hazard identification: A process that involves identifying all foreseeable hazards in the workplace and understanding the possible harm that each hazard may cause.

Hazard management: A structured process of hazard identification, risk assessment and control, aimed at providing safe and healthy conditions for employees, contractors and visitors while on the premises of Rolling Hills Preschool or while engaged in activities endorsed by Rolling Hills Preschool.

Harm: Includes death, or injury, illness (physical or psychological) or disease that may be suffered by a person as a consequence of exposure to a hazard.

Material safety data sheet: Provides employees and emergency personnel with safety procedures for working with toxic or dangerous materials. The data sheet includes all relevant information about the material such as physical properties (e.g. melting/boiling point, toxicity and reactivity), health effects, first aid requirements and safe handling procedures (e.g. personal protective equipment, safe storage/disposal and management of spills).

OHS committee: A committee that facilitates co-operation between an employer and employees in instigating, developing and carrying out measures designed to ensure the health and safety of employees in the workplace.

Risk: The chance (likelihood) that a hazard will cause harm to individuals.

Risk assessment: A process for developing knowledge/understanding about hazards and risks so that sound decisions can be made about the control of hazards. Risk assessments assist in determining:

- what levels of harm can occur
- how harm can occur
- the likelihood that harm will occur.

Risk control: A measure, work process or system that eliminates an OHS hazard or risk, or if this is not possible, reduces the risk so far as is reasonably practicable.

SOURCES AND RELATED POLICIES

Sources

- *Early Childhood Management Manual*, ELAA
- *Getting into the Act*, WorkSafe Victoria
- *Getting help to improve health and safety*, WorkSafe Victoria
- *Guide to the OHS Act 2004*, WorkSafe Victoria
- *Managing safety in your workplace*, WorkSafe Victoria
- OHS in Early Childhood Services (ELAA): www.ohsinecservices.org.au
- WorkSafe Victoria: www.worksafe.vic.gov.au

Service policies

- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Emergency and Evacuation Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Participation of Volunteers and Students Policy*
- *Privacy and Confidentiality Policy*
- *Road Safety and Safe Transport Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider is responsible for:

- providing and maintaining a work environment that is safe and without risks to health (OHS Act: Section 21). This includes ensuring that:
 - there are safe systems of work

- all plant and equipment provided for use by staff, including machinery, appliances and tools etc., are safe and meet relevant safety standards
- substances, and plant and equipment, are used, handled, and stored safely
- material safety data sheets are supplied for all chemicals kept and/or used at the service (refer to: www.ohsinecservices.org.au)
- there are adequate welfare facilities e.g. first aid and dining facilities etc.
- there is appropriate information, instruction, training and supervision for employees
(Note: *This duty of care is owed to all employees, children, parents/guardians, volunteers, students, contractors and any members of the public who are at the workplace at any time*)
- ensuring there is a systematic risk management approach (refer to: www.ohsinecservices.org.au) to the management of workplace hazards. This includes ensuring that:
 - hazards and risks to health and safety are identified, assessed and eliminated or, if it is not possible to remove the hazard/risk completely, effectively controlled
 - measures employed to eliminate/control hazards and risks to health and safety are monitored and evaluated regularly
- ensuring regular safety audits of the following:
 - indoor and outdoor environments
 - all equipment, including emergency equipment
 - playgrounds and fixed equipment in outdoor environments
 - cleaning services
 - horticultural maintenance
 - pest control
- monitoring the conditions of the workplace and the health of employees (OHS Act: Section 22)
- protecting other individuals from risks arising from the service's activities, including holding a fete or a working bee etc., or any activity that is ancillary to the operation of the service e.g. contractors cleaning the premises after hours (OHS Act: Section 23)
- providing adequate instruction to staff in safe working procedures, and informing them of known hazards to their health and wellbeing that are associated with the work that they perform at the service
- ensuring that all plant, equipment and furniture are maintained in a safe condition
- developing procedures to guide the safe use of harmful substances, such as chemicals, in the workplace
- ensuring that OHS accountability is included in all position descriptions
- allocating adequate resources to implement this policy
- displaying this policy in a prominent location at the service premises

- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
 - implementing/practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
 - implementing and reviewing this policy in consultation with the Nominated Supervisor, educators, staff, contractors and parents/guardians
 - identifying and providing appropriate resources, induction and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
 - ensuring the Nominated Supervisor, educators, staff, contractors, volunteers and students are kept informed of any relevant changes in legislation and practices in relation to this policy
 - consulting appropriately with employees on OHS matters including:
 - identification of hazards
 - making decisions on how to manage and control health and safety risks
 - making decisions on health and safety procedures
 - the need for establishing an OHS committee and determining membership of the committee
 - proposed changes at the service that may impact on health and safety
 - establishing health and safety committees
 - notifying WorkSafe Victoria about serious workplace incidents, and preserving the site of an incident (OHS Act: Sections 38–39)
 - holding appropriate licenses, registrations and permits, where required by the OHS Act
 - attempting to resolve OHS issues with employees or their representatives within a reasonable timeframe
 - not discriminating against employees who are involved in health and safety negotiations
 - allowing access to an authorised representative of a staff member who is acting within his/her powers under the OHS Act
 - producing OHS documentation as required by inspectors and answering any questions that an inspector asks
 - not obstructing, misleading or intimidating an inspector who is performing his/her duties.
- The Nominated Supervisor is responsible for:***
- ensuring that all educators/staff are aware of this policy, and are supported to implement it at the service
 - organising/facilitating regular safety audits of the following:
 - indoor and outdoor environments
 - all equipment, including emergency equipment
 - playgrounds and fixed equipment in outdoor environments
 - cleaning services

- horticultural maintenance
- pest control
- ensuring that all cupboards/rooms are labelled accordingly, including those that contain chemicals and first aid kits, and that child-proof locks are installed on doors and cupboards where contents may be harmful
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
- ensuring that all equipment and materials used at the service meet relevant safety standards
- ensuring the service is up to date with current legislation on child restraints in vehicles if transporting children (refer to *Road Safety and Safe Transport Policy*)
- implementing and practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
- implementing and reviewing this policy in consultation with the Approved Provider, educators, staff, contractors and parents/guardians
- identifying and providing appropriate resources and training to assist educators, staff, contractors, visitors, volunteers and students to implement this policy
- keeping up to date and complying with any relevant changes in legislation and practices in relation to this policy.

Certified Supervisors and other educators/staff are responsible for:

- taking care of their own safety and the safety of others who may be affected by their actions
- co-operating with reasonable OHS actions taken by the Approved Provider, including:
 - following OHS rules and guidelines
 - helping to ensure housekeeping is of the standard set out in service policies
 - attending OHS training as required
 - reporting OHS incidents
 - co-operating with OHS investigations
 - encouraging good OHS practices with fellow employees and others attending the service
 - assisting the Approved Provider with tasks relating to OHS, such as conducting OHS inspections during working hours
- not interfering with safety equipment provided by the Approved Provider
- practising emergency and evacuation procedures (refer to *Emergency and Evacuation Policy*)
- ensuring the physical environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy*)
- maintaining a clean environment daily, and removing tripping/slipping hazards as soon as these become apparent
- keeping up to date with current legislation on child restraints in vehicles if transporting children (refer to *Road Safety and Safe Transport Policy*)

- implementing and reviewing this policy in consultation with the Approved Provider, Nominated Supervisor, educators, staff, contractors and parents/guardians.

Students on placements, volunteers, contractors and parents/guardians at the service are responsible for:

- being familiar with this policy
- co-operating with reasonable OHS rules implemented by the service
- not acting recklessly and/or placing the health and safety of other adults or children at the service at risk.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to identifying and responding to occupational health and safety issues
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures (Regulation 172(2)).

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

ENVIRONMENTAL SUSTAINABILITY POLICY

Best Practice – Quality Area 3

PURPOSE

This policy will provide guidelines to assist Rolling Hills Preschool to take an active role in caring for the environment, and promoting and contributing to a sustainable future.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- promoting respect for, and an appreciation of, the natural environment among all at the service
- fostering children’s capacity to understand and respect the natural environment, and the interdependence between people, plants, animals and the land
- supporting the development of positive attitudes and values in line with sustainable practices
- ensuring that educators and other staff engage in sustainable practices during the operation of the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

“One of the most significant responsibilities that [early childhood] professionals have is to support children to retain the sense of awe and wonder that they are born with, to add to that a desire to nurture and protect what is beautiful, and to encourage them to appreciate that there are many possibilities for honouring life and wonders that the world holds” (Stonehouse, A. (2006) NSW Curriculum Framework for Children’s Services – refer to Sources).

Current research confirms that experiences in the early years help establish lifelong behaviour and values, and this reinforces the need for sustainability education to be included in early childhood programs. It is important for children to understand their place in the world and the role that they can play in protecting the environment. Children should learn to be environmentally responsible and be empowered to make a difference, and this learning should not wait until the ‘formal education’ of primary school. Elliot and Davis (refer to *Sources*) state that “early childhood educators have an active and significant role to play ensuring children

experience connections with the natural environment in meaningful way which will ultimately promote action for sustainability”.

Environmental education can be defined as learning *about* the environment and how natural systems function; the interconnectedness of plants, animals, humans and the planet we inhabit. Environmental education promotes the growth of knowledge, skills and values about the environment, often with a focus on science and nature. In an early childhood setting, environmental education is integrated into everyday decisions made as part of the curriculum.

Sustainability can be defined in a broader and more holistic context of education *for* the environment. The complexities of social, environmental and economic systems are acknowledged, and their implications for sustaining life are considered. The aim of sustainability education is to promote a sense of responsibility, respect, empowerment, active participation, enquiry and a desire for social change (adapted from ECA Environmental Sustainability Policy 2005). The goal of sustainability education is to empower children and adults to think and act in ways that meet their immediate needs without jeopardising the potential of future generations to meet *their* own needs. Sustainable practice in early childhood settings requires a holistic approach that integrates all aspects of sustainability into service operations.

The *National Quality Standard* (Quality Area 3: Physical Environment) includes a discussion on the service taking an active role in caring for its environment and contributing to a sustainable future (Standard 3.3). As service providers to the community, education and care services have an opportunity not only to make reductions to waste, water and energy consumption through their operations, but to role-model sustainable living to young children in a world facing climate change, increasing levels of air, land and water pollution, and depleted natural resources.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
- *National Quality Standard*, Quality Area 3: Physical Environment
 - Standard 3.3: The service takes an active role in caring for its environment and contributes to a sustainable future
 - Element 3.3.1: Sustainable practices are embedded in service operations
 - Element 3.3.2: Children are supported to become environmentally responsible and show respect for the environment

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Environmental sustainability: The responsible use and management of the planet’s resources to ensure that they remain available and uncompromised for future generations to use and enjoy.

SOURCES AND RELATED POLICIES

Sources

- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia:* <http://education.gov.au/early-years-learning-framework#key%20documents>
- Davis, J. M. and Elliott, S. (2004) Mud pies and daisy chains: Connecting young children and nature. In *Every Child*, 10(4) p4. Available at: http://www.earlychildhoodaustralia.org.au/pdf/every_child/ec0404_mudpies.pdf
- Early Childhood Australia: http://www.earlychildhoodaustralia.org.au/resource_themes/
- ‘Educators’ Guide to the Early Years Learning Framework for Australia: <http://docs.education.gov.au/documents/educators-guide-early-years-learning-framework-australia>
- Environmental Education in Early Childhood (EEEC): <http://www.eeec.org.au/index.php>
- *Guide to the National Quality Standard, ACECQA:* www.acecqa.gov.au
- Hughes, M. (2007) *Climbing the little green steps: How to promote sustainability within early childhood services in your local area*, Gosford and Wyong Council: <http://www.dec.nsw.gov.au/what-we-offer/regulation-and-accreditation/early-childhood-education-care/useful-links-and-resources/sustainability-resources>
- *My Time, Our Place – Framework for School Age Care in Australia:* <http://education.gov.au/my-time-our-place-framework-school-age-care-australia>
- Stonehouse, A. (2006) *NSW Curriculum Framework for Children’s Services:* http://www.community.nsw.gov.au/docswr/assets/main/documents/childcare_framework.pdf
- *Victorian Early Years Learning and Development Framework:* www.education.vic.gov.au/earlylearning/eyldf/default.htm
- *Victorian Early Years Learning and Development Framework – Resources for Professionals:* www.education.vic.gov.au/earlylearning/eyldf/profresources.htm

Service policies

- *Child Safe Environment Policy*
- *Curriculum Development Policy*
- *Excursions and Service Events Policy*
- *Sun Protection Policy*
- *Supervision of Children Policy*
- *Water Safety Policy*

PROCEDURES

The Approved Provider is responsible for:

- collaborating with the Nominated Supervisor, educators, staff, parents/guardians, children and others at the service to identify environmental sustainability strategies for implementation

- allocating the necessary resources to implement the identified environmental sustainability strategies at the service
- ensuring the Nominated Supervisor and all staff are aware of their responsibilities under this *Environmental Sustainability Policy*
- ensuring the identified strategies are implemented at the service
- ensuring parents/guardians are aware of, and have access to, the *Environmental Sustainability Policy*.

The Nominated Supervisor is responsible for:

- collaborating with the Approved Provider, educators, staff, parents/guardians, children and others at the service to identify environmental sustainability strategies for implementation at the service
- implementing identified strategies for which they have responsibility at the service
- ensuring environmental education and practices are incorporated into the curriculum (refer to *Curriculum Development Policy*)
- providing families with information about environmentally sustainable practices e.g. through displays, fact sheets and local community resources, and by ensuring that they have access to the *Environmental Sustainability Policy*
- making recommendations to the Approved Provider about green and sustainable options for the service, that reflect the guidelines within this policy
- seeking and applying for grants, where appropriate, to support the implementation of strategies within this policy
- keeping up to date with current research, resources and best practice through newsletters, journals and support agencies such as Environmental Education in Early Childhood (EEEC).

Certified Supervisors, educators and other staff are responsible for:

- collaborating with the Approved Provider, Nominated Supervisor, fellow educators/staff, parents/guardians, children and others at the service to identify environmental sustainability strategies for implementation at the service
- implementing identified strategies for which they have responsibility at the service
- engaging in activities that support the service to become more environmentally sustainable (e.g. recycling)
- incorporating environmental education and sustainable practices within the curriculum
- planning opportunities for children to connect with nature and the natural world at the service, including on excursions and at other service events
- incorporating celebrations of environmental awareness into the program e.g. National Tree Day, National Recycling Week, Clean Up Australia Day and Walk to Work Day
- keeping up to date with current research, resources and best practice through newsletters, journals and support agencies such as Environmental Education in Early Childhood (EEEC).

Parents/guardians are responsible for:

- collaborating with the Approved Provider, Nominated Supervisor, educators, staff, children and others at the service to identify environmental sustainability strategies for implementation at the service
- following the strategies identified and outlined in this *Environmental Sustainability Policy*
- encouraging their children to adopt environmentally sustainable practices at both the service and at home.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

CODE OF CONDUCT POLICY

Mandatory – Quality Area 4

Purpose

This policy provides guidelines to enable Rolling Hills Preschool to:

- establish the expected standards of behaviour for the Approved Provider, Nominated Supervisor, staff, contractors, volunteers, students on placement, parents/guardians and visitors
- create and maintain a child safe environment that reflects the philosophy, beliefs, objectives and values of Rolling Hills Preschool
- promote desirable and appropriate behaviour
- promote interactions at the service which are respectful, honest, courteous, sensitive, tactful and considerate.

Policy statement

Values

Rolling Hills Preschool:

- respects the rights of the child and values diversity
- acknowledges the vulnerability of Aboriginal children, children from a culturally and linguistically diverse background and children with a disability and has zero tolerance of discrimination
- maintains a duty of care (refer to *Definitions*) towards all children at the service
- is committed to the safety and wellbeing of each child at the service
- is committed to the safety and wellbeing of all staff at the service
- provides a safe and secure environment for all at the service
- provides an open, welcoming environment in which everyone's contribution is valued and respected
- is committed to communicating openly and honestly
- is committed to continually learning how to be inclusive and respectful of cultural needs
- encourages volunteers, students, parents/guardians and visitors to support and participate in the program and activities of the service.

Scope

This policy applies to the Approved Provider, Nominated Supervisor, staff, contractors, volunteers, students on placement, parents/guardians and visitors attending the programs and activities of Rolling Hills Preschool.

Background and legislation

Background

Codes of conduct establish standards of behaviour to be followed and define how individuals are expected to behave towards each other, towards the children in their care, and towards other organisations and individuals in the community.

The Approved Provider, Nominated Supervisor and staff have a duty of care to the children attending the service and must ensure 'that every reasonable precaution is taken to protect children being educated and cared for by the service from harm and from any hazard likely to cause injury' (National Law: Section 167).

The *National Quality Standard* requires that staff are respectful and ethical and that 'professional standards guide practice, interactions and relationships' (*National Quality Standard: 4.2 and 4.2.1*).

Employers also have a legal responsibility to provide, as far as is practicable, a safe workplace that is free from discrimination, bullying and harassment.

Child Safe Standard 3 requires services to develop and review codes of conduct that establish clear expectations for appropriate behaviour with children including:

- how to respond to risks adults may pose to children or that children may pose to each other
- how to ensure the cultural safety of Aboriginal children and culturally and linguistically diverse children
- how to be inclusive of all children, including children with a disability.

A Code of Conduct should be informed by the service's philosophy, beliefs and values, and based on ethical principles of mutual respect, equity and fairness. Consideration should be given to the Victorian Teaching Profession *Code of Conduct and the Code of Ethics* and to the Early Childhood Australia's *Code of Ethics* in developing the code of conduct.

The Approved Provider must ensure that the Nominated Supervisor, staff, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool adhere to the expectations outlined in the Code of Conduct when communicating to and interacting with:

- children at the service and their parents and family members
- each other
- others in the community.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- Child Safe Standards (Vic)
- *Children, Youth and Families Act 2005* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic)
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*: Sections 166, 167, 174

- *Education and Care Services National Regulations 2011*: Regulations 155, 156, 157, 175
- *Equal Opportunity Act 2010* (Vic)
- *Fair Work Act 2009* (Cth)
- Fair Work Regulations 2009 (Cth)
- National Quality Standard, Quality Area 4: Staffing Arrangements
 - Standard 4.2: Educators, coordinators and staff members are respectful and ethical
 - Element 4.2.1: Professional standards guide practice, interactions and relationships
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2007*
- *Racial Discrimination Act 1975*
- *Racial and Religious Tolerance Act 2001* (Vic)
- *Sex Discrimination Act 1984* (Cth)
- Victorian Institute of Teaching *The Victorian Teaching Profession Code of Conduct*
- Victorian Institute of Teaching *The Victorian Teaching Profession Code of Ethics*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au>
- Commonwealth Legislation – Federal Register of Legislation: <https://www.legislation.gov.au/>

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Bullying: 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. Bullying occurs when one or more people deliberately and repeatedly upset or hurt another person, damage their property, reputation or social acceptance.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Ethical conduct: Behavior which reflects values or a code of conduct.

Harassment: When someone is demeaning, derogatory or intimidating towards another person. Harassment includes:

- racial taunts
- taunts about sexual orientation or gender identity
- sexual harassment: unwelcome physical, verbal or written behaviour of a sexual nature
- repeated insulting remarks.

Investigator: A person/staff member assigned or organization engaged with the responsibility of investigating suspected breaches of the Code of Conduct by the Approved Provider.

Notifiable complaint: A complaint that alleges a breach of the Education and Care Services National Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DET within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). Written reports to DET must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted via the National Quality Agenda IT system (NQAITs): <http://www.acecqa.gov.au/national-quality-agenda-it-system>. If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DET for confirmation.

Respect: Demonstrating regard for the rights of individuals, for different values and points of views.

Serious incident: A serious incident is defined as (regulation 12):

- the death of a child -
 - while being 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 (examples include broken limbs or anaphylaxis reaction) attention of a registered medical practitioner; or
 - for which the child attended, or ought reasonably to have attended a hospital.
- any incident where the attendance by emergency services at the education and care service premises was sought, or ought reasonably to have been sought
- any circumstances where a child being educated and cared for by an education and care service appears to be missing or cannot be accounted for;
 - appears to have been taken or removed from the education and care services premises in a manner that contravenes National Regulations;
 - is mistakenly locked in or locked out of the education and care service premises or any part of the premises.

The Regulatory Authority must be notified of a serious incident (section 174(2)(a)) **in writing in the case of:**

- the death of a child, as soon as practicable but within 24 hours of the death, or the time that the person becomes aware of the death

- any other serious incident, within 24 hours of the incident or the time that the person becomes aware of the incident

Written notification of serious incidents must be submitted via the ACECQA portal using the appropriate forms at <http://acecqa.gov.au/notifications>.

Support: Work in a co-operative and positive manner.

Sources and related policies

Sources

- Early Childhood Australia, *Code of Ethics*: www.earlychildhoodaustralia.org.au
- United Nations, *The Universal Declaration of Human Rights*: <http://www.un.org/en/universal-declaration-human-rights/>
- **Error! Hyperlink reference not valid.** United Nations, *Convention on The Rights of the Child*: <http://www.unicef.org/crc/>
- Victoria Legal Aid: www.legalaid.vic.gov.au
- Victorian Institute of Teaching – The Victorian Teaching Profession Code of Conduct and Code of Ethics: <http://www.vit.vic.edu.au>

Related policies

- *Child Safe (formerly Child Protection) Policy*
- *Complaints and Grievances Policy*
- *Delivery and Collection of Children Policy*
- *Interactions with Children Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Relaxation and Sleep Policy*
- *Staffing Policy*

RESPONSIBILITIES

The Approved Provider is responsible for:

- providing a safe environment for staff, contractors, volunteers, students on placement, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool
- providing guidance through leadership and by being a positive role model
- developing and updating/ reviewing codes of conduct for Rolling Hills Preschool in collaboration with the Nominated Supervisor, staff, parents/guardians, children and others involved with the service (refer to Attachments 1 and 3)
- ensuring that staff, volunteers, students and parents/guardians are provided with a copy of this policy on employment, engagement or enrolment at the service and that the current codes of conduct are publicly displayed and promoted to everyone including contractors and visitors

- ensuring that staff complete and sign the *Code of Conduct Acknowledgement* (refer to Attachment 2) and that these are filed with individual staff records upon engagement in the service
- ensuring that the codes of conduct are regularly discussed at staff meetings to reinforce expectations
- developing a culture of accountability within the service for complying with the code(s) of conduct and being prepared to respond when behavioural expectations are not adhered to
- ensuring that all children being educated and cared for at Rolling Hills Preschool are protected from harm and any hazard likely to cause injury (National Law: Section 167) and that the children know who to speak to about any concerns and that their concerns are followed-up
- working with the Nominated Supervisor, staff, students, volunteers, parents/guardians and others at the service to provide an environment that encourages positive interactions, supports constructive feedback and holds one another to the codes of conduct
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of care of the Approved Provider, Nominated Supervisor or educators under the Law (Regulation 157)
- ensuring that contractors, volunteers, parent/guardians, students or visitors at the service are not placed in a situation where they are left alone with a child
- respecting individual abilities, needs, cultural practices and beliefs in all interactions, both verbal and non-verbal
- notifying DET in writing within 24 hours of a serious incident (refer to *Definitions*) or of a notifiable complaint (refer to *Definitions*) at the service (National Law: Sections 174(2)(b) and 174(4), National Regulations: Regulations 175(2)(c) and 176(2)(b)) via the NQAITs
- referring notifiable complaints (refer to *Definitions*), grievances or complaints that are unable to be resolved appropriately and in a timely manner to the Grievances Subcommittee/investigator (refer to *Complaints and Grievances Policy*)
- activating the *Complaints and Grievances Policy* on notification of a breach of the *Code of Conduct Policy*
- taking appropriate disciplinary or legal action, or reviewing the terms of employment in the event of misconduct or a serious breach of the *Code of Conduct Policy*
- contacting Police in an emergency situation where it is believed that there is an immediate risk, such as when violence has been threatened or perpetrated or where sexual abuse or grooming is suspected as outlined in the *Child Safe (formerly Child Protection) Policy*.

The Nominated Supervisor is responsible for:

- ensuring that the children educated and cared for at Rolling Hills Preschool are protected from harm and from any hazard likely to cause injury (National Law: Section 167)
- providing guidance through their leadership and by being a positive role model

- assisting the Approved Provider to develop codes of conduct for staff and parents/guardians, students, contractors, volunteers and visitors (refer to Attachments 1 and 3 for samples)
- completing and signing the *Code of Conduct Acknowledgement* for staff (refer to Attachment 2)
- adhering to the Code of Conduct for staff at all times
- informing the Approved Provider in the event of a serious incident (refer to *Definitions*), of a notifiable complaint (refer to *Definitions*) or of a breach of the *Code of Conduct Policy*
- contacting Police in an emergency situation where it is believed that there is an immediate risk, such as when violence has been threatened or perpetrated, or where sexual abuse or grooming is suspected as outlined in the *Child Safe (formerly Child Protection) Policy*
- working with the Approved Provider, staff, students, volunteers, parents/guardians and others at the service to provide an environment that encourages positive interactions, supports constructive feedback and holds one another to the codes of conduct
- ensuring that parents/guardians, students and volunteers sign the code of conduct (refer to Attachment 4)
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of care of the Approved Provider, Nominated Supervisor or educators under the Law (Regulation 157)
- developing practices and procedures to ensure that parent/guardians, students, contractors, volunteers or visitors at the service, are not placed in a situation where they are left alone with a child
- respecting individual abilities, needs, cultural practices and beliefs in all interactions, both verbal and non-verbal
- understanding and accepting that serious breaches of this code will be deemed misconduct and may lead to disciplinary or legal action, or a review of their employment.

All staff are responsible for:

- assisting the Approved Provider to develop a code of conduct for staff (refer to Attachment 1)
- completing and signing the *Code of Conduct Acknowledgement* (refer to Attachment 2)
- adhering to the code of conduct for staff (refer to Attachment 1) at all times
- providing guidance to students, volunteers, parents/guardians, students and visitors through positive role modelling and, when appropriate, clear and respectful directions
- working with the Approved Provider, Nominated Supervisor, their colleagues, students, volunteers, parents/guardians and others at the service to provide an environment that encourages positive interactions, supports constructive feedback and holds one another to the codes of conduct
- ensuring that parents/guardians, students, contractors, volunteers and visitors at the service are not placed in a situation where they are left alone with a child

- informing the Approved Provider in the event of a serious incident (refer to *Definitions*), of a notifiable complaint (refer to *Definitions*) or of a breach of the *Code of Conduct Policy*
- contacting Police in an emergency situation where it is believed that there is an immediate risk, such as when violence has been threatened or perpetrated or where sexual abuse or grooming is suspected as outlined in the *Child Safe (formerly Child Protection) Policy*.
- respecting individual abilities, needs, cultural practices and beliefs in all interactions, both verbal and non-verbal
- understanding and accepting that serious breaches of this code will be deemed misconduct and may lead to disciplinary or legal action, or a review of their employment.

Parents/guardians are responsible for:

- reading the *Code of Conduct Policy*
- completing and signing the Code of Conduct for parents/guardians (refer to Attachments 3 and 4)
- abiding by the Code of Conduct for parents/guardians
- complying with all policies of the service.

Students, contractors, volunteers and visitors while at the service, are responsible for following this policy and its procedures.

Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- assess whether a satisfactory resolution has been achieved in relation to issues arising from this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Authorisation

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 02/11/2016.

Review date: 02/November/2021

DETERMINING RESPONSIBLE PERSON POLICY

Mandatory – Quality Area 4

PURPOSE

This policy will provide guidelines to assist in determining the Responsible Person at Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- meeting its duty of care (refer to *Definitions*) obligations under the law
- ensuring staffing arrangements contribute to the health, safety, wellbeing, learning and development of all children at the service
- meeting legislative requirements for a Responsible Person to be on the service premises at all times.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers and parents/guardians of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Under the *Education and Care Services National Law Act 2010*, it is an offence to operate an approved centre-based education and care service unless a Responsible Person is present.

Legislation requires that centre-based services have a Responsible Person physically in attendance at all times the service is educating and caring for children. The Responsible Person is the person in day to day charge at the service and can be either:

- the Approved Provider (or the person in management or control of the service),
- the Nominated Supervisor of the service, or
- a Certified Supervisor who has been placed in day-to-day charge of the service.

For more information regarding these terms, refer to *Definitions*.

An Approved Provider must not operate a service unless there is a Nominated Supervisor appointed for that service. The Nominated Supervisor does not have to be in attendance at the service at all times, but in their absence, a Certified Supervisor is to be placed in charge, ensuring there is always someone on the service premises who has been assessed as fit and proper.

Regulatory Authorities will issue a service supervisor certificate (refer to *Definitions*) for each approved education and care service and the service can decide who will be the Certified Supervisor/s at the service. To be covered by the service supervisor certificate a person needs to be:

- responsible for the day-to-day management of the service; or
 - exercising supervisory and leadership responsibilities for part of the service.
- People who hold an individual supervisor certificate can also be placed in day-to-day charge of the service. It is important to note that a Certified Supervisor **does not** have the same responsibilities under the National Law as the Nominated Supervisor.
- The staff record must include the name of the responsible person at the centre-based service for each time that children are being educated and cared for by the service (Regulation 150).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 5, 44, 56, 106–109, 114, 115, 118, 161, 162, 164, 172, 291(5)
- *Education and Care Services National Regulations 2011*: Regulations 35, 46–50, 146, 150, 168(2)(i)(ii), 173, 176(2)(c)
- *National Quality Standard*, Quality Area 4: Staffing Arrangements
 - Standard 4.1: Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
 - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
 - Element 7.1.5: Adults working with children and those engaged in management of the service or residing on the premises are fit and proper
- *Working with Children Act 2005* (Vic)
- *Working with Children Regulations 2006* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. National Law, National Regulations, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved Provider: An individual or organisation that has completed an application and been approved by the Regulatory Authority as fit and proper (in accordance with Sections 12, 13 and 14 of the National Law) to operate one or more education and care services. Where the applicant is an organisation, each person with management and control of that organisation must complete a separate application form. (Note: Under the *Education and Care Services National Law Act 2010*, Section 5, Definitions: “**person with management or control**, in relation to an education and care service, means – (b) if the provider of the service is an eligible association, each member of the executive committee of the association who has the responsibility, alone or with others, for managing the delivery of the education and care service”.)

Approved service: An education and care service for which a service approval exists. A request for service approval must be made in writing to the Regulatory Authority and include prescribed information including details of the Nominated Supervisor and their written consent to be nominated as such.

Certified Supervisor: An educator who has been nominated by the Approved Provider or the Nominated Supervisor of a service (in accordance with the National Regulations), and consents in writing to being placed in day-to-day charge of the education and care service. A Certified Supervisor can be any person engaged to be responsible for the day-to-day management of the service, or with supervisory and leadership responsibilities at the service. Any person placed in day-to-day charge of the service must be assessed as a fit-and-proper person (refer to *Definitions*) and have suitable skills, qualifications and experience as determined by the service. Individual supervisor certificates are also still valid.

A Certified Supervisor placed in day-to-day charge of a service **does not** have the same responsibilities under the National Law as the Nominated Supervisor.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Fit and proper: In determining whether an applicant is fit and proper, the Regulatory Authority must take into account the applicant's history of involvement in education and care services, their compliance with current and prior law, criminal history record check and any bankruptcy or insolvency issues. The Regulatory Authority may reassess fitness and propriety at any time. Applicants are required to complete the Declaration of Fitness and Propriety form on the ACECQA website and have this approved by the Regulatory Authority. This form must be completed by an individual provider applicant or in the case of an entity provider applicant, each person with management or control of a service. The form is available at: <http://acecqa.gov.au/application-forms/provider-approvals/>

(Note: Under the *Education and Care Services National Law Act 2010*, Section 5, Definitions: "**person with management or control**, in relation to an education and care service, means – (b) if the provider of the service is an eligible association, each member of the executive committee of the association who has the responsibility, alone or with others, for managing the delivery of the education and care service".).

Nominated Supervisor: A person who has been nominated by the Approved Provider of the service under Part 3 of the Act and who has consented to that nomination in writing can be the Nominated Supervisor. All services must have a Nominated Supervisor with responsibility for the service in accordance with the National Regulations. The Approved Provider must take reasonable steps to ensure the Nominated Supervisor is a fit and proper person (refer to *Definitions*), with suitable skills, qualifications and experience. The Regulatory Authority must be notified if the Nominated Supervisor for the service changes or is no longer employed at the service.

Supervisor Certificate: A supervisor certificate is provided to each centre-based service by the Regulatory Authority. The Approved Provider can nominate a person or persons to be the Certified Supervisor (refer to *Definitions*) at the service without requiring Departmental approval or paying a fee. Individual supervisor certificates are still valid, however most individuals no longer need to apply.

Responsible Person: The Approved Provider (if that person is an individual, and in any other case the person with management or control of the service operated by the Approved Provider) or a Nominated Supervisor or Certified Supervisor who has been placed in day-to-day charge of the service in accordance with the National Regulations.

SOURCES AND RELATED POLICIES

Sources

- Australian Children’s Education and Care Quality Authority (ACECQA), Information Sheets: www.acecqa.gov.au/national-quality-framework/information-sheets/
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011:* www.acecqa.gov.au
- *Guide to the National Quality Standard:* www.acecqa.gov.au

Service policies

- *Code of Conduct Policy*
- *Participation of Volunteers and Students Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring there is a Responsible Person (refer to *Background* and *Definitions*) on the premises at all times the service is delivering education and care programs for children
- ensuring that the service has received a supervisor certificate (refer to *Definitions*) from the Regulatory Authority
- nominating sufficient Certified Supervisors to meet legislative requirements for a Responsible Person at the service at all times, including during periods of leave or illness. Ensuring that a person nominated as a Responsible Person has appropriate skill level, experience, qualifications and approval to work with children, as required under the National Law and National Regulations
- ensuring that the name and position of the Responsible Person in charge of the service is displayed and easily visible from the main entrance of the service⁴ (National Law: Section 172)
- ensuring that the service does not operate without a Nominated Supervisor, and that this person has given written consent to be in the role
- ensuring that the name of the Nominated Supervisor is displayed prominently at the service

⁴ The guidelines to the National Regulations state that, given the Responsible Person in charge may change throughout the day (for example, at a changeover of shifts), this requirement might be met on a whiteboard or interchangeable name plate at the entrance of the service premises.

- ensuring that information about the Nominated Supervisor, including name, address, date of birth, evidence of qualifications and approved training, and a Working with Children Check (refer to *Staffing Policy*) is kept on the staff record (Regulation 146)
- notifying the Regulatory Authority in writing if there is a change of person in the role of Nominated Supervisor (Section 56, Regulation 35)
- ensuring that, in the absence from the service premises of a Nominated Supervisor a Certified Supervisor (refer to *Definitions*) is placed in day-to-day charge of the service
- ensuring that the Nominated Supervisor and Certified Supervisors have a sound understanding of the role of Responsible Person
- ensuring details of supervisor certificates are recorded on the staff record
- notifying the Regulatory Authority in writing if there any changes to:
 - the name of the Approved Provider
 - the appointment or removal of a person with management or control of the service operated by the Approved Provider
 - the status of the Approved Provider as fit and proper
- notifying the Regulatory Authority if a Nominated Supervisor or Certified Supervisor has their Working with Children Check card or teacher registration suspended or cancelled, or if they are subject to any disciplinary proceedings under the law.

The Nominated Supervisor is responsible for:

- providing written consent to accept the role of Nominated Supervisor
- ensuring that, in their absence from the service premises, a Certified Supervisor(refer to *Definitions*) is placed in day-to-day charge of the service
- ensuring they have a sound understanding of the role of Responsible Person (refer to *Definitions*)
- ensuring that the name and position of the Responsible Person in charge of the service is displayed and easily visible from the main entrance of the service
- developing rosters in accordance with the availability of Responsible Persons, hours of operations and the attendance patterns of children
- notifying the Approved Provider and the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status as fit and proper, such as the suspension or cancellation of a Working with Children Check card or teacher registration, or if they are subject to disciplinary proceedings.

Certified Supervisors are responsible for:

- providing written consent to accept the role of Certified Supervisor
- checking that the name and position of the Responsible Person (refer to *Definitions*) in charge of the service is displayed and easily visible from the main entrance of the service
- informing the Approved Provider and/or Nominated Supervisor in the event of absence from the service due to leave or illness so they can be replaced by another Responsible Person
- ensuring they have a sound understanding of the role of Responsible Person

- understanding that a Certified Supervisor placed in day-to-day charge of an approved service **does not** have the same responsibilities under the National Law as the Nominated Supervisor
- notifying the Approved Provider and the Regulatory Authority within 7 days of any changes to their personal situation, including a change in mailing address, circumstances that affect their status as fit and proper, such as the suspension or cancellation of a Working with Children Check card or teacher registration, or if they are subject to disciplinary proceedings.

Educators are responsible for:

- meeting the qualifications, experience and management requirements if they wish to be nominated as a Certified Supervisor ensuring they have a sound understanding of the role of Responsible Person (refer to *Definitions*)
- providing written consent if accepting the nomination to be a Certified Supervisor.

Parents/guardians are responsible for:

- reading and understanding this policy
- being aware of the Responsible Person at the service on a daily basis.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 14/SEPTEMBER/2019

PARTICIPATION OF VOLUNTEERS AND STUDENTS POLICY

Mandatory – Quality Area 4

PURPOSE

This policy will provide guidelines for the engagement and participation of volunteers and students at Rolling Hills Preschool, while ensuring that children’s health, safety and wellbeing is protected at all times.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- supporting connections with educational institutions to provide opportunities for students to undertake practicum placements as part of their studies
- building relationships with community members and providing suitable opportunities to engage volunteers to contribute to the programs and activities of the service
- ensuring the health, safety and wellbeing of each child at the service through consistent compliance with this policy and procedures when engaging volunteers and students.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Volunteers and students may participate in programs and activities at the service from time to time in order to observe and experience the provision of centre-based education and care. This will be encouraged and facilitated by Rolling Hills Preschool wherever appropriate and possible. Rolling Hills Preschool values the participation of parents/guardians and other family members, and the voluntary contribution they make to the education and care of their own and other children. “In genuine partnerships families and educators value each other’s knowledge and roles, communicate freely and respectfully and engage in shared decision making” (*Early Years Learning Framework*). Rolling Hills Preschool aims to provide a range of opportunities for family members, volunteers and students to participate in programs and activities while adhering to clear guidelines regarding appropriate interactions and communication with staff, and other adults and children at the service (refer to *Code of Conduct Policy*).

Volunteers and students can expect:

- a safe and well-managed workplace

- meaningful work experience with appropriate direction, supervision and training
- recognition for their contribution.

The role that volunteers play in children's services varies and can include working with groups of children, preparing materials or food, assisting with administrative tasks or working one-on-one with individual children. The children's service is responsible for ensuring that volunteers are suitable to work with children, and that children's health, safety and wellbeing is protected at all times.

Prior to participation at the service, a volunteer (aged 18 years or over) must be in possession of a Working with Children (WWC) Check card, unless they are under the direct supervision of an educator who is over 18 years of age and holds, or is actively working towards, an approved diploma-level education and care qualification (Regulation 358) (refer to *Staffing Policy*). Parents/guardians and family members closely related to children attending the service are exempt from needing a WWC Check.

Volunteers should only be engaged to complement, not replace, the work of paid staff. Accordingly, services should not engage volunteers to fill the place of an employee who is ill or on leave, or to fill a vacant budgeted position.

Volunteers must not be asked to perform tasks:

- that they are untrained, unqualified or too inexperienced to undertake
- that put the children or themselves in a vulnerable or potentially unsafe situation
- where there is a conflict of interest.

Prior to commencing work at the service, all volunteers should be interviewed to ascertain their suitability for, and interest in, the tasks they will be undertaking, and to assess whether the volunteer's goals can be achieved. The interview process also provides an opportunity for volunteers to have their questions answered. Reference checks must be undertaken by the Approved Provider or a nominee of the Approved Provider, to confirm work abilities or character attributes. Good practice in volunteer management includes acknowledgement and recognition of volunteer contributions, and this can involve a mixture of formal and informal recognition strategies.

It is a requirement under the *Education and Care Services National Regulations 2011* that the Approved Provider uses the staff record to document the details of all students and volunteers. The staff record must include the full name, address and date of birth of each student or volunteer who participates at the service. The Approved Provider of a centre-based service must also keep a record for each day on which the student or volunteer participates at the service, including the date and the hours of participation. In addition to this, it is recommended that students and volunteers undertake an induction to the service and complete an induction checklist, which should also be stored with the staff record.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Section 169

- *Education and Care Services National Regulations 2011*: Regulations 123, 145, 149, 157, 355, 358, 360
- *Equal Opportunity Act 2010* (Vic)
- *Fair Work Act 2009* (Cth)
- *National Quality Standard*, Quality Area 4: Staffing Arrangements
 - Standard 4.1: Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing
- *Occupational Health and Safety Act 2004* (Vic)
- *Working with Children Act 2005* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Conflict of interest: (In relation to this policy) refers to an interest that may affect, or may appear reasonably likely to affect, the judgement or conduct of the volunteer, or may impair their independence or loyalty to the service. A conflict of interest can arise from avoiding personal losses as well as gaining personal advantage, whether financial or otherwise, and may not only involve the volunteer, but also their relatives, friends or business associates.

Student: A person undertaking a practicum placement as part of a recognised early childhood qualification. This student will be supported by an educational institution in the completion of their placement.

Volunteer: A person who willingly undertakes defined activities to support the education and care programs at a children’s service in an unpaid or honorary capacity. These activities may include direct contact with children, administrative tasks, or preparing materials or food.

Working directly with children: For the purposes of the National Regulations, working directly with children is defined as being physically present with children and directly engaged in providing them with education and/or care.

Working with Children (WWC) Check: The check is a legal requirement for those undertaking paid or voluntary child-related work in Victoria and is a measure to help protect children from harm arising as a result of physical or sexual abuse. The Department of Justice assesses a person’s suitability to work with children by examining relevant serious sexual, physical and drug offences in a person’s national criminal history and, where appropriate, their professional history. A WWC Check card, notice or document (valid for five years), is granted to a person under working with children legislation if:

- they have been assessed as suitable to work with children
- there has been no information that, if the person worked with children, they would pose a risk to those children

- they are not prohibited from attempting to obtain, undertake or remain in child-related employment.

SOURCES AND RELATED

Sources

- Australian Children’s Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- National *Early Years Learning Framework*: <http://education.gov.au/early-years-learning-framework>
- Working with Children Check Unit, Department of Justice, Victoria: www.justice.vic.gov.au/workingwithchildren/

Service policies

- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Delivery and Collection of Children Policy*
- *Determining Responsible Person Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- developing guidelines in consultation with the Nominated Supervisor and educators for accepting applications from volunteers/students to work at the service
- accepting or rejecting a potential volunteer/student based on the circumstances of the service at the time, in consultation with the Nominated Supervisor
- ensuring that children being educated and cared for by the service are adequately supervised, and the legislated educator-to-child ratios are complied with at all times (Regulations 123, 355, 360) (refer to *Supervision of Children Policy*)
- ensuring that, where required, the Working with Children (WWC) Check has been read/sighted prior to the volunteer’s commencement at the service
- ensuring that the staff record contains information for all volunteers/students attending the service with details of name, address, date of birth, days and hours of participation and details of the Working with Children (WWC) Check (Regulations 145, 147, 149)
- ensuring that volunteers/students and parents/guardians are adequately supervised at all times, and that the health, safety and wellbeing of children at the service is protected

- ensuring that volunteers/students and parents/guardians are not left with sole supervision of individual children or groups of children
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of the Approved Provider, Nominated Supervisor or educators under the law (Regulation 157)
- developing a range of strategies to enable and encourage the participation and involvement of parents/guardians at the service
- providing volunteers/students and parents/guardians with access to all service policies and procedures, and a copy of the *Education and Care Services National Regulations 2011*
- ensuring that volunteers/students and parents/guardians comply with the National Regulations and all service policies and procedures, including the *Code of Conduct Policy*, while attending the service
- developing an induction checklist for volunteers/students attending the service in consultation with the Nominated Supervisor and educators.

The Nominated Supervisor is responsible for:

- assisting the Approved Provider to develop guidelines for applications from volunteers/students to work at the service
- assisting the Approved Provider with decisions in relation to accepting/rejecting a potential volunteer/student based on the circumstances of the service at the time
- ensuring that children being educated and cared for by the service are adequately supervised, and the legislated educator-to-child ratios are complied with at all times (Regulations 123, 355, 360) (refer to *Supervision of Children Policy*)
- ensuring that, where required, the Working with Children (WWC) Check has been read/sighted prior to the volunteer's commencement at the service, and that details are included on the staff record
- ensuring that volunteers/students and parents/guardians are adequately supervised at all times, and that the health, safety and wellbeing of children at the service is protected
- ensuring that volunteers/students and parents/guardians are not left with sole supervision of individual children or groups of children
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of the Approved Provider, Nominated Supervisor or educators under the law (Regulation 157)
- ensuring strategies are in place to enable and encourage the participation and involvement of parents/guardians at the service
- providing volunteers/students and parents/guardians with access to all service policies and procedures, and a copy of the *Education and Care Services National Regulations 2011*

- ensuring that volunteers/students and parents/guardians comply with the National Regulations and all service policies and procedures, including the *Code of Conduct Policy*, while attending the service
- assisting the Approved Provider to develop an induction checklist for volunteers/students at the service
- ensuring that volunteers/students have completed the induction checklist and have been provided with a copy of the staff handbook, if applicable.

Certified Supervisors are responsible for:

- ensuring that, where required, the Working with Children (WWC) Check has been read/sighted prior to the volunteer's commencement at the service.

Certified Supervisors and other educators are responsible for:

- assisting the Approved Provider and Nominated Supervisor to develop guidelines for applications from volunteers/students to work at the service
- ensuring that children being educated and cared for by the service are adequately supervised, and the legislated educator-to-child ratios are complied with at all times (refer to *Supervision of Children Policy*)
- providing volunteers/students and parents/guardians with access to all service policies and procedures, and a copy of the *Education and Care Services National Regulations 2011*
- ensuring that volunteers/students and parents/guardians comply with the National Regulations and all service policies and procedures, including the *Code of Conduct Policy*, while attending the service
- complying with the requirement that volunteers/students and parents/guardians are adequately supervised at all times, and that the health, safety and wellbeing of children at the service is protected
- complying with the requirement that volunteers/students and parents/guardians are not left with sole supervision of individual children or groups of children
- enabling parents/guardians of children attending the service to access the service premises at any time the child is being educated and cared for except where this poses a risk to the safety of children and/or staff
- encouraging the participation and involvement of parents/guardians at the service
- assisting the Approved Provider and Nominated Supervisor to develop an induction checklist for volunteers/students at the service
- assisting volunteers/students to understand the requirements of this policy and the expectations of the service.

Volunteers and students, while at the service, are responsible for:

- ensuring they have provided all details required to complete the staff record
- undertaking a Working with Children (WWC) Check and presenting a current WWC Check card or other notification, as applicable

- understanding and acknowledging the requirement for confidentiality of all information relating to educators and families within the service (refer to *Privacy and Confidentiality Policy*)
- complying with the requirements of the *Education and Care Services National Regulations 2011* and with all service policies and procedures, including the *Code of Conduct Policy*, while at the service
- undertaking the induction process and completing the induction checklist prior to commencement at the service
- following the directions of staff at the service at all times to ensure that the health, safety and wellbeing of children is protected.

Parents/guardians are responsible for:

- complying with the requirements of the *Education and Care Services National Regulations 2011* and with all service policies and procedures, including the *Code of Conduct Policy*, while attending the service
- following the directions of staff at the service at all times to ensure that the health, safety and wellbeing of children is protected.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- check staff records on a regular basis to ensure details of students and volunteers are maintained in line with all legislative requirements as outlined in the policy
- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2019

STAFFING POLICY

Mandatory – Quality Area 4

PURPOSE

This policy will provide guidelines for engaging staff at Rolling Hills Preschool, including:

- employing sufficient numbers of educators to meet legislative, policy and service standards
- employing educators with qualifications and experience that meet legislative, policy and service standards
- providing appropriate supervision to staff and other adults at the service
- complying with legislation relating to Working with Children Checks and criminal history record checks.

This policy should be read in conjunction with the following service policies:

- *Code of Conduct Policy*
- *Determining Responsible Person Policy*
- *Participation of Volunteers and Students Policy*

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- ensuring that the health, safety and wellbeing of children at the service is protected at all times while also promoting their learning and development
- fulfilling a duty of care to all children attending the service
- providing accountable and effective staffing and management practices
- employing educators with a range of relevant qualifications and experience to provide a quality educational program that meets the needs of children and families in the community
- employing educators according to policy and funding requirements
- complying with current legislation in relation to the employment of staff, including the *Equal Opportunity Act 2010*, *Fair Work Act 2009* and the *Working with Children Act 2005*.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, other staff, students on placement and volunteers at Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Research has demonstrated that the employment of appropriately-qualified staff in early childhood services is a key contributor to the delivery of quality programs and better learning outcomes for children. “Those with higher qualification levels and standards of training are better equipped to provide improved learning environments and mentor educators in quality practices, leading to better outcomes for children” (*Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*). The Australian Government has acknowledged this by legislating minimum qualification requirements for all educators working in early childhood education and care services. Eligibility for services to receive funding also includes requirements for staff to hold specific qualifications (*The Kindergarten Guide – refer to Sources*).

A current list of approved qualifications is available on the Australian Children’s Education and Care Quality Authority (ACECQA) website (refer to *Sources*). Applications can also be made to ACECQA to determine if other qualifications (such as those gained overseas) entitle the individual to work as an early childhood teacher, diploma-level educator or certificate III level educator. Application forms are available on the ACECQA website and a fee is required for processing an application.

In addition, current legislation requires at least one educator who holds current approved first aid qualifications, anaphylaxis management training and emergency asthma management training to be in attendance and immediately available at all times that children are being educated and cared for by the service. These qualifications must be updated as required, and details of qualifications must be kept on an individual’s staff record. As a demonstration of duty of care and best practice, ELAA recommends **all educators** have current approved first aid qualifications, anaphylaxis management training and emergency asthma management training.

It is essential that all educators and other adults engaged to work directly with children are provided with opportunities to learn and develop new skills in relation to supporting the learning and development of young children. Such opportunities can arise when more qualified and experienced educators offer guidance and feedback to other educators. Opportunities for professional development are also crucial for all educators to ensure that their work practice remains current and relevant to the practices and principles of the national *Early Years Learning Framework* (EYLF) and the *Victorian Early Years Learning and Development Framework* (VEYLDF) (refer to *Sources*).

Staff are required to actively supervise children at all times when children are in attendance at the service (refer to *Supervision of Children Policy*). To facilitate this, services are required to comply with legislated educator-to-child ratios at all times, and these ratios are based on the ages and number of children at the service. Only those educators working directly with children (refer to *Definitions*) can be counted in the ratio.

To ensure that children are protected from harm while participating in service programs, all educators and staff are required by law to have and maintain a Working with Children (WWC) Check or a criminal history record check (refer to *Definitions* and *Sources*). This also applies to volunteers and students unless they are working under the direct supervision of an educator who is over 18 years of age and holds, or is actively working towards (refer to *Definitions*), an approved diploma-level education and care qualification (Regulation 358).

This policy should be read in conjunction with the following service policies:

- *Code of Conduct Policy* – management, co-ordinators, educators, staff, students on placement and volunteers are required to be respectful and ethical at all times. This policy explains the responsibilities of all parties in relation to one another, to children and families using the service, and to individuals and organisations in the wider community including the use of social media.
- *Determining Responsible Person Policy* – legislation requires all approved services to ensure that a Responsible Person is physically present at all times the service is educating and caring for children. The Responsible Person is either the Approved Provider, or the Nominated Supervisor or Certified Supervisor who has been placed in day-to-day charge of the service. This policy provides guidelines to determine the Responsible Person at the service.
- *Participation of Volunteers and Students Policy* – this policy provides guidelines for the engagement and participation of volunteers and students at the service, while ensuring that children’s health, safety and wellbeing is protected at all times.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*: Sections 12, 13, 14, 161, 162, 165, 169
- *Education and Care Services National Regulations 2011*: Regulations 14, 15, 16, 46, 47, 48, 49, 83, 84, 118, 120, 121–123, 125–126, 129–135, 136, 137–143, 145–152, 355, 357, 358, 360–364
- Education and Training Reform Act 2006 (Vic) (amended in 2014)
- *Equal Opportunity Act 2010* (Vic)
- *Fair Work Act 2009*
- *National Quality Standard, Quality Area 4: Staffing Arrangements*
 - Standard 4.1: Staffing arrangements enhance children’s learning and development and ensure their safety and wellbeing
 - Element 4.1.1: Educator-to-child ratios and qualification requirements are maintained at all times
- *Occupational Health and Safety Act 2004*
- *Occupational Health and Safety Regulations 2007*
- *Privacy Act 1988* (Cth)
- Privacy and Data Protection Act 2014 (Vic)
- *Working with Children Act 2005* (Vic)
- *Working with Children Regulations 2006* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Regulatory Authority, National Law, National Regulations etc. refer to the *General Definitions* section of this manual.

Actively working towards: An educator who is enrolled in a course for a qualification, and provides the Approved Provider with documentary evidence of their commencement in the course, their satisfactory progress towards completion of the course and ongoing evidence that they are meeting all the requirements to maintain their enrolment. Educators who are 'actively working towards' an approved diploma-level qualification must also hold an approved certificate III level education and care qualification or have completed the mandatory units of study in an approved certificate III level education and care qualification as determined by the national authority (ACECQA).

Adequate supervision: (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

Approved first aid qualification: A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: www.acecqa.gov.au

Certified Supervisor: An educator who has been nominated by the Approved Provider or the Nominated Supervisor of a service (in accordance with the National Regulations), and consents in writing to being placed in day-to-day charge of the education and care service. A certified supervisor can be any person engaged to be responsible for the day-to-day management of the service, or with supervisory and leadership responsibilities at the service. Any person placed in day-to-day charge of the service must be assessed as a fit-and-proper person (refer to *Definitions*) and have suitable skills, qualifications and experience as determined by the service. Individual supervisor certificates are also still valid. A Certified Supervisor placed in day-to-day charge of a service **does not** have the same responsibilities under the National Law as the Nominated Supervisor.

Criminal history record check: A full-disclosure, Australia-wide criminal history record check issued by Victoria Police (refer to *Sources*), or by a police force or other authority of a state or territory, or the Commonwealth. It may also be referred to as a National Police Certificate or Police Records Check.

Early childhood teacher: A person with an approved early childhood teaching qualification. Approved qualifications are listed on the ACECQA website: www.acecqa.gov.au

Educator: An individual who provides education and care for children as part of an education and care service.

Educational Leader: The Approved Provider of an education and care service must designate, in writing, a suitably-qualified and experienced educator, co-ordinator or other individual to lead the development and implementation of educational programs at the service (Regulation 118). This person must have a thorough understanding of the *Early Years Learning Framework* (or other approved learning framework),

be able to guide other educators in their planning and reflection, and mentor colleagues in the implementation of their practice.

Fit and proper: In determining whether an applicant is fit and proper, the Regulatory Authority must take into account the applicant's history of involvement in education and care services, their compliance with current and prior law, criminal history record check, and any bankruptcy or insolvency issues. The Regulatory Authority may reassess fitness and propriety at any time. Applicants are required to complete the Declaration of Fitness and Propriety form on the ACECQA website and have this approved by the Regulatory Authority. This form must be completed by an individual provider applicant or, in the case of an entity provider applicant, each person with management or control of a service. The form is available at: <http://acecqa.gov.au/application-forms/provider-approvals/> ____ (Note: Under the *Education and Care Services National Law Act 2010*, Section 5, Definitions: "**person with management or control**, in relation to an education and care service, means – (b) if the provider of the service is an eligible association, each member of the executive committee of the association who has the responsibility, alone or with others, for managing the delivery of the education and care service".)

The Kindergarten Guide: provides detailed information from the Department of Education and Training (DET) about: the types of kindergarten funding available, eligibility criteria, how to apply for funding and how to comply with operational requirements once funding has been granted.

Nominated Supervisor: A person who has been nominated by the Approved Provider of the service under Part 3 of the Act and who has consented to that nomination in writing can be the Nominated Supervisor. All services must have a Nominated Supervisor with responsibility for the service in accordance with the National Regulations. The Approved Provider must take reasonable steps to ensure the Nominated Supervisor is a fit and proper person (refer to *Definitions*), with suitable skills, qualifications and experience. The Regulatory Authority must be notified if the Nominated Supervisor for the service changes or is no longer employed at the service.

Responsible Person: The Approved Provider (if that person is an individual, and in any other case the person with management or control of the service operated by the Approved Provider) or a Nominated Supervisor or Certified Supervisor who has been placed in day-to-day charge of the service in accordance with the National Regulations.

Staff record: A record which the Approved Provider of a centre-based service must keep containing information about the Nominated Supervisor, the Educational Leader, staff, volunteers, students and the Responsible Person at a service. Details that must be recorded include qualifications, training and the Working with Children Check (Regulations 146–149). A sample staff record is available on the ACECQA website.

Supervisor Certificate: A supervisor certificate is provided to each centre-based service by the Regulatory Authority. The Approved Provider can nominate a person or persons to be the Certified Supervisor (refer to *Definitions*) at the service without requiring Departmental approval or paying a fee. Individual supervisor certificates are still valid however most individuals no longer need to apply.

Victorian Institute of Teaching (VIT): The statutory authority for the regulation and promotion of the teaching profession in Victoria, established as part of the Victorian Institute of Teaching Act 2001. All teachers in Victorian government schools, Catholic schools and independent schools are required to be registered with the VIT in order to practise in their profession. An amendment to the Education and Training Reform Act 2006 introduced in 2014 requires early childhood teachers to be registered with the Victorian Institute of Teaching from 30 September 2015.

Working directly with children: For the purposes of the National Regulations, working directly with children is defined as being physically present with children and directly engaged in providing them with education and/or care.

Working with Children (WWC) Check: The check is a legal requirement for those undertaking paid or voluntary child-related work in Victoria and is a measure to help protect children from harm arising as a

result of physical or sexual abuse. The Department of Justice assesses a person's suitability to work with children by examining relevant serious sexual, physical and drug offences in a person's national criminal history and, where appropriate, their professional history. A WWC Check card, notice or document (valid for five years), is granted to a person under working with children legislation if:

- they have been assessed as suitable to work with children
- there has been no information that, if the person worked with children, they would pose a risk to those children
- they are not prohibited from attempting to obtain, undertake or remain in child-related employment.

SOURCES AND RELATED POLICIES

Sources

- Australian Children's Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- ELAA's *Early Childhood Management Manual* contains additional information and attachments relating to staffing, including sample position descriptions, an induction (staff orientation) checklist and professional development planning and performance review information. Available from: www.elaa.org.au
- The Kindergarten Guide (Department of Education and Training): <http://www.education.vic.gov.au/childhood/providers/funding/Pages/kinderfundingcriteria.aspx>
- National Early Years Learning Framework : http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/belonging_being_and_becoming_the_early_years_learning_framework_for_australia.pdf
- *Victorian Early Years Learning and Development Framework*: <http://www.education.vic.gov.au/childhood/providers/edcare/pages/profresource.aspx>
- Working with Children Check unit, Department of Justice – provides details of how to obtain a WWC Check: www.justice.vic.gov.au/workingwithchildren/
- Victoria Police – National Police Record Check: www.police.vic.gov.au/content.asp?Document_ID=274

Service policies

- *Administration of First Aid Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Curriculum Development Policy*
- *Delivery and Collection of Children Policy*
- *Determining Responsible Person Policy*

- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Participation of Volunteers and Students Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring the service has a service supervisor certificate (refer to *Definitions*)
- ensuring that the service does not operate without a Nominated Supervisor (refer to *Definitions*), as required under the National Law (refer to *Determining Responsible Person Policy*)
- ensuring that there is a Responsible Person (refer to *Definitions* and *Determining Responsible Person Policy*) on the premises at all times the service is in operation
- ensuring that the Nominated Supervisor, Certified Supervisors, educators and all staff comply with the *Code of Conduct Policy* at all times
- ensuring that children being educated and cared for by the service are adequately supervised (refer to *Definitions* and *Supervision of Children Policy*) at all times they are in the care of that service (National Law: Section 165(1))
- complying with the legislated educator-to-child ratios at all times (National Law: Sections 169(1) & (3), National Regulations: Regulations 123, 355, 357, 360)
- ensuring that all staffing meets the requirements of the National Law, National Regulations and *the Department of Education and Training as outlined in The Kindergarten Guide* (refer to *Sources*) at all times the service is in operation
- complying with current legislation relating to the employment of staff, including the *Equal Opportunity Act 2010*, *Fair Work Act 2009*, *Occupational Health and Safety Act 2004* and the *Working with Children Act 2005*
- employing the relevant number of appropriately-qualified educators (refer to *Definitions*). Qualifications must be approved by ACECQA (refer to *Background* and *Sources*) (Regulations 126, 361)
- employing additional staff, as required, to provide a quality early childhood education and care program
- ensuring an early childhood teacher (refer to *Definitions*) is working with the service for the required period of time specified in the National Regulations, and that, where required, a record is kept of this work (Regulations 130–134, 152, 362, 363)
- appointing an appropriately-qualified and experienced educator to be the Educational Leader (refer to *Definitions*), and ensuring this is documented on the staff record (Regulations 118, 148)
- ensuring that Educators and other staff are provided with a current position description that relates to their role at the service
- maintaining a staff record (refer to *Definitions*) in accordance with Regulation 145, including information about the Nominated Supervisor, the Educational Leader, other staff members, volunteers, students and the Responsible Person. Details that must be recorded include

qualifications, training and the Working with Children Check (Regulations 146–149). A sample staff record is available on the ACECQA website

- complying with the requirements of the *Working with Children Act 2005*, and ensuring that the Nominated Supervisor, Certified Supervisor, educators, staff, volunteers and students on placement at the service have a current Working with Children Check (refer to *Definitions*) or a Victorian Institute of Teaching (VIT) certificate of registration
- ensuring that the Working with Children Check or VIT registration have been sighted and the details kept on each staff record (Regulations 145, 146, 147)
- completing a fit-and-proper assessment (refer to *Definitions*) in accordance with the *Education and Care Services National Law Act 2010* (Sections 12, 13, 14) and the *Education and Care Services National Regulations 2011* (Regulations 14, 15, 16). Where the Approved Provider is not an individual, a fit-and-proper assessment must be completed for each person with management or control of a service e.g. for the executive members of a Committee of Management
- determining who will cover the costs of Working with Children Checks or criminal history record checks (refer to *Definitions*)
- developing (and implementing, where relevant) an appropriate induction program for educators and all staff appointed to the service
- ensuring that volunteers/students and parents/guardians are adequately supervised at all times when participating at the service, and that the health, safety and wellbeing of children at the service is protected (refer to *Participation of Volunteers and Students Policy*)
- ensuring educators who are under 18 years of age are not left to work alone, and are adequately supervised at the service (Regulation 120)
- ensuring that there is at least one educator with current approved first aid qualifications, anaphylaxis management training and emergency asthma management training (refer to *Definitions*) in attendance and immediately available at all times that children are being educated and cared for by the service. Details of qualifications and training must be kept on the staff record (Regulations 136, 145)
- developing procedures to ensure that approved first aid qualifications, anaphylaxis management training and emergency asthma management training are evaluated regularly, and that staff are provided with the opportunity to update their qualifications prior to expiry
- ensuring that staff records (refer to *Definitions*) and a record of educators working directly with children (refer to *Definitions*) are updated annually, as new information is provided or when rostered hours of work are changed (Regulations 145–151)
- ensuring that annual performance reviews of educators and other staff are undertaken
- reviewing staff qualifications as required under current legislation and funding requirements on an annual basis
- ensuring that the Nominated Supervisor, educators/staff, volunteers and students on placement at the service are not affected by alcohol or drugs (including prescription medication) that would impair their capacity to supervise or provide education and care to children (Regulation 83)
- ensuring that all educators and staff have opportunities to undertake professional development relevant to their role to keep their knowledge and expertise current
- ensuring that the Nominated Supervisor and educators/staff are advised and aware of current child protection laws and any obligations that they may have under these laws (Regulation 84) (refer to *Child Safe Environment Policy*)

- informing parents/guardians of the name/s of casual or relief staff where the regular educator is absent
- developing and maintaining a list of casual and relief staff to ensure consistency of service provision
- ensuring that the procedures for the appointment of casual and relief staff are compliant with all regulatory and funding requirements.

The Nominated Supervisor is responsible for:

- providing written consent to accept the role of Nominated Supervisor
- ensuring that, in their absence from the service premises, a Certified Supervisor (refer to *Definitions*) is placed in day-to-day charge of the service (refer to *Determining Responsible Person Policy*)
- ensuring that the name and position of the Responsible Person in charge of the service is displayed and easily visible from the main entrance of the service
- complying with the service's *Code of Conduct Policy* at all times
- ensuring adequate supervision of children at all times (refer to *Supervision of Children Policy*)
- ensuring the educator-to-child ratios are maintained at all times, that each educator at the service meets the qualification requirements relevant to their role, including the requirement for current approved first aid qualifications, anaphylaxis management training and emergency asthma management training, and that details of such training is kept on the staff record
- developing rosters in accordance with the availability of Responsible Persons, staff qualifications, hours of operation and the attendance patterns of children
- ensuring that educators and other staff undertake appropriate induction following their appointment to the service
- ensuring that all educators and staff have opportunities to undertake professional development relevant to their role to keep their knowledge and expertise current
- participating in an annual performance review
- ensuring that volunteers/students and parents/guardians are adequately supervised at all times when participating at the service, and that the health, safety and wellbeing of children at the service is protected (refer to *Participation of Volunteers and Students Policy*)
- ensuring that less experienced educators and others engaged to be working with children are adequately supervised
- ensuring educators who are under 18 years of age are not left to work alone and are adequately supervised at the service
- providing details of their current Working with Children Check or VIT registration for the staff record
- sighting and recording details of current Working with Children Checks or VIT registrations before staff commence at the service
- ensuring that they are not affected by alcohol or drugs (including prescription medication) that would impair their capacity to supervise or provide education and care to children (Regulation 83)
- ensuring that they are aware of current child protection laws and any obligations that they may have under these laws (refer to *Child Safe Environment Policy*)
- informing parents/guardians of the name/s of casual or relief staff where the regular educator is absent.

Certified Supervisors are responsible for:

- providing written consent to accept the role of Certified Supervisor
- informing the Approved Provider and/or Nominated Supervisor in the event of absence from the service due to leave or illness so they can be replaced by another Responsible Person (refer to *Determining Responsible Person Policy*).

Certified Supervisors, educators and other staff are responsible for:

- meeting the qualifications, experience and management requirements if they wish to be nominated as a Certified Supervisor in accordance with the National Regulations
- complying with the service's *Code of Conduct Policy* at all times
- ensuring that they are not affected by alcohol or drugs (including prescription medication) that would impair their capacity to supervise or provide education and care to children
- providing details of their current Working with Children Check or VIT registration for the staff record
- renewing their Working with Children Check assessment every five years
- undertaking the required induction program following appointment to the service
- advising the Department of Justice of any relevant change in circumstances, including change of name, address, contact details and change of employer/volunteer organisation, including changes to the organisation's contact details
- adequately supervising children at all times (refer to *Definitions and Supervision of Children Policy*)
- supervising volunteers/students and parents/guardians at all times to protect the health, safety and wellbeing of children at the service (refer to *Participation of Volunteers and Students Policy*)
- maintaining educator-to-child ratios at all times
- maintaining current approved qualifications relevant to their role, including first aid qualifications, anaphylaxis management training and emergency asthma management training
- participating in an annual performance review
- undertaking professional development relevant to their role to keep their knowledge and expertise current
- supervising educators at the service who are under 18 years of age, and ensuring that they are not left to work alone
- ensuring that they are aware of current child protection laws and any obligations that they may have under these laws (refer to *Child Safe Environment Policy*).

Parents/guardians, volunteers and students on placement are responsible for:

- reading this *Staffing Policy*
- complying with the law, the requirements of the *Education and Care Services National Regulations 2011*, and all service policies and procedures
- following the directions of staff at the service at all times to ensure that the health, safety and wellbeing of children is protected.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly check staff records to ensure Working with Children Checks and qualifications are current and complete
- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

INTERACTIONS WITH CHILDREN POLICY

Mandatory – Quality Area 5

PURPOSE

This policy will provide guidelines to ensure:

- the development of positive and respectful relationships with each child at Rolling Hills Preschool
- each child at Rolling Hills Preschool is supported to learn and develop in a secure and empowering environment.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- maintaining the dignity and rights of each child at the service
- encouraging children to express themselves and their opinions, and to undertake experiences that develop self-reliance and self-esteem
- considering the health, safety and wellbeing of each child, and providing a safe, secure and welcoming environment in which they can develop and learn
- maintaining a duty of care (refer to *Definitions*) towards all children at the service
- considering the diversity of individual children at the service, including family and cultural values, age, and the physical and intellectual development and abilities of each child
- building collaborative relationships with families to improve learning and development outcomes for children
- encouraging positive, respectful and warm relationships between children and educators/staff at the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisors, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

The United Nations Convention on the Rights of the Child is founded on respect for the dignity and worth of each individual, regardless of race, colour, gender, language, religion, opinions, wealth, birth status or ability. Developing responsive, warm, trusting and respectful relationships with children promotes their wellbeing, self-esteem and sense of security. Positive interactions between educators/adults and children can empower children to feel valued, competent and capable.

Actively engaging in children’s learning and decision-making during play, daily routines and ongoing activities can stimulate children’s thinking, enrich their learning and encourage them to explore and manage their feelings and behaviour.

“Having supportive relationships with the nominated supervisor, educators, co-ordinators and staff members enables children to develop confidence in their ability to express themselves, work through differences, learn new things and take calculated risks” (*Guide to the National Quality Standard – refer to Sources*).

Regulation 155 of the National Regulations requires an Approved Provider of children’s services to take reasonable steps to ensure that the service provides education and care to children in a way that encourages them to express themselves, and develop self-reliance and self-esteem, maintains their dignity and rights, provides positive guidance and encouragement towards acceptable behaviour, and respects their cultural and family values.

Regulation 156 requires the Approved Provider to ensure that the service provides children with opportunities to interact and develop positive relationships with each other, and with the staff and volunteers at the service. To meet these requirements, the Approved Provider is expected to consider the size and composition of the groups in which the children are educated and cared for.

In developing an *Interactions with Children Policy*, early childhood education and care services must review and reflect on the philosophy, beliefs and values of the service, particularly with regard to the relationships with children. The development of this policy should also be informed by the service’s *Code of Conduct Policy*.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- *Children, Youth and Families Act 2005* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic)
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*: Sections 166, 167
- *Education and Care Services National Regulations 2011*: Regulations 73, 74, 155, 156, 157, 168(2)(j)
- *Equal Opportunity Act 2010* (Vic)
- *National Quality Standard*, Quality Area 5: Relationships with Children
 - Standard 5.1: Respectful and equitable relationships are developed and maintained with each child
 - Standard 5.2: Each child is supported to build and maintain sensitive and responsive relationships with other children and adults

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Adequate supervision: (In relation to this policy) **supervision** entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children
- number and positioning of educators
- current activity of each child
- areas in which the children are engaged in an activity (visibility and accessibility)
- developmental profile of each child and of the group of children
- experience, knowledge and skill of each educator
- need for educators to move between areas (effective communication strategies).

Behaviour guidance: A means of assisting children to self-manage their behaviour. It differs from traditional 'behaviour management' or 'discipline' which generally implies that an adult is 'managing' children's behaviour or using punishment to control children. Behaviour guidance applies to all forms of behaviour, not just behaviours labelled as 'negative'.

Behaviour guidance plan: A plan that documents strategies to assist an educator in guiding a child with diagnosed behavioural difficulties to self-manage his/her behaviour. The plan is developed in consultation with the Nominated Supervisor, educators, parents/guardians and families, and other professional support agencies as applicable.

Challenging behaviour: Behaviour that:

- disrupts others or causes disputes between children, but which is part of normal social development
- infringes on the rights of others
- causes harm or risk to the child, other children, adults or living things
- is destructive to the environment and/or equipment
- inhibits the child's learning and relationship with others
- is inappropriate relative to the child's developmental age and background.

Inclusion and Professional Support Program: Funded by the Commonwealth Government to promote and maintain high quality, inclusive education and care, for all children, including those with ongoing high support needs, in eligible early childhood education and care settings. This is achieved by increasing the knowledge and skills of educators, and the capacity of education and care services, through providing professional development, advice and access to additional

resources as well as inclusion support. Details are available at: <http://education.gov.au/inclusion-and-professional-support-program>

Notifiable complaint: A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DEECD within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DEECD for confirmation. Written reports to DEECD must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: <http://www.acecqa.gov.au>

Preschool Field Officer (PSFO) Program: Early intervention outreach services that are universally available within state-funded preschools for any child with developmental concerns. The primary role of the PSFO Program is to support the access and participation of children with additional needs in preschool. Details available at:

<http://www.education.vic.gov.au/childhood/providers/needs/pages/kinderinclusionsupport.aspx>

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the Regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Supervision: see **adequate supervision** in *Definitions* above.

SOURCES AND RELATED POLICIES

Sources

- *Behaviour guidance practice note series* (DEECD):
<http://www.education.vic.gov.au/childhood/providers/regulation/Pages/vcspracnotes.aspx>
- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia*:
<http://education.gov.au/early-years-learning-framework>
- Early Childhood Australia (ECA) *Code of Ethics* (2006):
http://www.earlychildhoodaustralia.org.au/code_of_ethics.html

- *Guide to the National Quality Standard*, ACECQA: www.acecqa.gov.au
- Inclusion and Professional Support Program (IPSP), Department of Education, Australian Government: <http://education.gov.au/inclusion-and-professional-support-program>
- *The Kindergarten Guide* (DEECD): <http://www.education.vic.gov.au/childhood/providers/funding/Pages/kinderfundingcriteria.aspx>
- United Nations Convention on the Rights of the Child: www.unicef.org/crc
- Victorian Early Years Learning and Development Framework: www.education.vic.gov.au/earlylearning/eyldf/default.htm

Service policies

- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Curriculum Development Policy*
- *Inclusion and Equity Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

PROCEDURES

The Approved Provider is responsible for:

- developing and implementing the *Interactions with Children Policy* in consultation with the Nominated Supervisor, Certified Supervisor, educators, staff and parents/guardians, and ensuring that it reflects the philosophy, beliefs and values of the service
- ensuring parents/guardians, the Nominated Supervisor and all staff are provided with a copy of the *Interactions with Children Policy* and comply with its requirements
- ensuring the Nominated Supervisor, educators and all staff are aware of the service's expectations regarding positive, respectful and appropriate behaviour, and acceptable responses and interactions when working with children and families (refer to *Code of Conduct Policy*)
- ensuring children are adequately supervised (refer to *Definitions*) and that educator-to-child ratios are maintained at all times (refer to *Supervision of Children Policy*)
- ensuring the size and composition of groups is considered to ensure all children are provided with the best opportunities for quality interactions and relationships with each other and with adults at the service (Regulation 156(2)). Smaller group sizes are considered optimal
- ensuring educational programs are delivered in accordance with an approved learning framework, are based on the developmental needs, interests and experiences of each child, and take into account the individual differences of each child (refer to *Inclusion and Equity Policy*)
- ensuring the educational program contributes to the development of children who have a strong sense of wellbeing and identity, and are connected, confident, involved and effective learners and communicators (Regulation 73) (refer to *Curriculum Development Policy*)
- ensuring that the service provides education and care to children in a way that:
 - encourages children to express themselves and their opinions

- allows children to undertake experiences that develop self-reliance and self-esteem
- maintains the dignity and the rights of each child at all times
- offers positive guidance and encouragement towards acceptable behaviour
- has regard to the cultural and family values, age, and the physical and intellectual development and abilities of each child being educated and cared for (Regulation 155)
- ensuring clear documentation of the assessment and evaluation of each child's:
 - developmental needs, interests, experiences and program participation
 - progress against the outcomes of the educational program (Regulation 74) (refer to *Curriculum Development Policy*)
- supporting educators/staff to gain appropriate training, knowledge and skills for the implementation of this policy
- ensuring the environment at the service is safe, secure and free from hazards for children (refer to *Child Safe Environment Policy, Occupational Health and Safety Policy and Supervision of Children Policy*)
- ensuring that the Nominated Supervisor, educators and all staff members at the service who work with children are aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances (National Law: Section 166)
- promoting collaborative relationships between children/families and educators, staff and other professionals, to improve the quality of children's education and care experiences
- referring notifiable complaints (refer to *Definitions*), grievances (refer to *Definitions*) or complaints that are unable to be resolved appropriately and in a timely manner to the Grievances Subcommittee/investigator (refer to *Complaints and Grievances Policy*)
- informing DEECD, in writing, within 24 hours of receiving a notifiable complaint (refer to *Definitions*) (Section 174(4), Regulation 176(2)(b))
- notifying DEECD, in writing, within 24 hours of a serious incident (refer to *Definitions*) occurring at the service (Section 174(4), Regulation 176)
- ensuring that where the service has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is on the service premises
- ensuring educators and staff use positive and respectful strategies to assist children to manage their own behaviour, and to respond appropriately to conflict and the behaviour of others
- ensuring that individual behaviour guidance plans are developed for children with diagnosed behavioural difficulties, in consultation with the Nominated Supervisor, educators, parents/guardians and families, and other professionals and support agencies (refer to *Sources*)
- developing links with other services and/or professionals to support children and their families, where required maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

The Nominated Supervisor is responsible for:

- implementing the *Interactions with Children Policy* at the service
- ensuring educators, staff and parents/guardians have access to the *Interactions with Children Policy* and comply with its requirements
- ensuring all staff are aware of the service's expectations regarding positive, respectful and appropriate behaviour, and acceptable responses and reactions when working with children and families (refer to *Code of Conduct Policy*)

- ensuring children are adequately supervised (refer to *Definitions*), that educator-to-child ratios are maintained at all times (refer to *Supervision of Children Policy*) and the environment is safe, secure and free from hazards (refer to *Child Safe Environment Policy*, *Supervision of Children Policy* and *Occupational Health and Safety Policy*)
- considering the size and composition of groups when planning program timetables to ensure all children are provided with the best opportunities for quality interactions and relationships with each other and with adults at the service. Smaller group sizes are considered optimal
- developing and implementing educational programs, in accordance with an approved learning framework, that are based on the developmental needs, interests and experiences of each child, and take into account the individual differences of each child (refer to *Inclusion and Equity Policy*)
- ensuring the educational program contributes to the development of children who have a strong sense of wellbeing and identity, and are connected, confident, involved and effective learners and communicators (refer to *Curriculum Development Policy*)
- ensuring that educators provide education and care to children in a way that:
 - encourages children to express themselves and their opinions
 - allows children to undertake experiences that develop self-reliance and self-esteem
 - maintains the dignity and the rights of each child at all times
 - offers positive guidance and encouragement towards acceptable behaviour
 - has regard to the cultural and family values, age, and the physical and intellectual development and abilities of each child being educated and cared for
- ensuring clear and straightforward documentation of the assessment and evaluation of each child's:
 - developmental needs, interests, experiences and program participation
 - progress against the outcomes of the educational program (Regulation 74) (refer to *Curriculum Development Policy*)
- organising appropriate training for educators/staff to assist with the implementation of this policy
- ensuring educators and all staff members at the service who work with children are aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances (National Law: Section 166)
- ensuring that procedures are in place for effective daily communication with parents/guardians to share information about children's learning, development, interactions, behaviour and relationships
- informing the Approved Provider of any notifiable complaints (refer to *Definitions*) or serious incidents (refer to *Definitions*) at the service
- ensuring that where the service has been notified of a court order prohibiting an adult from contacting an enrolled child, such contact does not occur while the child is on the service premises
- ensuring educators and staff use positive and respectful strategies to assist children to manage their own behaviour, and to respond appropriately to conflict and the behaviour of others
- ensuring that individual behaviour guidance plans are developed for children with diagnosed behavioural difficulties, in consultation with educators, parents/guardians and families, and other professionals and support agencies (refer to *Sources*)
- co-operating with other services and/or professionals to support children and their families, where required
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

Certified Supervisors and other educators are responsible for:

- assisting with the development and implementation of the *Interactions with Children Policy*, in consultation with the Approved Provider, Nominated Supervisor, parents/guardians and families
- providing access to the *Interactions with Children Policy* for parents/guardians and families
- complying with the requirements of the *Interactions with Children Policy*
- being aware of service expectations regarding positive, respectful and appropriate behaviour, and acceptable responses and reactions when working with children and families (refer to *Code of Conduct Policy*)
- providing adequate supervision of children at all times (refer to *Definitions and Supervision of Children Policy*)
- communicating and working collaboratively with parents/guardians and families in relation to their child's learning, development, interactions, behaviour and relationships
- delivering educational programs, in accordance with an approved learning framework, that are based on the developmental needs, interests and experiences of each child, and take into account the individual differences of each child (refer to *Inclusion and Equity Policy*)
- delivering programs that develop a sense of wellbeing and identity, connection to community, and provide skills for lifelong learning in all children (refer to *Curriculum Development Policy*)
- providing education and care to children in a way that:
 - encourages children to express themselves and their opinions
 - allows children to undertake experiences that develop self-reliance and self-esteem
 - maintains the dignity and the rights of each child at all times
 - offers positive guidance and encouragement towards acceptable behaviour
 - has regard to the cultural and family values, age, and the physical and intellectual development and abilities of each child being educated and cared for
- developing warm, responsive and trusting relationships with children that promote a sense of security, confidence and inclusion
- supporting each child to develop responsive relationships, and to work and learn in collaboration with others
- using positive and respectful strategies to assist children to manage their own behaviour, and to respond appropriately to conflict and the behaviour of others
- developing individual behaviour guidance plans for children with diagnosed behavioural difficulties, in consultation with parents/guardians and families, and other professionals and support agencies (refer to *Sources*)
- documenting assessments and evaluations for each child to inform the educational program (Regulation 74)
- being aware that it is an offence to subject a child to any form of corporal punishment, or any discipline that is unreasonable or excessive in the circumstances
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

Parents/guardians are responsible for:

- reading and complying with the *Interactions with Children Policy*
- engaging in open communication with educators about their child

- informing educators/staff of events or incidents that may impact on their child's behaviour at the service (e.g. moving house, relationship issues, a new sibling)
- informing educators/staff of any concerns regarding their child's behaviour or the impact of other children's behaviour
- working collaboratively with educators/staff and other professionals/support agencies to develop or review an individual behaviour guidance plan for their child, where appropriate.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2018

ENROLMENT AND ORIENTATION POLICY

Mandatory – Quality Area 6

Purpose

This policy outlines:

- the criteria for enrolment at Rolling Hills Preschool
- the process to be followed when enrolling a child at Rolling Hills Preschool
- the basis on which places within the programs will be allocated
- procedures for the orientation of new families and children into Rolling Hills Preschool
- processes to ensure compliance with legislative and DET funding requirements in relation to the enrolment of children in early childhood education and care services.

Policy statement

Values

Rolling Hills Preschool is committed to:

- equal access for all eligible children
- meeting the needs of the local community
- supporting families to meet the requirements for enrolment through the provision of information
- maintaining confidentiality in relation to all information provided for enrolment
- ensuring all families are welcomed and receive an effective orientation into the service.

Scope

This policy applies to the Approved Provider, Nominated Supervisor, early childhood teachers, educators, staff and parents/guardians who wish to enrol or have already enrolled their child at Rolling Hills Preschool.

Background and legislation

Background

The *Education and Care Services National Regulations 2011* require approved services to have a policy and procedures in place in relation to enrolment and orientation (Regulation 168(2)(k)).

It is intended that all eligible children (refer to *Definitions*) will have access to one year of kindergarten before commencing school. However, a shortage of places in some areas can limit choices for parents/guardians. Where demand is higher than availability, a priority system for access must be determined by the Approved Provider in order to allocate the available places. The criteria used to determine the allocation of places will vary from service to service, but is generally based on a service's philosophy, values and beliefs, and the provisions of the *Equal*

Opportunity Act 2012. The Victorian Government requires funded organisations to ensure that their policies and procedures promote equal opportunity for all children. Criteria for access and inclusion are outlined in *The Kindergarten Guide* (refer to *Sources*). Services participating in central enrolment schemes are required to comply with the enrolment procedures of that scheme.

Childcare services providing approved care (refer to *Definitions*) must abide by the *Family Assistance Legislation Amendment (Child Care Rebate) Act 2011* (refer to *Legislation and standards*) and the Commonwealth Government's *Priority for allocating places in child care services* (refer to *Sources*).

Immunisations are an effective means of reducing the risk of vaccine preventable diseases. Early childhood education and care services which are regulated under the *Education and Care Services National Law Act 2010* have legislative responsibilities under the *Public Health and Wellbeing Act 2008* to only offer a confirmed place in their programs to children with acceptable immunisation documentation (refer to *Definitions*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *A New Tax System (Family Assistance) Act 1999*
- *Charter of Human Rights and Responsibilities Act 2006* (Vic)
- *Children, Youth and Families Act 2005* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic)
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 160, 161, 162, 168, 177, 183
- *Equal Opportunity Act 2010* (Vic)
- *Family Assistance Legislation Amendment (Child Care Rebate) Act 2011*
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
 - Standard 6.1: Respectful and supportive relationships with families are developed and maintained
 - Element 6.1.1: There is an effective enrolment and orientation process for families
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Amendment (No Jab, No Play) Regulations 2015* (Vic)
- *Sex Discrimination Act 1984* (Cth)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – Federal Register of Legislation: <https://www.legislation.gov.au/>

Definitions

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Acceptable immunisation documentation: documentation as defined by the *Immunisation Enrolment Toolkit for early childhood education and care services* as acceptable evidence that a child is fully vaccinated for their age, or is on a recognised catch-up schedule if their child has fallen behind their vaccinations; or has a medical reason not to be vaccinated; or has been assessed as being eligible for a 16 week grace period.

Approved care: Care given by a service provider that has been approved by the Family Assistance Office to receive Child Care Benefit payments on behalf of eligible families. Most long day care, family day care, before-and-after school care, vacation care, some occasional care and some in-home care childcare services are approved providers. Details are available at: www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/

Authorised nominee: (In relation to this policy) is a person who has been given written authority by the parents/guardians of a child to collect that child from the education and care service. These details will be on the child's enrolment form.

The National Law and National Regulations do not specify a minimum age limit for an authorised nominee. Each service will need to consider a risk assessment on an individual basis to determine if a person under the age of 18 is able to be an authorised nominee and, if so, what constitutes the minimum acceptable age at that service.

Child Care Benefit (CCB): A Commonwealth Government payment to help families who use either approved or registered childcare services. All eligible families can receive some Child Care Benefit. Details are available at: www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/

Children with additional needs: Children whose development or physical condition requires specialist support or children who may need additional support due to language, cultural or economic circumstances (refer to *Inclusion and Equity Policy*).

Deferral: When a child does not attend in the year when they are eligible for a funded kindergarten place, or is officially withdrawn from a service prior to the April data collection. DET considers that this child has not accessed a year of funded kindergarten and is therefore eligible for DET funding in the following year.

Eligible child: A child attending an early childhood education and care service as described in the *Immunisation enrolment toolkit for early childhood education and care services* or a child in a kindergarten program who meets the requirements of both *The Kindergarten Guide* and the *Immunisation enrolment toolkit for early childhood education and care services*.

Enrolment application fee: A payment to cover administrative costs associated with the processing of a child's enrolment application for a place in a program at the service.

Enrolment application form: A form to apply for a place at the service.

Enrolment form: A form that collects contact details, and personal and medical information from parents/guardians about their child. The information on this form is placed on the child's enrolment record (see below) and is kept confidential by the service.

Enrolment record: The collection of documents which contains information on each child as required under the National Regulations (Regulations 160, 161, 162) including the enrolment form; details of any court orders; and immunisation documentation as specified in the *Immunisation Enrolment Toolkit for early childhood education and care services*. This information is kept confidential by the service.

Fee: A charge for a place within a program at the service.

Sources and related policies

Sources

- Australian Childhood Immunisation Register:
www.humanservices.gov.au/customer/services/medicare/australian-childhood-immunisation-register
- Child Care Benefit (Eligibility of Child Care Services for Approval and Continued Approval) Determination 2000: www.legislation.gov.au/Series/F2006B01541
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*: www.acecqa.gov.au/
- *Guide to the National Quality Standard*: www.acecqa.gov.au/
- *Priority for allocating places in child care services*: <http://education.gov.au/priority-allocating-places>
- *The Kindergarten Guide (Department of Education and Training)*:
www.education.vic.gov.au/childhood/providers/funding/Pages/kinderfundingcriteria.aspx
- *Immunisation enrolment toolkit for early childhood education and care services 2015*:
www2.health.vic.gov.au/about/publications/policiesandguidelines/immunisation-enrolment-toolkit
- Victorian Department of Health: www.health.vic.gov.au/immunisation

Service policies

- *Acceptance and Refusal of Authorisations Policy*
- *Complaints and Grievances Policy*
- *Dealing with Infectious Disease Policy*
- *Fees Policy*
- *Inclusion and Equity Policy*
- *Privacy and Confidentiality Policy*

Procedures

The Approved Provider is responsible for:

- determining the criteria for priority of access to programs at Rolling Hills Preschool, based on funding requirements and the service's philosophy (refer also to Attachment 1 – Eligibility and priority of access criteria)
- considering any barriers to access that may exist, developing procedures that ensure all eligible families are aware of, and are able to access, an early childhood program
- complying with the *Inclusion and Equity Policy*
- appointing a person to be responsible for the enrolment process and the day-to-day implementation of this policy (refer also to Attachment 2 – General enrolment procedures and Attachment 3 – Sample enrolment application form)
- providing opportunities (in consultation with the Nominated Supervisor and educators) for interested families to attend the service during operational hours to observe the program and become familiar with the service prior to their child commencing in the program
- providing parents/guardians with information about the requirements of the law for enrolment, locating and accessing immunisation services and obtaining acceptable immunisation documentation required for enrolment
- ensuring parents/guardians are only offered a tentative place until the child's immunisation documentation is assessed as being acceptable
- assessing the child's immunisation documentation **prior to enrolment** to determine if the child's vaccination status complies with requirements or whether the child is eligible for the 16 week grace period
- ensuring that only children who have acceptable immunisation documentation have a confirmed place in the program
- advising parents/guardians who do not have acceptable immunisation documentation that their children are not able to attend the service and referring them to immunisation services (see Attachment 4 – Letter for parents/guardians without acceptable immunisation documentation)
- taking reasonable steps to obtain acceptable immunisation documentation from a parent/guardian of a child enrolled under a grace period within the 16 weeks from when the child begins attending (Note: the child can continue to attend the service if acceptable immunisation documentation is not obtained).
- ensuring that the enrolment form (refer to *Definitions*) complies with the requirements of Regulations 160, 161, 162 and that it effectively meets the management requirements of the service
- ensuring that enrolment records (refer to *Definitions*) are stored in a safe and secure place, and kept for three years after the last date on which the child was educated and cared for by the service (Regulation 183)
- ensuring that the orientation program and plans meet the individual needs of children and families, and comply with DET funding criteria

- reviewing the orientation processes for new families and children to ensure the objectives of this policy are met
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of the Approved Provider, Nominated Supervisor or educators under the Law (Regulation 157).

The Nominated Supervisor and early childhood teachers are responsible for:

- reviewing enrolment applications to identify children with additional needs (refer to *Definitions* and the *Inclusion and Equity Policy*)
- responding to parent/guardian enquiries regarding their child's readiness for the program that they are considering enrolling their child in
- discussing the individual child's needs with parents/guardians and developing an orientation program to assist them to settle into the program
- encouraging parents/guardians to:
 - stay with their child as long as required during the settling in period
 - make contact with educators and carers at the service, when required
- assisting parents/guardians to develop and maintain a routine for saying goodbye to their child
- sharing information with parents/guardians regarding their child's progress with regard to settling in to the service
- discussing support services for children with parents/guardians, where required.

All educators are responsible for:

- responding to enrolment enquiries on a day-to-day basis and referring people to the person responsible for the enrolment process, as required
- providing parents/guardians with information about the requirements of the law for enrolment, locating and accessing immunisation services and obtaining acceptable immunisation documentation required for enrolment
- developing strategies to assist new families to:
 - feel welcomed into the service
 - become familiar with service policies and procedures
 - share information about their family beliefs, values and culture
 - share their understanding of their child's strengths, interests, abilities and needs
 - discuss the values and expectations they hold in relation to their child's learning
- providing comfort and reassurance to children who are showing signs of distress when separating from family members
- complying with the service's *Privacy and Confidentiality Policy* in relation to the collection and management of a child's enrolment information.

Parents/guardians are responsible for:

- reading and complying with this *Enrolment and Orientation Policy*
- completing the enrolment application form and the enrolment form prior to their child's commencement at the service and providing acceptable immunisation documentation of their child's immunisation status
- where a child is on an immunisation catch-up schedule, ensuring that the child's immunisations are updated in line with the schedule and providing acceptable immunisation documentation to the service
- ensuring that all other required information is provided to the service
- updating information by notifying the service of any changes as they occur.

Volunteers and students, while at the service, are responsible for following this policy and its procedures

Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Authorisation

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 07/08/2016.

Review date: 07/August/2017

FEES POLICY

Mandatory – Quality Area 7

PURPOSE

This policy will provide clear guidelines for:

- the setting, payment and collection of fees
- ensuring the viability of Rolling Hills Preschool, by setting appropriate fees and charges
- the equitable and non-discriminatory application of fees across the programs provided by Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing responsible financial management of the service, including establishing fees that will result in a financially viable service, while keeping user fees at the lowest possible level
- providing a fair and manageable system for dealing with non-payment and/or inability to pay fees/outstanding debts
- ensuring there are no financial barriers for families wishing to access an early childhood program for their child/children
- maintaining confidentiality in relation to the financial circumstances of parents/guardians
- advising users of the service about program funding, including government support and fees to be paid by parents/guardians
- providing equitable access for families eligible for the Kindergarten Fee Subsidy.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators and parents/guardians with an enrolled child, or who wish to enrol a child at Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

The Department of Education and Early Childhood Development (DEECD) provides per capita funding as a contribution towards the costs of the four-year-old kindergarten program. Income from other sources, primarily fees, is required to meet all the additional costs incurred by the service in the delivery of the children's program. In addition, the Kindergarten Fee Subsidy (refer to *Definitions*) enables eligible families to attend the four-year-old kindergarten program at minimal or no cost.

DEECD also funds eligible three-year-old Aboriginal and Torres Strait Islander children, and children known to Child Protection, to access kindergarten programs as outlined in *The Kindergarten Guide* (refer to *Sources*).

DEECD requires that funded services have a comprehensive written fees policy in place, and the content of this policy must be communicated to families. The policy must include a written statement about the fees to be charged, as required under Regulation 168(2)(n), and the payment process. All families must be informed of applicable term and annual fees at the time of enrolment. Services must also advise eligible families of the Kindergarten Fee Subsidy arrangements. The fees charged must comply with the *Kindergarten Fee Subsidy – Fees Policy* (refer to *Definitions*), and be responsive to the local community and the viability of the service. *The Kindergarten Guide* (refer to *Sources*) outlines the criteria to be covered in the policy.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Charter of Human Rights and Responsibilities 2006* (Vic)
- *Child Wellbeing and Safety Act 2005* (Vic)
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulation 168(2)(n)
- *Equal Opportunity Act 1995* (Vic)
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
 - Standard 7.3: Administrative systems enable the effective management of a quality service

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved care: Care given by a service provider that has been approved by the Family Assistance Office to receive Child Care Benefit payments on behalf of eligible families. Most long day care, family day care, before-and-after school care, vacation care, some occasional care and some in-home care childcare services are approved providers. Details are available at: www.humanservices.gov.au/customer/services/centrelink/child-care-benefit

Child Care Benefit (CCB): A Commonwealth Government payment to help families who use either approved or registered childcare services. All eligible families can receive some Child Care Benefit. Details are available at: www.humanservices.gov.au/customer/services/centrelink/child-care-benefit

Early Start Kindergarten: A funding program that enables three-year-old Aboriginal and Torres Strait Islander children, and children known to Child Protection to attend a kindergarten program

that is planned and delivered by an early childhood teacher for a specific number of hours. Details are available at:

<http://www.education.vic.gov.au/about/programs/learningdev/Pages/default.aspx>

Enrolment application fee: A payment to cover administrative costs associated with the processing of a child's enrolment application for a place in a program at the service.

Excursion/service event charge: An additional charge required to meet the cost of special events or excursions that occur in response to emerging children's program needs. Events that are planned ahead and are included as an expenditure item in the service's budget do not incur this additional charge (refer to *Excursions and Service Events Policy*).

Fees: A charge for a place within a program at the service.

Health Care Card: A Commonwealth Government entitlement providing concessions for low-income earners and other eligible people. Details are available at:

www.humanservices.gov.au/customer/services/centrelink/health-care-card

Kindergarten fee deposit: A charge to secure a place that has been offered in a program at the service. This is deducted from term fees.

Kindergarten Fee Subsidy (KFS): A state government subsidy paid directly to the funded service to enable eligible families to attend a funded kindergarten program at no cost (or minimal cost) to promote participation. Details, eligibility requirements and a calculator, are available in *The Kindergarten Guide* (refer to *Sources*).

Kindergarten Fee Subsidy – Fees Policy: Provides operational guidelines for services administering the Kindergarten Fee Subsidy and can be found in *The Kindergarten Guide* (refer to *Sources*).

Late collection charge: A charge that may be imposed by the Approved Provider when parents/guardians are late to collect their child/children from the program.

Registered care: Care provided by nannies, grandparents, relatives or friends, individuals working within kindergartens, occasional care services and outside school hours care services that are registered with the Family Assistance Office. Eligible families can receive some reimbursement of costs when using a registered care provider. Details are available at:

www.humanservices.gov.au/customer/services/centrelink/child-care-benefit

Voluntary parent/guardian contribution: A voluntary payment for items not directly related to the provision of the children's program. Attendance at the service is not conditional on this payment.

SOURCES AND RELATED POLICIES

Sources

- *The Kindergarten Guide* (Department of Education and Early Childhood Development is available under *early childhood / service providers on the DEECD website: www.education.vic.gov.au*
- The constitution of Rolling Hills Preschool

Service policies

- *Complaints and Grievances Policy*
- *Delivery and Collection of Children Policy*

- *Enrolment and Orientation Policy*
- *Excursions and Service Events Policy*
- *Inclusion and Equity Policy*
- *Privacy and Confidentiality Policy*

PROCEDURES

The Approved Provider is responsible for:

- reviewing the current budget to determine fee income requirements
- developing a fee policy that balances the parent's/guardian's capacity to pay, with providing a high-quality program and maintaining service viability
- implementing and reviewing this policy in consultation with parents/guardians, the Nominated Supervisor and staff, and in line with the requirements of DEECD's *The Kindergarten Guide* (refer to *Sources*)
- ensuring that this policy is based on the principles of the *Kindergarten Fee Subsidy – Fees Policy* (refer to *Definitions*)
- considering any issues regarding fees that may be a barrier to families enrolling at Rolling Hills Preschool and removing those barriers wherever possible
- reviewing the number of families experiencing financial hardship and the effectiveness of the procedures for late payment and support offered
- considering options for payment when affordability is an issue for families
- clearly communicating this policy and payment options to families in a culturally-sensitive way, and in the family's first language where possible
- providing all parents/guardians with a copy of the document containing fee information for families
- providing all parents/guardians with a statement of fees and charges upon enrolment of their child, and ensure that the *Fees Policy* is readily accessible at the service (Regulation 171)
- providing all parents/guardians with a fee payment agreement
- collecting and receipting all fees
- collecting all relevant information and maintaining relevant documentation regarding those with entitlement to concessions, where applicable
- complying with the service's *Privacy and Confidentiality Policy* regarding financial and other information received, including in relation to the payment/non-payment of fees
- notifying parents/guardians within 14 days of any proposed changes to the fees charged or the way in which the fees are collected (Regulation 172(2))
- ensuring a notice outlining fees charged by the service is displayed prominently in the main entrance to Rolling Hills Preschool.

The Nominated Supervisor is responsible for:

- assisting the Approved Provider in developing this policy, and ensuring that this policy is based on the principles of the *Kindergarten Fee Subsidy – Fees Policy* (refer to *Definitions*)
- implementing and reviewing this policy, in consultation with parents/guardians, the Approved Provider and staff, and in line with the requirements of DEECD's *The Kindergarten Guide* (refer to *Sources*)
- considering any issues regarding fees that may be a barrier to families enrolling at Rolling Hills Preschool and removing those barriers wherever possible
- considering options for payment when affordability is an issue for families
- communicating this policy and payment options to families in a culturally-sensitive way and in the family's first language where possible
- providing all parents/guardians with a copy of the document containing fee information for families
- providing all parents/guardians with a statement of fees and charges upon enrolment of their child, and ensure that the *Fees Policy* is readily accessible at the service
- providing all parents/guardians with a fee payment agreement
- collecting all relevant information and maintaining relevant documents regarding those with entitlement to concessions, where applicable
- complying with the service's *Privacy and Confidentiality Policy* regarding financial and other information received, including in relation to the payment/non-payment of fees
- notifying parents/guardians within 14 days of any proposed changes to the fees charged or the way in which the fees are collected
- ensuring a notice outlining fees charged by the service is displayed prominently in the main entrance to Rolling Hills Preschool.

Certified Supervisors and other educators are responsible for:

- informing the Approved Provider of any complaints or concerns that have been raised regarding fees at the service
- referring parents'/guardians' questions in relation to this policy to the Approved Provider
- assisting the Approved Provider, as required, in sighting supporting documentation for access to the Kindergarten Fee Subsidy.

Parents/guardians are responsible for:

- reading the Rolling Hills Preschool Fee information for families, the Fee Payment Agreement and the Statement of Fees and Charges
- signing and complying with the Fee Payment Agreement
- notifying the Approved Provider if experiencing difficulties with the payment of fees
- providing the required documentation to enable the service to claim the Kindergarten Fee Subsidy for eligible families.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness, particularly in relation to affordability, flexibility of payment options and procedures for the collection of fees
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- monitor the number of families/children excluded from the service because of their inability to pay fees
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures (Regulation 172(2)).

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2016.

REVIEW DATE: 10/September/2017

GOVERNANCE AND MANAGEMENT OF THE SERVICE POLICY

Mandatory – Quality Area 7

PURPOSE

This policy outlines the duties, roles and responsibilities of the Committee of Management of Rolling Hills Preschool.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to ensuring that there are appropriate systems and processes in place to enable:

- good governance and management of the organisation
- accountability to its stakeholders
- compliance with all regulatory and legislative requirements placed on the organisation
- the organisation to remain solvent and comply with all its financial obligations.

SCOPE

This policy applies to the Approved Provider, the Committee of Management of Rolling Hills Preschool and all subcommittees of the Committee of Management.

BACKGROUND AND LEGISLATION

Background

The governance of an organisation is concerned with the systems and processes that ensure the overall direction, effectiveness, supervision and accountability of a service. Members of the Committee of Management are responsible for setting the directions for the service and ensuring that its goals and objectives are met in line with its constitution, and all legal and regulatory requirements governing the operation of the business are met.

Under the National Law and National Regulations, early childhood services are required to have policies and procedures in place relating to the governance and management of the service, including confidentiality of records (refer to *Privacy and Confidentiality Policy*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Associations Incorporation Reform Act 2012 (Vic)*, as applicable to the service
- *Corporations Act 2001*, as applicable to the service
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011: Regulation 168(2)(l)*
- *National Quality Standard, Quality Area 7: Leadership and Service Management*

- Standard 7.3: Administrative systems enable the effective management of a quality service

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Actual conflict of interest: One where there is a real conflict between a Committee of Management member’s responsibilities and their private interests.

Conflict of interest: An interest that may affect, or may appear reasonably likely to affect, the judgement or conduct of a member (or members) of the Committee of Management or subcommittee, or may impair their independence or loyalty to the service. A conflict of interest can arise from avoiding personal losses as well as gaining personal advantage, whether financial or otherwise, and may not only involve the member of the Committee of Management or subcommittee, but also their relatives, friends or business associates.

Ethical practice: A standard of behaviour that the service deems acceptable in providing their services.

Governance: The process by which organisations are directed, controlled and held to account. It encompasses authority, accountability, stewardship, leadership, directions and control exercised in the organisation (Australian National Audit Office, 1999).

Interest: Anything that can have an impact on an individual or a group.

Perceived conflict of interest: Arises where a third party could form the view that a Committee of Management member’s private interests could improperly influence the performance of their duties on the Committee of Management, now or in the future.

Potential conflict of interest: Arises where a Committee of Management member has private interests that could conflict with their responsibilities.

Private interests: Includes not only a Committee of Management member’s own personal, professional or business interests, but also those of their relatives, friends or business associates.

SOURCES AND RELATED POLICIES

Sources

- *ELAA Early Childhood Management Manual, Version 2 2013*
- Our Community: www.ourcommunity.com.au
- Justice Connect: <http://www.justiceconnect.org.au/>

Service policies

- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Privacy and Confidentiality Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that the service has appropriate systems and policies in place for the effective governance and management of the service.

Core elements of the governance model

The following are the core elements of the governance systems at Rolling Hills Preschool for which the Committee of Management is responsible:

Stewardship/custodianship

Ensure:

- the service pursues its stated purpose and remains viable
- budget and financial accountability to enable ongoing viability and making best use of the service's resources
- the service manages risks appropriately.

Leadership, forward planning and guidance

Provide leadership, forward planning and guidance to the service, particularly in relation to developing a strategic culture and directions.

Authority, accountability, and control

- Monitor and oversee management including ensuring that good management practices and appropriate checks and balances are in place.
- Be accountable to members of the service.
- Maintain focus, integrity and quality of service.
- Oversee legal functions and responsibilities.
- Declare any actual, potential or perceived conflicts of interest (refer to *Definitions*).

Legal liabilities of members of the Committee of Management

The Committee of Management at Rolling Hills Preschool is responsible under the constitution to take all reasonable steps to ensure that the laws and regulations relating to the operation of the service are observed. Members of the Committee of Management are responsible for ensuring that:

- adequate policies and procedures are in place to comply with the legislative and regulatory requirements placed on the service
- appropriate systems are in place to monitor compliance
- reasonable care and skill is exercised in fulfilling their roles as part of the governing body of the service
- they act honestly, and with due care and diligence
- they do not use information they have access to, by virtue of being on the Committee of Management improperly
- they do not use their position on the Committee of Management for personal gain or put individual interests ahead of responsibilities.

Responsibilities of the Committee of Management

The Committee of Management of Rolling Hills Preschool is responsible for:

- developing coherent aims and goals that reflect the interests, values and beliefs of the members and staff, and the stated aims of the service, and have a clear and agreed philosophy which guides business decisions and the work of the Committee of Management and staff

- ensuring there is a sound framework of policies and procedures that complies with all legislative and regulatory requirements, and that enables the daily operation of the service to be geared towards the achievement of the service’s vision and mission
- establishing clearly defined roles and responsibilities for the members of the Committee of Management, individually and as a collective, management and staff, and clearly articulate the relationship between the Committee of Management, staff and members of the service
- developing ethical standards and a code of conduct (refer to *Code of Conduct Policy*) which guide actions and decisions in a way that is transparent and consistent with the goals, values and beliefs of the service
- undertaking strategic planning and risk assessment on a regular basis and having appropriate risk management strategies in place to manage risks faced by the service
- ensuring that the actions of and decisions made by the Committee of Management are transparent and will help build confidence among members and stakeholders
- reviewing the service’s budget and monitoring financial performance and management to ensure the service is solvent at all times, and has good financial strength
- approving annual financial statements and providing required reports to government
- setting and maintaining appropriate delegations and internal controls
- appointing senior staff (e.g. the CEO or Director, if the service is large) or all staff (if the service is small), and monitoring their performance
- evaluating and improving the performance of the Committee of Management
- focusing on the strategic directions of the organisation and avoiding involvement in day-to-day operational decisions, particularly where the authority is delegated to senior management staff within the service.

CONFIDENTIALITY

All members of the Committee of Management and subcommittees who gain access to confidential, commercially-sensitive and other information of a similar nature, whether in the course of their work or otherwise, shall not disclose that information to anyone unless the disclosure of such information is required by law (refer to *Privacy and Confidentiality Policy*).

Members of the Committee of Management and subcommittees shall respect the confidentiality of those documents and deliberations at Committee of Management or subcommittee meetings, and shall not:

- disclose to anyone the confidential information acquired by virtue of their position on the Committee of Management or subcommittee
- use any information so acquired for their personal or financial benefit, or for the benefit of any other person
- permit any unauthorised person to inspect, or have access to, any confidential documents or other information.

This obligation, placed on a member of the Committee of Management or subcommittee, shall continue even after the individual has completed their term and is no longer on the Committee of Management or subcommittee.

The obligation to maintain confidentiality also applies to any person who is invited to any meetings of the Committee of Management or subcommittee as an observer or in any other capacity.

ETHICAL PRACTICE

The following principles will provide the ethical framework to guide the delivery of services at Rolling Hills Preschool:

- treating colleagues, parents/guardians, children, suppliers, public and other stakeholders respectfully and professionally at all times
- dealing courteously with those who hold differing opinions
- respecting cultural differences and diversity within the service, and making every effort to encourage and include all children and families in the community
- having an open and transparent relationship with government, supporters and other funders
- operating with honesty and integrity in all work
- being open and transparent in making decisions and undertaking activities, and if that is not possible, explaining why
- working to the standards set under the *National Quality Framework* and all applicable legislation as a minimum, and striving to continually improve the quality of the services delivered to the community
- disclosing conflicts of interest as soon as they arise and effectively managing them
- recognising the support and operational contributions of others in an appropriate manner
- assessing and minimising the adverse impacts of decisions and activities on the natural environment.

MANAGING CONFLICTS OF INTEREST

Conflicts of interest, whether actual, potential or perceived (refer to *Definitions*), must be declared by all members of the Committee of Management or subcommittee, and managed effectively to ensure integrity and transparency.

Every member of the Committee of Management or subcommittee has a continuing responsibility to scrutinise their transactions, external business interests and relationships for potential conflicts and to make such disclosures in a timely manner as they arise.

The following process will be followed to manage any conflicts of interest:

- whenever there is a conflict of interest, as defined in this policy, the member concerned must notify the President of such conflict, as soon as possible after identifying the conflict
- the member who is conflicted must not be present during the meeting of the Committee of Management or subcommittee where the matter is being discussed, or participate in any decisions made on that matter. The member concerned must provide the Committee with any and all relevant information they possess on the particular matter
- the minutes of the meeting must reflect that the conflict of interest was disclosed and appropriate processes followed to manage the conflict.

A *Conflict of interest disclosure statement* must be completed by each member of the Committee of Management and subcommittee upon his or her appointment and annually thereafter. If the information in this statement changes during the year, the member shall disclose the change to the President, and revise the disclosure statement accordingly.

All violations of the requirement to disclose and manage conflicts shall be dealt with in accordance with the constitution of Rolling Hills Preschool.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Committee of Management will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2014.

REVIEW DATE: 10/SEPTEMBER/2019

COMPLAINTS AND GRIEVANCES POLICY

Mandatory – Quality Area 7

PURPOSE

This policy will provide guidelines for:

- receiving and dealing with complaints and grievances at Rolling Hills Preschool
- procedures to be followed in investigating complaints and grievances.

Note: This policy does not address complaints relating to staff grievances or employment matters. The relevant awards provide information on the management of such issues.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- providing an environment of mutual respect and open communication, where the expression of opinions is encouraged
- complying with all legislative and statutory requirements
- dealing with disputes, complaints and complainants with fairness and equity
- establishing mechanisms to promote prompt, efficient and satisfactory resolution of complaints and grievances
- maintaining confidentiality at all times this prohibits the use of social media to voice or deal with a complaint or grievance

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Complaints or grievances may be received from anyone who comes in contact with Rolling Hills Preschool including parents/guardians, volunteers, students, members of the local community and other agencies.

In most cases, dealing with complaints and grievances will be the responsibility of the Approved Provider. All complaints and grievances, when lodged, need to be initially assessed to determine whether they are a general or a notifiable complaint (refer to *Definitions*).

When a complaint or grievance has been assessed as 'notifiable', the Approved Provider must notify Department of Education and Early Childhood Development (DEECD) of the complaint or grievance. The Approved Provider will investigate the complaint or grievance and take any

actions deemed necessary, in addition to responding to requests from and assisting with any investigation by DEECD.

There may be occasions when the complainant reports the complaint or grievance directly to DEECD. If DEECD then notifies the Approved Provider about a complaint they have received, the Approved Provider will still have responsibility for investigating and dealing with the complaint or grievance as outlined in this policy, in addition to co-operating with any investigation by DEECD.

DEECD will investigate all complaints and grievances it receives about a service, where it is alleged that the health, safety or wellbeing of any child within the service may have been compromised, or that there may have been a contravention of the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Charter of Human Rights and Responsibilities Act 2006 (Vic)*
- *Children, Youth and Families Act 2005 (Vic)*
- *Education and Care Services National Law Act 2010*: Section 174(2)(b)
- *Education and Care Services National Regulations 2011*: Regulations 168(2)(o) and 176(2)(b)
- *Information Privacy Act 2000 (Vic)*
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
 - Standard 7.3: Administrative systems enable the effective management of a quality service
 - Element 7.3.4: Processes are in place to ensure that all grievances and complaints are addressed, investigated fairly and documented in a timely manner
- *Privacy Act 1988 (Cth)*
- *Privacy Regulations 2013(Cth)*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Complaint: (In relation to this policy) a complaint is defined as an issue of a minor nature that can be resolved promptly or within 24 hours, and does not require a detailed investigation. Complaints include an expression of displeasure, such as poor service, and any verbal or written complaint directly related to the service (including general and notifiable complaints).

Complaints do not include staff, industrial or employment matters, occupational health and safety matters (unless related to the safety of the children) and issues related to the legal business entity, such as the incorporated association or co-operative.

Complaints and Grievances Register: (In relation to this policy) records information about complaints and grievances received at the service, together with a record of the outcomes. This register must be kept in

a secure file, accessible only to educators and Responsible Persons at the service. The register can provide valuable information to the Approved Provider on meeting the needs of children and families at the service.

Dispute resolution procedure: The method used to resolve complaints, disputes or matters of concern through an agreed resolution process.

General complaint: A general complaint may address any aspect of the service e.g. a lost clothing item or the service's fees. Services do not have to inform DEECD, but the complaint must be dealt with as soon as is practicable to avoid escalation of the issue.

Grievance: A grievance is a formal statement of complaint that cannot be addressed immediately and involves matters of a more serious nature e.g. the service is in breach of a policy or the service did not meet the care expectations of a family.

Mediator: A person (neutral party) who attempts to reconcile differences between disputants.

Mediation: An attempt to bring about a peaceful settlement or compromise between disputants through the objective intervention of a neutral party.

Notifiable complaint: A complaint that alleges a breach of the Act or Regulation, or alleges that the health, safety or wellbeing of a child at the service may have been compromised. Any complaint of this nature must be reported by the Approved Provider to the secretary of DEECD within 24 hours of the complaint being made (Section 174(2)(b), Regulation 176(2)(b)). If the Approved Provider is unsure whether the matter is a notifiable complaint, it is good practice to contact DEECD for confirmation.

Written reports to DEECD must include:

- details of the event or incident
- the name of the person who initially made the complaint
- if appropriate, the name of the child concerned and the condition of the child, including a medical or incident report (where relevant)
- contact details of a nominated member of the Grievances Subcommittee/investigator
- any other relevant information.

Written notification of complaints must be submitted using the appropriate forms, which can be found on the ACECQA website: www.acecqa.gov.au

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the Regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

Social Media: Websites and applications that enable users to create and share content or to participate in social networking. These include but are not limited to Facebook, Twitter, Myspace, LinkedIn and other sites designed to share information to large groups of people.

SOURCES AND RELATED POLICIES

Sources

- ACECQA: www.acecqa.gov.au

- Department of Education and Early Childhood Development (DEECD) – Regional Office details are available under ‘Contact Us’ on the DEECD website: www.education.vic.gov.au
- ELAA *Early Childhood Management Manual*: www.elaa.org.au
- *The Kindergarten Guide* (Department of Education and Early Childhood Development) is available under *early childhood / service providers on the DEECD website*: www.education.vic.gov.au

Service policies

- *Code of Conduct Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Interactions with Children Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider is responsible for:

- being familiar with the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*, service policies and constitution, and complaints and grievances policy and procedures
- identifying, preventing and addressing potential concerns before they become formal complaints/grievances
- ensuring that the name and telephone number of the Responsible Person (refer to *Staffing Policy*) to whom complaints and grievances may be addressed are displayed prominently at the main entrance of the service (Regulation 173(2)b))
- ensuring that the address and telephone number of the Authorised Officer at the DEECD regional office are displayed prominently at the main entrance of the service (Regulation 173(2)(e))
- advising parents/guardians and any other new members of Rolling Hills Preschool of the complaints and grievances policy and procedures upon enrolment
- ensuring that this policy is available for inspection at the service at all times (Regulation 171)
- being aware of, and committed to, the principles of communicating and sharing information with service employees, members and volunteers
- responding to all complaints and grievances in the most appropriate manner and at the earliest opportunity
- treating all complainants fairly and equitably
- providing a *Complaints and Grievances Register* (refer to *Definitions*) and ensuring that staff record complaints and grievances along with outcomes
- complying with the service's *Privacy and Confidentiality Policy* and maintaining confidentiality at all times (Regulations 181, 183)

- establishing a Grievances Subcommittee or appointing an investigator to investigate and resolve grievances
- referring notifiable complaints (refer to *Definitions*), grievances (refer to *Definitions*) or complaints that are unable to be resolved appropriately and in a timely manner to the Grievances Subcommittee/investigator
- informing DEECD in writing within 24 hours of receiving a notifiable complaint (refer to *Definitions*) (Act 174(4), Regulation 176(2)(b))
- receiving recommendations from the Grievances Subcommittee/investigator and taking appropriate action.

The Nominated Supervisor, Certified Supervisors, educators and other staff are responsible for:

- responding to and resolving issues as they arise where practicable
- maintaining professionalism and integrity at all times
- discussing minor complaints directly with the party involved as a first step towards resolution (the parties are encouraged to discuss the matter professionally and openly work together to achieve a desired outcome)
- informing complainants of the service's *Complaints and Grievances Policy*
- recording all complaints and grievances in the *Complaints and Grievances Register* (refer to *Definitions*)
- notifying the Approved Provider if the complaint escalates and becomes a grievance (refer to *Definitions*), is a notifiable complaint (refer to *Definitions*) or is unable to be resolved appropriately in a timely manner
- providing information as requested by the Approved Provider e.g. written reports relating to the grievance
- complying with the service's *Privacy and Confidentiality Policy* and maintaining confidentiality at all times (Regulations 181, 183)
- working co-operatively with the Approved Provider and DEECD in any investigations related to grievances about Rolling Hills Preschool, it's programs or staff.

Parents/guardians are responsible for:

- raising a complaint directly with the person involved, in an attempt to resolve the matter without recourse to the complaints and grievances procedures
- communicating (preferably in writing) any concerns relating to the management or operation of the service as soon as is practicable
- raising any unresolved issues or serious concerns directly with the Approved Provider, via the Nominated Supervisor/educator or through the Grievances Subcommittee/investigator
- maintaining complete confidentiality at all times and not to use social media to raise a complaint
- co-operating with requests to meet with the Grievances Subcommittee and/or provide relevant information when requested in relation to complaints and grievances.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor complaints and grievances as recorded in the *Complaints and Grievances Register* to assess whether satisfactory resolutions have been achieved
- review the effectiveness of the policy and procedures to ensure that all complaints have been dealt with in a fair and timely manner
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2020

INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) POLICY

Best Practice – Quality Area 7

PURPOSE

This policy will provide guidelines to ensure that all users of information and communication technology (ICT) at Rolling Hills Preschool or on behalf of Rolling Hills Preschool:

- understand and follow procedures to ensure the safe and appropriate use of ICT at the service, including maintaining secure storage of information
- take responsibility to protect and maintain privacy in accordance with the service's *Privacy and Confidentiality Policy*
- are aware that only those persons authorised by the Approved Provider are permitted to access ICT at the service
- understand what constitutes illegal and inappropriate use of ICT facilities and avoid such activities.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- professional, ethical and responsible use of ICT at the service
- providing a safe workplace for management, educators, staff and others using the service's ICT facilities
- safeguarding the privacy and confidentiality of information received, transmitted or stored electronically
- ensuring that the use of the service's ICT facilities complies with all service policies and relevant government legislation
- providing management, educators and staff with online information, resources and communication tools to support the effective operation of the service.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement and volunteers at Rolling Hills Preschool. This policy does **not** apply to children. Where services are using ICT within their educational programs, they should develop a separate policy concerning the use of ICT by children.

This policy applies to all aspects of the use of ICT including:

- internet usage
- electronic mail (email)
- electronic bulletins/notice boards

- electronic discussion/news groups
- weblogs (blogs)
- social networking
- file transfer
- file storage (including the use of end point data storage devices – refer to *Definitions*)
- file sharing
- video conferencing
- streaming media
- instant messaging
- online discussion groups and chat facilities
- subscriptions to list servers, mailing lists or other like services
- copying, saving or distributing files
- viewing material electronically
- printing material
- portable communication devices including mobile and cordless phones.

BACKGROUND AND LEGISLATION

Background

The Victorian Government has funded the provision of ICT infrastructure and support to kindergartens since 2003. This support has included:

- purchase and installation of ICT equipment
- installation and maintenance of internet connection
- provision of email addresses
- training in the use of software and the internet
- help desk support.

The purpose of this support is to:

- establish ICT infrastructure to assist teachers in the development and exchange of learning materials, and in recording children’s learning
- contribute to the professional development of kindergarten teachers and assistants, and enhance their access to research in relation to child development
- establish ICT infrastructure that enhances the management of kindergartens and reduces the workload on management committees
- contribute to the sustainability of kindergartens by providing for the better management of records, including budget and finance records (refer to Kindergarten IT Program: <http://www.kindergarten.vic.gov.au/>).

The ICT environment is continually changing. Early childhood services now have access to a wide variety of technologies via fixed, wireless and mobile devices. While ICT is a cost-effective, timely and efficient tool for research, communication and management of a service, there are also legal responsibilities in relation to information privacy, security and the protection of employees, families and children.

State and federal laws, including those governing information privacy, copyright, occupational health and safety, anti-discrimination and sexual harassment, apply to the use of ICT (refer to *Legislation and standards*). Illegal and inappropriate use of ICT resources includes pornography, fraud, defamation, breach of copyright, unlawful discrimination or vilification, harassment (including sexual harassment, stalking and privacy violations) and illegal activity, including illegal peer-to-peer file sharing.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Broadcasting Services Act 1992 (Cth)*
- *Charter of Human Rights and Responsibilities Act 2006 (Vic)*
- *Classification (Publications, Films and Computer Games) Act 1995*
- *Commonwealth Classification (Publication, Films and Computer Games) Act 1995*
- *Competition and Consumer Act 2010 (Cth)*
- *Copyright Act 1968 (Cth)*
- *Copyright Amendment Act 2006 (Cth)*
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
- *Equal Opportunity Act 2010 (Vic)*
- *Freedom of Information Act 1982*
- *Health Records Act 2001 (Vic)*
- *Information Privacy Act 2000 (Vic)*
- *National Quality Standard, Quality Area 7: Leadership and Service Management*
 - Standard 7.3: Administrative systems enable the effective management of a quality service
- *Occupational Health and Safety Act 2004 (Vic)*
- *Privacy Act 1988 (Cth)*
- *Public Records Act 1973 (Vic)*
- *Sex Discrimination Act 1984 (Cth)*
- *Spam Act 2003 (Cth)*
- *Trade Marks Act 1995 (Cth)*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Anti-spyware: Software designed to remove spyware: a type of malware (refer to *Definitions*), that collects information about users without their knowledge.

Chain email: An email instructing recipients to send out multiple copies of the same email so that circulation increases exponentially.

Computer virus: Malicious software programs, a form of malware (refer to *Definitions*), that can spread from one computer to another through the sharing of infected files, and that may harm a computer system's data or performance.

Defamation: To injure or harm another person's reputation without good reason or justification. Defamation is often in the form of slander or libel.

Disclaimer: Statement(s) that seeks to exclude or limit liability and is usually related to issues such as copyright, accuracy and privacy.

Electronic communications: Email, instant messaging, communication through social media and any other material or communication sent electronically.

Encryption: The process of systematically encoding data before transmission so that an unauthorised party cannot decipher it. There are different levels of encryption available.

Endpoint data storage devices: Devices capable of storing information/data. New devices are continually being developed, and current devices include:

- laptops
- USB sticks, external or removable hard drives, thumb drives, pen drives and flash drives
- iPods or other similar devices
- cameras with USB drive connection
- iPhones/smartphones
- PCI/PC Card/PCMCIA storage cards
- PDAs (Personal Digital Assistants)
- other data-storage devices (CD-ROM and DVD).

Firewall: The primary method of keeping a computer/network secure. A firewall controls (by permitting or restricting) traffic into and out of a computer/network and, as a result, can protect these from damage by unauthorised users.

Flash drive: A small data-storage device that uses flash memory, and has a built-in USB connection. Flash drives have many names, including jump drives, thumb drives, pen drives and USB keychain drives.

Integrity: (In relation to this policy) refers to the accuracy of data. Loss of data integrity may be either gross and evident (e.g. a computer disk failing) or subtle (e.g. the alteration of information in an electronic file).

Malware: Short for 'malicious software'. Malware is intended to damage or disable computers or computer systems.

PDAs (Personal Digital Assistants): A handheld computer for managing contacts, appointments and tasks. PDAs typically include a name and address database, calendar, to-do list and note taker. Wireless PDAs may also offer email and web browsing, and data can be synchronised between a PDA and a desktop computer via a USB or wireless connection.

Portable storage device (PSD) or removable storage device (RSD): Small, lightweight, portable easy-to-use device that is capable of storing and transferring large volumes of data. These devices are either exclusively used for data storage (for example, USB keys) or are capable of multiple other functions (such as iPods and PDAs).

Security: (In relation to this policy) refers to the protection of data against unauthorised access, ensuring confidentiality of information, integrity of data and the appropriate use of computer systems and other resources.

Social Networking: Websites and applications that enable users to create and share content or to participate in social networking. These include but are not limited to Facebook, Twitter, Myspace, LinkedIn and other sites designed to share information to large groups of people.

Spam: Unsolicited and unwanted emails or other electronic communication.

USB interface: Universal Serial Bus (USB) is a widely used interface for attaching devices to a host computer. PCs and laptops have multiple USB ports that enable many devices to be connected without rebooting the computer or turning off the USB device.

USB key: Also known as sticks, drives, memory keys and flash drives, a USB key is a device that plugs into the computer's USB port and is small enough to hook onto a key ring. A USB key allows data to be easily downloaded and transported/transferred.

Vicnet: An organisation that provides a range of internet services to libraries and community groups (including kindergartens, as part of a government-funded project), including broadband and dial-up internet and email access, website and domain hosting, and website design and development. Vicnet delivers information and communication technologies, and support services to strengthen Victorian communities. For more information, visit: www.kindergarten.vic.gov.au

Virus: A program or programming code that multiplies by being copied to another program, computer or document. Viruses can be sent in attachments to an email or file, or be present on a disk or CD. While some viruses are benign or playful in intent, others can be quite harmful: erasing data or requiring the reformatting of hard drives.

SOURCES AND RELATED POLICIES

Sources

- *Acceptance Use Policy*, DEECD Information, Communications and Technology (ICT)
Resources:
www.education.vic.gov.au/about/deptpolicies/acceptableuse.htm
- IT for Kindergartens: www.kindergarten.vic.gov.au
- Organisation for Economic Co-operation and Development (OECD) (2002) *Guidelines for the Security of Information Systems and Networks: Towards a Culture of Security*: www.oecd.org

Service policies

- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Curriculum Development Policy*
- *Enrolment and Orientation Policy*
- *Governance and Management of the Service Policy*

- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that the use of the service's ICT complies with all relevant state and federal legislation (refer to *Legislation and standards*), and all service policies (including *Privacy and Confidentiality Policy* and *Code of Conduct Policy*)
- providing suitable ICT facilities to enable educators and staff to effectively manage and operate the service
- authorising the access of educators, staff, volunteers and students to the service's ICT facilities, as appropriate
- providing clear procedures and protocols that outline the parameters for use of the service's ICT facilities
- embedding a culture of awareness and understanding of security issues at the service
- ensuring that effective financial procedures and security measures are implemented where transactions are made using the service's ICT facilities, e.g. handling fee and invoice payments, and using online banking
- ensuring that the service's computer software and hardware are purchased from an appropriate and reputable supplier
- identifying the need for additional password-protected email accounts for management, educators, staff and others at the service, and providing these as appropriate
- identifying the training needs of educators and staff in relation to ICT, and providing recommendations for the inclusion of training in ICT in professional development activities
- ensuring that procedures are in place for the regular backup of critical data and information at the service
- ensuring secure storage of all information at the service, including backup files (refer to *Privacy and Confidentiality Policy*)
- adhering to the requirements of the *Privacy and Confidentiality Policy* in relation to accessing information on the service's computer/s, including emails
- considering encryption (refer to *Definitions*) of data for extra security
- ensuring that reputable anti-virus and firewall software (refer to *Definitions*) are installed on service computers, and that software is kept up to date
- developing procedures to minimise unauthorised access, use and disclosure of information and data, which may include limiting access and passwords, and encryption (refer to *Definitions*)

- ensuring that the service's liability in the event of security breaches, or unauthorised access, use and disclosure of information and data is limited by developing and publishing appropriate disclaimers (refer to *Definitions*)
- developing procedures to ensure data and information (e.g. passwords) are kept secure, and only disclosed to individuals where necessary e.g. to new educators, staff or committee of management
- developing procedures to ensure that all educators, staff, volunteers and students are aware of the requirements of this policy
- ensuring the appropriate use of endpoint data storage devices (refer to *Definitions*) by all ICT users at the service
- ensuring that all material stored on endpoint data storage devices is also stored on a backup drive, and that both device and drive are kept in a secure location
- ensuring compliance with this policy by all users of the service's ICT facilities
- ensuring that written permission is provided by parents/guardians for authorised access to the service's computer systems and internet by persons under 18 years of age (e.g. a student on placement at the service).

The Nominated Supervisor, Certified Supervisors, educators, staff and other authorised users of the service's ICT facilities are responsible for:

- complying with all relevant legislation and service policies, protocols and procedures.
- completing the authorised user agreement form
- keeping allocated passwords secure, including not sharing passwords and logging off after using a computer
- maintaining the security of ICT facilities belonging to Rolling Hills Preschool
- accessing accounts, data or files on the service's computers only where authorisation has been provided
- co-operating with other users of the service's ICT to ensure fair and equitable access to resources
- obtaining approval from the Approved Provider before purchasing licensed computer software and hardware
- ensuring confidential information is transmitted with password protection or encryption, as required
- ensuring no illegal material is transmitted at any time via any ICT medium
- using the service's email, messaging and social media facilities for service-related and lawful activities only
- using endpoint data storage devices (refer to *Definitions*) supplied by the service for service-related business only, and ensuring that this information is protected from unauthorised access and use
- ensuring that all material stored on an endpoint data storage device is also stored on a backup drive, and that both device and drive are kept in a secure location

- notifying the Approved Provider of any damage, faults or loss of endpoint data storage devices
- signing an acknowledgement form upon receipt of a USB or portable storage device (including a laptop)
- restricting the use of personal mobile phones to rostered breaks
- responding only to emergency phone calls when responsible for supervising children to ensure adequate supervision of children at all times (refer to *Supervision of Children Policy*)
- ensuring electronic files containing information about children and families are kept secure at all times (refer to *Privacy and Confidentiality Policy*).

Parents/guardians are responsible for:

- reading and understanding this *Information and Communication Technology (ICT) Policy*
- complying with all state and federal laws, the requirements of the *Education and Care Services National Regulations 2011*, and all service policies and procedures
- maintaining the privacy of any personal or health information provided to them about other individuals e.g. contact details.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2018

PRIVACY AND CONFIDENTIALITY POLICY

Mandatory – Quality Area 7

PURPOSE

This policy will provide guidelines:

- for the collection, storage, use, disclosure and disposal of personal information, including photos, videos and health information at Rolling Hills Preschool
- to ensure compliance with privacy legislation.

POLICY STATEMENT

VALUES

Rolling Hills Preschool is committed to:

- responsible and secure collection and handling of personal information
- protecting the privacy of each individual's personal information
- ensuring individuals are fully informed regarding the collection, storage, use, disclosure and disposal of their personal information, and *their* access to that information.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Rolling Hills Preschool.

BACKGROUND AND LEGISLATION

Background

Early childhood services are obligated by law, service agreements and licensing requirements to comply with the privacy and health records legislation when collecting personal and health information about individuals.

The *Health Records Act 2001* (Part 1, 7.1) and the *Privacy and Data Protection Act 2014 (Vic)* (Part 1, 6 (1)) include a clause that overrides the requirements of these Acts if they conflict with other Acts or Regulations already in place. For example, if there is a requirement under the *Education and Care Services National Law Act 2010* or the *Education and Care Services National Regulations 2011* that is inconsistent with the requirements of the privacy legislation, services are required to abide by the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011*.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Associations Incorporation Reform Act 2012* (Vic)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 181, 183
- *Freedom of Information Act 1982* (Vic)
- *Health Records Act 2001* (Vic)
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
 - Standard 7.3: Administrative systems enable the effective management of a quality service
- *Privacy and Data Protection Act 2014* (Vic)
- *Privacy Act 1988* (Cth)
- *Privacy Amendment (Enhancing Privacy Protection) Act 2012* (Cth)
- *Privacy Regulations 2013* (Cth)
- *Public Records Act 1973* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Freedom of Information Act 1982: Legislation regarding access and correction of information requests.

Health information: Any information or an opinion about the physical, mental or psychological health or ability (at any time) of an individual.

Health Records Act 2001: State legislation that regulates the management and privacy of health information handled by public and private sector bodies in Victoria.

Identifier/Unique identifier: A symbol or code (usually a number) assigned by an organisation to an individual to distinctively identify that individual while reducing privacy concerns by avoiding use of the person's name.

Personal information: Recorded information (including images) or opinion, whether true or not, about a living individual whose identity can reasonably be ascertained.

Privacy and Data Protection Act 2014: State legislation that provides for responsible collection and handling of personal information in the Victorian public sector, including some organisations, such as early childhood services contracted to provide services for government. It provides remedies for interferences with the information privacy of an individual and establishes the Commissioner for Privacy and Data Protection.

Privacy Act 1988: Commonwealth legislation that operates alongside state or territory Acts and makes provision for the collection, holding, use, correction, disclosure or transfer of personal information. The Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cth) introduced

from 12 March 2014 has made extensive amendments to the Privacy Act 1988. Organisations with a turnover of \$3 million per annum or more must comply with these regulations.

Privacy breach: An act or practice that interferes with the privacy of an individual by being contrary to, or inconsistent with, one or more of the information Privacy Principles or the new Australian Privacy Principles or any relevant code of practice.

Public Records Act 1973 (Vic): Legislation regarding the management of public sector documents.

Sensitive information: Information or an opinion about an individual's racial or ethnic origin, political opinions, membership of a political association, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association, membership of a trade union, sexual preference or practices, or criminal record. This is also considered to be personal information.

SOURCES AND RELATED POLICIES

Sources

- *Child Care Service Handbook 2012-2013*: Section 4.9
<http://docs.education.gov.au/documents/child-care-service-handbook>
- Guidelines to the Information Privacy Principles:
<http://www.oaic.gov.au/privacy/privacy-act/information-privacy-principles>
- ELAA *Early Childhood Management Manual, Version 2 2013*
- Office of the Health Services Commissioner: www.health.vic.gov.au/hsc/
- Privacy Compliance Manual: <http://www.nfplaw.org.au/privacy>
- *Privacy Guide: A guide to compliance with Victorian and Federal privacy laws*:
<http://www.nfplaw.org.au/sites/default/files/Privacy%20Guide.pdf>
- Privacy Victoria: www.privacy.vic.gov.au

Service policies

- *Child Safe Environment Policy*
- *Code of Conduct Policy*
- *Complaints and Grievances Policy*
- *Delivery and Collection of Children Policy*
- *Enrolment and Orientation Policy*
- *Information Technology Policy*
- *Staffing Policy*
- *Inclusion and Equity Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring all records and documents are maintained and stored in accordance with Regulations 181 and 183 of the *Education and Care Services National Regulations 2011*
- ensuring the service complies with the requirements of the Privacy Principles as outlined in the *Health Records Act 2001*, the *Privacy and Data Protection Act 2014 (Vic)* and, where

applicable, the *Privacy Act 1988* (Cth) and the Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cth), by developing, reviewing and implementing processes and practices that identify:

- what information the service collects about individuals, and the source of the information
- why and how the service collects, uses and discloses the information
- who will have access to the information
- risks in relation to the collection, storage, use, disclosure or disposal of and access to personal and health information collected by the service
- ensuring parents/guardians know why the information is being collected and how it will be managed
- providing adequate and appropriate secure storage for personal information collected by the service, including electronic storage
- developing procedures that will protect personal information from unauthorised access
- ensuring the appropriate use of images of children, including being aware of cultural sensitivities and the need for some images to be treated with special care
- developing procedures to monitor compliance with the requirements of this policy
- ensuring all employees and volunteers are provided with a copy of this policy, including the *Privacy Statement* of the service
- ensuring all parents/guardians are provided with the service's *Privacy Statement* and all relevant forms
- informing parents/guardians that a copy of the complete policy is available on request
- ensuring a copy of this policy, including the *Privacy Statement*, is prominently displayed at the service and available on request
- establishing procedures to be implemented if parents/guardians request that their child's image is *not* to be taken, published or recorded, or when a child requests that their photo *not* be taken.

The Nominated Supervisor is responsible for:

- assisting the Approved Provider to implement this policy
- reading and acknowledging they have read the *Privacy and Confidentiality Policy*
- providing notice to children and parents/guardians when photos/video recordings are going to be taken at the service
- ensuring educators and all staff are provided a copy of this policy and that they complete the *Letter of acknowledgement and understanding*
- obtaining informed and voluntary consent of the parents/guardians of children who will be photographed or videoed.

Certified Supervisors and other educators are responsible for:

- reading and acknowledging they have read the *Privacy and Confidentiality Policy*

- recording information on children, which must be kept secure and may be requested and viewed by the child's parents/guardians and representatives of the Department of Education and Training during an inspection visit
- ensuring they are aware of their responsibilities in relation to the collection, storage, use, disclosure and disposal of personal and health information
- implementing the requirements for the handling of personal and health information, as set out in this policy
- respecting parents' choices about their child being photographed or videoed, and children's choices about being photographed or videoed.

Parents/guardians are responsible for:

- providing accurate information when requested
- maintaining the privacy of any personal or health information provided to them about other individuals, such as contact details
- completing all permission forms and returning them to the service in a timely manner
- being sensitive and respectful to other parent/guardians who do not want their child to be photographed or videoed
- being sensitive and respectful of the privacy of other children and families in photographs/videos when using and disposing of these photographs/videos.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider of Rolling Hills Preschool will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
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AUTHORISATION

This policy was adopted by the Approved Provider of Rolling Hills Preschool on 10/09/2015.

REVIEW DATE: 10/SEPTEMBER/2020